

TOWARDS A POLICY FRAMEWORK FOR AN EFFECTIVE RESPONSIBLE GAMBLING PROGRAMME

incorporating

AN EVALUATION OF THE RESPONSIBLE GAMBLING MESSAGES, PLATFORMS UTILISED AND THE COST EFFECTIVENESS OF THE PROGRAMME

for the

SOUTH AFRICAN RESPONSIBLE GAMBLING FOUNDATION

and

EASTERN CAPE GAMBLING AND BETTING BOARD

PENULTIMATE DRAFT REPORT



WINNERS KNOW
WHEN TO STOP

CALL OUR TOLL **FREE**
COUNSELLING LINE
0800 006 008 Or
SMS **HELP** To **076 675 0710**



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EXECUTIVE SUMMARY

The Eastern Cape Gambling and Betting Board in collaboration with the South African Responsible Gambling Foundation contracted the Fort Hare Solutions (Pty) Ltd and Socio-Econometrix Services (Pty) Ltd to evaluate the impact and effectiveness of the responsible gambling message, platforms and cost effectiveness of the programme.

To adequately assess the above the following was needed:

- a) An understanding of the attributes of persons who had a gambling problem and received counselling initiated via the National Responsible Gambling Programme. As this was not fully known, it had to be researched first. The profile spanning a decade of South Africans with a gambling problem (2005 - 2014) is detailed in Part 2, pages 36 - 45;
- b) Similarly, the above was linked to the cost effectiveness assessment of the programme also over the same 10 years. This is detailed in Part III, pages 48 - 50;
- c) The next step was to complete a comprehensive literature review of responsible gambling problems spanning seven countries;
- d) From the above three areas, six research instruments were designed to inform a triangulated random longitudinal study. These addressed an in-loco observation of notices; interviews with management of establishments; punters; persons with gambling problem and members of community, and
- e) Once the field research was completed, data captured and analysed and integrated this report was written.

The first section reports on the findings of the literature review in seven countries namely, Australia, Singapore, UK, South Africa, Holland, USA and Canada. The latest worldwide trends and discussions revealed a move towards casino self-exclusion programmes, smart systems, staff training, educating punters, pop up messaging, budget and time notifications, the data mining of play history to identify persons with high potential to become addicted, responsible gambling programmes and host of methods to interact with help programmes.

Part I of this report deals with the research findings on gambling messages, media, platforms, whilst,

Part II deals with the findings of the 10-year trend review leading to developing a South African profile of persons with a gambling problem;

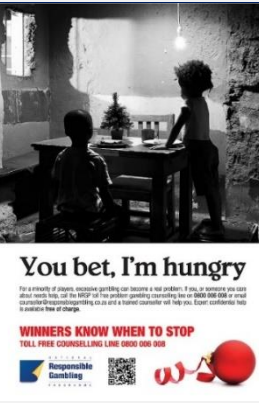
Part III deals with an assessment of the cost effectiveness of the responsible gambling programmes over a decade 2005 – 2014, and

Part IV provides policy proposals for the Board to consider in developing and implementing an improved responsible gambling programme.

SUMMARY OF THE KEY FINDINGS

PART I: RESEARCH FINDINGS ON GAMBLING MESSAGES, MEDIA, PLATFORMS ETC

- There is a need to review the “Winners Know When To Stop” campaign as the message is not clear. The current trend to link it to another message, namely “A Gambling Problem Hurts”, to mitigate its ambiguity is welcome;
- It is recommended that provinces debate the appropriateness of this message and propose others that reflect the mother tongue of their communities;
- The “Call Our Toll-Free Counselling Line, 0800 006 008” or the SMS 076 675 0710 calls are not free when called from a cell phone. A “Please Call Me,” message may be more appropriate given the telephone trend away from fixed land lines to cell phones based calls. In SA, roughly each household has access to a cell phone while less than 5% have access to a landline;
- The message does not clearly indicate, that, other than the call, the treatment (support / intervention) is free;
- The lack of an equitable access to psychologist and the cost of transport / accommodation to one-on-one counselling limits the programme’s effectiveness;
- Of the 26 posters utilised to communicate responsible gambling, the following six were voted as the most effective and likely to change social behaviour and to cause someone to think twice about the impact of problem gambling;
- Rated in terms of the best impact and ability to change social behaviour, were the following top six posters out of twenty-six assessed:

Christmas 1 - No Cookies for Santa – Oh, Oh, Oh ...	Generic Ad 1 - Grandma who lost her house	Generic Ad 3 - Young man who bet his house and lost his home
		
Christmas 2 - You Bet, I'm hungry	Generic Ad 2 - Dad bothered by a debt collector	Youth 3 - Cry for Help
		

PART II: A SOUTH AFRICAN PROFILE OF PERSONS WITH A GAMBLING PROBLEM, 2005 – 2014

About calls to the 0800 006 008 number for Help

- 1) Nationally, over the 10-year period, there were 254 954 calls were received on the 0800 006 008 help-lines;
- 2) 31 071 (12%) resulted in a treatment to support intervention. Of these, the average is four in-patients over annum over 10 years indicating possibly the degree of pathological gambling amongst the problem gamblers;
- 3) A staggering 88% of the calls (224 339) did not result in a support measure;
- 4) Of these calls, general enquiries were (95 162 or 43%), silent calls (49 673 or 22%) and wrong number responses (28 763 or 13%). This group will need further examination as the silent calls and wrong number calls may have been someone too intimidated to talk on the line;
- 5) A follow-up system for these calls may have to be considered and implemented;
- 6) Another 50 285 (22%) were hoax calls. These have reduced drastically over the years with 8966 calls received in 2006 compared to the 319 calls in 2014;
- 7) Other methods of communication will need to be more urgently marketed eg SMS, please call me, WhatsApp, social media platforms etc. More consideration for persons with hearing, verbal, visual disabilities as well as communicating in the clients mother tongue need to be considered.

Since 2005, these 0800 006 008 calls have dropped significantly. In 2005 there were 3 412 (16%) problem gambling calls received and in 2014 this dropped by 50% to 1 562 calls (6%)

The above must be considered against the backdrop that there is greater access to gambling. The above could imply that:

- 1) Less persons are having gambling problems, though unlikely;
- 2) Lack of confidence with the mode of assistance or the help being offered, which will need urgent reflection and actioning, and
- 3) It may simply be a problem that can be resolved immediately e.g. a less euro-centric method of answering the telephones may help which may be deterring help seekers. This could be manifested by the silent and wrong number responses received by the call centre.

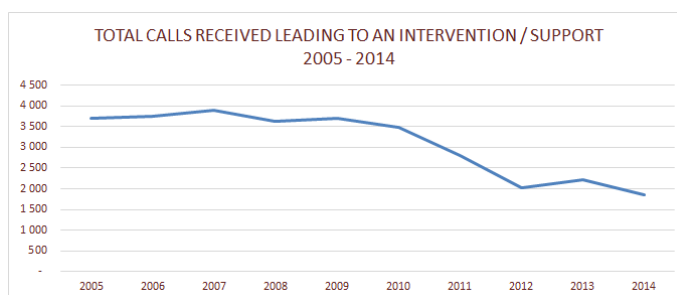


Figure 1: Calls Received on the 0800 006 008 Help Line 2005 - 2014

In short, it shows the need to improve the monitoring and evaluation of the calls.

TIME OF THE CALLS: 54% of the “calls for help” were made between midday and 20:00; 39% were between 8am and 12:00 whilst 8% were made between 20:00 and 08:00. The above is useful to know when allocating resource persons to be on standby. By further data mining the data, more trends (days of week, seasons, public holidays) could be identified and the resource base then be more optimally managed.

REFERRAL’S: With regards to family referrals, these have remained constant from 2005 – 2014 at 7-8%. In developing or evaluating the treatment programmes the following should be considered. Of all persons

concerned about the person with a gambling problem, 65% were the spouses, 12% of parents, 14% of children, 6% of siblings and 3% other. The impact on the children is of extreme concern.

BIOGRAPHICAL ATTRIBUTES OF PERSONS WITH A GAMBLING PROBLEM: Once known, an optimal preventative responsibility gambling messages / platforms can be deployed at that target group.

- 1) 61% of persons treated were males but they represent 50% of the population;
- 2) 53% were married or living together as married couples. Population average is 46%;
- 3) 30% were single. Population average is 46%;
- 4) Widowed / widower is at 3% whilst population average is 5%, and
- 5) Separated persons 2% whilst population figure is 1%.

Significantly more males, married and separated persons are afflicted with a gambling problem relative to the population average and sought help from the NRG. The responsible gambling messages should consider these groups which are more at risk.

AGE: The group at significantly higher risks is the 40–59-year-old group. 43% received support / treatment whilst they represent 27% of the population. A significant variation of 16%. A pleasant finding was that those under twenty (9% of the population) but were 2% of the persons affected. After this age group, the 20-40 year olds reflect the demographic rating. 51% had gambling problems and they are 52% of the population.

LANGUAGE PREFERENCE: More than 90% of the responsible gambling messages are in English. Less than 10% is in isi-Zulu and Sesotho. The other languages are not represented. The issue of mother tongue and pictures that represent the provincial communities and braille must be reflected in the materials. The report provides a detailed disaggregation per Province.

EMPLOYMENT STATUS: A review of 12 614 persons who had a gambling problem revealed that 59% were employed, 17% self-employed, 12% unemployed. 4% were employed part-time and 3% were housewives. Others were pensioners (3%) and 0,4% were retired. Again, advertorial materials must consider these groups.

RELATED PROBLEMS: Persons who have gambling problems also have a range of other problems. This should be considered in the treatment programmes and gambling messages.

PREVIOUS GAMBLING TREATMENT: Of the group of 11 709 persons with gambling problems 1 109 (9%) of them had a previous gambling treatment and had relapsed. There is a need to study these cases in evaluating the various treatment regimens available.

CASINO SELF EXCLUSION: 28% of these persons had casino exclusions yet still had access to gambling. Much need to be done to improve the inter-gambling establishment communication and management of persons who had self-excluded.

SUICIDE IDEATION: 23% of persons with gambling problems have **Suicidal Ideation**, also known as suicidal thoughts, concern thoughts about or an unusual preoccupation with suicide.

CRIMINALITY: 12% had been involved in criminal activity;

ALCOHOL / DRUG DEPENDENCE PROBLEMS: 11% had an alcohol and drug problem suggesting a need to integrate related support services.;

OTHER PSYCHIATRIC PROBLEMS: 9% had other psychiatric problems and 7% had attended **GAMBLERS ANON.**

TYPES OF GAMBLING CAUSING MORE PROBLEMS: Of all the persons who had treatment 53% predominantly played casino slots; 21% played casino table games; 12% played more than one game. Others included: Tote (2.6%); LPMs (2.2%); Private Gambling (1.6%); Bookmakers – Horses and Sports Betting (1.4%); Internet Gambling (1.3%); Lotteries (0.4%), whilst Scratch Cards and Bingo were both 0.3%

The above shows where and the relative budget allocations that should be made including the type of messages that should be targeted. The Life Style Measures associated with these will also help to fine tune the preventative messaging and support groups.

SOURCE OF COUNSELLING NUMBER: Over the past 10 years, the most valuable source of information on where to find help came from Collateral advertising inside gaming venues (43%) implying that authorities would be wise to ensure that all venues have a set norm and standard for compliance. Press coverage and Media accounted for 34%. The remaining 13% was distributed as follows: Staff at Gaming venue (5%); NRGF Website (5%); Gambling Boards (3%); More than one source 3%; Spouses currently in treatment; Gambling Anonymous (2%) and other family members (0.3%).

TREATMENTS AND SUPPORT – OUTPATIENTS AND IN-PATIENTS

OUTPATIENTS: Over a 10-year period (2005 – 2014), of the 13 587 persons referred by the NRGF for outpatient treatment, 10 891 appointments were made for the persons with a gambling problem. Of these, 9 038 (83%) arrived for the appointment implying that 1 853 or 17% did not arrive honour their appointment

IN-PATIENTS: In 2014, of the 506 persons receiving treatment, 4 patients were in-patients (0.4%). This is an indication of the number of very serious compulsive gamblers who need to be physically restrained from the gambling establishments.

There were 137 patients receiving treatment in 2014 and the national dropout rate over a 10-year period was 13.7%.

FOR THE YEAR 2014: At the end of the 2014 financial year, 181 had completed their six treatment sessions and another 105 had reported for their 7th follow up session.

Others needed to be referred for group sessions (56). On average 2.6% of the persons with gambling problems are referred to group sessions, and 1.8% are sent for debt counselling.

PROVINCES WITH HIGHEST PROBLEM GAMBLING REFERRALS OVER A 10-YEAR PERIOD

Out of every 10 000 persons in five of South Africa's provinces (for which data was available), Gauteng referred the most persons per capita for a problem gambling. This may not mean that Gauteng has the highest numbers of persons per capita with a gambling problem because it may be due to any combination of:

- a) Having more persons with a gambling problem due to poor prevention programme;
- b) A more effective responsible gambling programme resulting in a better awareness of the facilities available, or
- c) More effort and resources may be targeted at Gauteng Province or Other, etc.

What is known, however, is that for every 10 000 persons over age of 17 in the five Provinces below, Gauteng refers 7 for treatment / support followed by Western Cape (5), Kwa-Zulu Natal (3), Free State (2) and the Eastern Cape (2)

In short, on average, a percentage of 0.0462% of the population over 18 can expect to be referred for gambling problem if all Provinces had equal access to gambling facilities.

A very conservative estimate based on persons who reported their gambling problem on the 0800 006 008 help line indicates that the NRGP will need to provide support to 15 571 persons who have a gambling problem. It is noted that only 1862 received a treatment intervention / support for a gambling problem.

PART III: COST EFFECTIVENESS OF THE RESPONSIBLE GAMBLING PROGRAMMES, 2005 - 2014

The National Responsible Gambling Programme is exceptionally cost effective. It operated on a budget of R20m - R24m per annum. For the period 2005 - 2014 an amount of R163m funded the programme. A sharp drop of R4.7m in the funding of the programmes occurred between 2013 and 2014. The organisation does not have a system to determine if it had received its equitable share.

COST EFFECTIVENESS TREATMENT and PREVENTION CYCLES PER CAPITA

TREATMENT: The spend per patient for treatment was very low prior to 2013 with an average treatment spend of R362 per patient. The recent 2013-2014 spend of up to R1924 per patient reflects the current reality of real costs. Given that both the budget and the patient numbers had decreased significantly, a closer look will be needed to explain why the main cost driver (number of patients) had decreased.

In short, the programme is being operated on the lowest possible cost, and given the growth in the industry, this programme probably needs a budget in the range of R100m per annum. This is supported by the need to reach the learners in the country. The Eastern Cape alone has 360 000 learners in Grade 10 – Grade 12 and a total of 1.8 million from Grades 1 – 12.

In the next section, Part IV, recommendations will be tabled.

PART IV: POLICY PROPOSALS FOR AN IMPROVED RESPONSIBLE GAMBLING PROGRAMME

KEY RECOMMENDATIONS

The following key recommendations should inform the Responsible Gambling Programme Policy.

LEADERSHIP AND GOVERNANCE: A national strategic conversation is needed relating to the leadership and governance of the South African Responsible Gambling Foundation. Whilst the social responsibility of the casino industry to contribute to the funding of the programme is applauded, the governance conflicts with King IV Corporate Governance Guidelines.

The key question should be whether this important foundation should not be government's responsibility. A registered as a Section 3C public entity is recommended.

STRATEGY AND OPERATIONAL POLICY: All gambling entities should contribute financially to the responsible gambling programme based upon the "*Types of Gambling Causing More Problems*" above. The key marketing strategies must be informed by language, gender, marital status, age, employment status and the life style measures of persons who have gambling problems.

PROPOSED NEW ADDITIONAL GAMBLING REGULATIONS should prescribe that:

- a) All players should be registered, supplied with ID linked smart cards, with traceable gambling transaction history and contain the persons contact details for all gambling codes;
- b) A compulsory "*Do You Know Your Score,*" self-assessment should be completed by all players on registration or renewal of their loyalty cards which should be integrated and linked for all establishment in the country
- c) Players should be workshopped before allowing to play in short focussed briefing sessions (15 minutes) especially at larger establishments with 30 or more machines. The briefing should include the statistical probabilities of winning, the dangers of excessive gambling, recognising symptoms of problems gambling and treatment options;
- d) Smart Card Technology will indicate if the player is excluded or not thereby eliminating the current loop holes in the management of self-exclusion;
- e) All gambling machines should use smart card technology and pop-up messages warning players on the "*Amount Played*" against the pre-determined budget for the session and the "*Time Spent*" at the establishment. Machines could be programme for forced breaks in play;
- f) With prior permission on application, players' big data should be data-mined quarterly to determine players with a propensity to develop a gambling problem and a pro-active preventative counselling enforced;
- g) Interfacing with the responsible gambling programme should be multi-faceted to allow access for persons with disabilities (aural, vocal, braille and language barriers etc.);
- h) Licensing of Bingo establishments need to be relooked at as it may be misleading the public thinking they will be entertained to a bingo session when these establishments are predominantly mini slots casinos.

FUNDING: A clearer and more transparent mechanism is needed so that the NRGP receives its fair share of funding in terms of the 0,01% of the Gross Gaming Revenue as agreed to. All gaming sectors should contribute this amount. The school level education programme need to be jointly funded and rolled out by the relevant mandated departments.

HUMAN RESOURCES AND INFRASTRUCTURE: The SARGF operates on a shoe-string budget and a fivefold increase in its budget is needed to respond to the country's needs. Currently operations are tailored to suit the budget. These include Human Resources, number of counsellors available to the programme. There is a need for an equitable spread. Lack of an integrated online systems is evident in the management of both the SARGF and the Eastern Cape Gambling and Betting Board.

PROCESS IMPROVEMENTS: A joint review and study involving the SA Association of Psychologist should investigate the effectiveness of the Gambling treatment programme to agree on the most optimal treatment scenario considering culturally belief and value systems as well.

LPMs, sports betting and horse racing establishments need to be revamped significantly as the responsible gambling messages and notices are rather limited at these establishments.

EXPECTED OUTCOMES and KNOWING YOUR SCORE

The key expected outcomes are that players who gamble and bet enjoy themselves within their available means and that they wisely avoid gambling becoming a problem. Unfortunately, and sadly a few will become pathological gamblers and others will develop gambling problems of different degrees of severity.

The ideal is a win-win-win situation. The client gets value for money entertainment and hopefully breaks even financially, the gambling enterprises makes a fair profit for the services rendered, the government receives its taxes and implements a preventive problem so that gambling do not become a health issue.

Current thinking internationally includes patrons / clients knowing their predisposition to becoming a problem gambler and the taking early evasive action.

It is this essential that every person who gambles be exposed to a *"Do You Know Your Score,"* self-assessment. This should be made available and monitored by all establishments at the point of registration to play and indicate to the person his / her propensity to develop a gambling problem and to provide corrective guidance.

SIGNS OF A GAMBLING PROBLEM

Although the signs of gambling addiction are often difficult for others to spot, if you like to gamble, there's a good chance that you will be able to recognize the symptoms of gambling addiction in yourself early on, well before others will even notice.

You might have a gambling problem if you:

- a) feel out of control or have little control over your desire to gamble;
- b) feel compelled to keep gambling until you've spent your last 5c cent;
- c) hide your gambling from friends or family members;
- d) spend money that you don't have on gambling, and
- e) want to stop gambling but you seem always to fall back into a situation that caused you to gamble. If so, you could do the following:



**CALL OUR TOLL FREE
COUNSELLING LINE
0800 006 008 Or
SMS HELP To 076 675 0710**



1. BACKGROUND AND PURPOSE OF THE REPORT

The Eastern Cape Gambling and Betting Board (ECGBB), in collaboration with the South African Responsible Gambling Foundation (SARGF), issued a bid to conduct research to evaluate the impact of responsible gambling messages as well as platforms that are utilised to profile such messages.

Fort Hare Solutions (Pty) Ltd, together with Socio-Econometrix Services (Pty) Ltd, were awarded the contract to conduct the research.

It is noted that:

- a) The ECGBB functions include the issuing and revocation of gambling licenses, exclusion of problem gamblers, and protection of the public against unscrupulous gambling practices and control of illegal gambling activities in the Province.
- b) The SARGF functions include the provision of, amongst other, treatment and counselling, prevention and educational awareness programmes designed to minimize the harmful effects of problem gambling on communities, gamblers and their immediate family members as well as educating the public about the harmful effects of problem gambling.
- c) No research has been carried out in the country to assess whether platforms that are utilised to communicate responsible gambling messages are appropriate and can lead to a change in social behaviour by those who interact with such messages.
- d) The ECGBB and SARGF have identified gambling related harm as both personal, economic and / or disposable leisure time and these are reflected in the recent research studies conducted by ECGBB.
- e) In researching and evaluating harm minimisation the following should be adhered to:
 - i. be researched accordingly;
 - ii. the contribution of each intervention should be assessed;
 - iii. the sample should be sufficiently large to carry out appropriate statistical tests;
 - iv. appropriate, measurable dependent variables should be identified and used;
 - v. a control group should be included to reduce the possibility that changes resulted from something other than the harm minimisation initiative;
 - vi. follow-up measures should be used to determine whether impact is temporary and new learning, where valid and reliable, should be widely disseminated in a variety of formats to ensure findings are accessible to the widest range of stakeholders.

2. METHODOLOGY

In researching this important aspect that impacts on the dignity of the individual, their families and communities, the following methodology was carried out.

A literature review preceded the development of the research instruments coupled with a 10-year review of the National Responsible gamble programme utilising their Annual Reports for the period 2005 - 2014 and extracting the relevant statistics based on telephone calls received and the subsequent intervention applied as well as extracting the Financial Statements.

Six questionnaires were designed, tested and approved by an independent research adjudicator who was assigned the key operational oversight role and to quality assure the research.

These instruments were administered on a one-on-one interview with 560 persons across five of the six district municipalities in the Eastern Cape, stretching from Nelson Mandela Bay's Boardwalk Casino to Alfred Nzo's Wild Coast Casino and included totes, totalizer agencies, Limited Pay-Out Machine and Bingo venues.

The six questionnaires were data captured analyses and this report written.

Geographic Area and Sectors Sampled

The table below indicates the categories of gaming establishments sampled and the number of sites within the category.

Table 1: The Research Area - Municipalities and the Gambling Establishments

Line Ref	METROS, DISTRICT AND LOCAL MUNICIPALITIES	Casino	05 x Type A 3-5 machines	05 x Type B 20-40 machines	04 x Type C 13-20 machines	08 Bookmakers	06 Tabs	03 Bingos	Total Sites
1	Alfred Nzo								
2	Matatiele Local Municipality		4	1		1	1	1	8
3	Mbizana Local Municipality	1							1
4	Amathole								
5	Amahlathi Local Municipality		4	1	1				6
6	Mnquma Local Municipality							1	1
7	Buffalo City Metropolitan Municipality								
8	Buffalo City Metropolitan Municipality	1	4	1	1	2	2		11
9	Nelson Mandela Bay Metropolitan Municipality								
10	Nelson Mandela Bay Metropolitan Municipality	1	4	1	1	2	2		11
11	OR Tambo								
12	King Sabata Dalindyebo Local Municipality		4	1	1		1	1	8
	Grand Total	3	20	5	4	5	6	3	46

3. LAYOUT OF THE REPORT

The report is divided into four parts.

- ✓ Part I of this report deals with the research findings on gambling messages, media, platforms;
- ✓ Part II deals with the findings of the 10-year trend review leading to developing a South African profile of persons with a gambling problem;
- ✓ Part III deals with an assessment of the cost effectiveness of the responsible gambling programmes over a decade 2005 – 2014, and
- ✓ Part IV recommends and provides a proposed policy framework for the Board to consider in developing and implementing an improved Responsible Gambling Programme.

4. LITERATURE REVIEW ON RESPONSIBLE GAMBLING PROGRAMME

4.1. Introduction

The objective is to present the literature review report aimed at informing the research instruments, towards achieving the project objectives, namely: - Research into the impact of gambling messages and platforms utilised.

The structure of the literature review

The structure of the review is as follows: -

- ✓ The report provides an introductory overview and background to the project, the definition of responsible gambling, the importance of responsible gambling programmes and the frameworks underpinning the responsible gambling policies, and
- ✓ The second part presents the review of the trends of responsible gambling programmes in various countries.

Definition of responsible gambling

According to the European Casino Association¹ (ECA) there is no universally agreed definitions of the concepts of responsible gambling and irresponsible gambling. The ECA² has, however provided the working definition of responsible gambling as referring to gambling within someone's means including both money and time.

The ECA³ further defines irresponsible gambling as referring to any gambling that is not responsible gambling and as such causes harm to the person concerned and / or others in the person's environment.

The responsible gambling programmes, worldwide share the following elements:

- a) institutionalization of practices on responsible gambling practices, through responsible gambling policies and strategies, a combination of legislation, associated regulations, licence conditions and codes of conduct (whether mandatory or voluntary), and
- b) the development of strategies that incorporate reduction of the harm caused by exploiting the benefits of gambling (for example revenue generation) to promote good public policy.

In South Africa, casinos operate Host Responsibility Systems that include guidelines and procedures for identifying problem gamblers, specifying who is responsible to intervene and maintain record systems.

The activities that broadly incorporate treatment and counselling, public awareness, education, training as well as research.

The responsible gambling practices include: - venue exclusions; policies for identifying problem gambling; voluntary pre-commitment based on loyalty card systems and limitations on cash withdrawals and credit facilities; accessibility of information on responsible gambling; accessibility of information on help for irresponsible players and counselling services for irresponsible players.

The problem area addressed by responsible gambling programmes (RGP)

The problem area that the RGP seeks to address is - irresponsible gambling and the associated negative effects. The most common measures applied in various countries are outlined in the section covering the trends in managing responsible gambling programmes in this report.

¹ *Responsible Gambling in the EU; A Working Paper* by the European Casino Association Brussels, 19 June 2007

² *Ibid.*

³ *Ibid.*

The importance of responsible gambling programmes

The responsible gambling programmes promote the concept of responsible gambling behaviour in land-based casinos and address the issue of irresponsible gambling⁴. Secondly, the promotion of responsible gambling promotes the concept of the informed citizen and self-responsible behaviour⁵.

The casino operators have a socially responsibility of addressing problem gambling and through implementing the responsible gambling programmes, the casinos build and maintain their reputation and credibility of providing secure gambling environment and responsible gambling (both of which are integrated in their player protection programmes).⁶

Frameworks underpinning the responsible gambling policies

Various countries have adopted various frameworks in managing the responsible gambling practices and problem gambling practices. The frameworks provide different perspectives to inform the development of effective responsible gambling policies and strategies, as follows⁷:-

The Public Health Model proponents view environmental actors, including the gambling products, as being intrinsically dangerous goods, and as such, consumers deserve much greater protection. On the other hand, the proponents of the Reno Model emphasise the importance of providing information to players and the accessibility of safety mechanisms such as voluntary pre-commitment or individual self-exclusion⁸.

According to Williams⁹, a public health model outlines a three - phased prevention strategy encompassing the primary, secondary and tertiary elements.

Primary Prevention: effort to prevent individuals in the general population from becoming problem gamblers;

Secondary Prevention: effort to prevent the development of problem gambling in individuals with risk factors for the condition; and treatment for problem gamblers.

According to Williams et al¹⁰, the jurisdictions that view problem and pathological gambling as a significant public health problem are some parts of Europe, consequently, the appropriate public policy measures are also aimed at addressing the harm caused by maximising the benefits of gambling.

⁴ *Ibid.*

⁵; *Ibid.*

⁶ *Ibid.*

⁷ Williams, R.J., West, B.L. and R.I. Simpson (2012), "Prevention of Problem Gambling: A Comprehensive Review of the Evidence and Identified Best Practices", Report prepared for the Ontario Problem Gambling Research Centre and the Ontario Ministry of Health and Long Term Care, October.

⁸ Williams, R.J. & others, *op.cit.*

⁹ Williams, R.J. & others, *Ibid.*

¹⁰ *Ibid*

4.2. Review of Trends in Responsible Gambling Programmes and Actions in Various Countries

4.2.1. UNITED KINGDOM

The ECA, (which represented the interests of casinos and the casino employees of the following countries in 2007: - Austria, Belgium, the Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Italy, Luxembourg, the Netherlands, Poland, Portugal, Romania, Slovenia, Spain, Sweden, UK and Switzerland)¹¹ promotes an integrated approach in addressing the irresponsible gambling issues and in maintaining a responsible gambling and entertainment environment.

Apart from the responsible gambling provisions, the legislation and the strategies developed by the EU National Regulator, the ECA members have adopted a code of conduct, (namely, “Code of Practice for Responsible Gaming in the Casino Environment”).

The code of conduct is aimed at the following objectives:

- a) guiding the casino operators to serve the public and protect vulnerable individuals in an ethical and transparent approach to their activities;
- b) providing an industry approach to the promotion of responsible gambling practices and is based on the casino industry’s commitment to best practices in respect of responsible gambling;
- c) applying schemes of self-exclusion for players requesting to be excluded;
- d) providing remedial actions including information and advice on the help available through counselling services;
- e) controlling access to gambling facilities focussing on controlling and preventing access for vulnerable people and adolescents, and
- f) training casino management and employees in methods of identifying and managing irresponsible gambling.

The ECA encourages the sharing of ideas, experience and best practices amongst the casino operators, on methods of controlling irresponsible gambling and promoting responsible gambling.

The responsible gambling programme implemented in casinos across Europe also include the following:

- a) availability of information on responsible gambling;
- b) counselling services for irresponsible players;
- c) sanctioning self-exclusion of players;
- d) promote controlled consumption of alcoholic beverages;
- e) prevent minors from gambling and
- f) training of casino management and employees in how to identify and how to deal with irresponsible gambling.

GamCare, in the UK is a non-profit organization which addresses not only gambling problems but also provides counselling for issues associated with problem gambling.

¹¹ *Ibid*

4.2.2. NETHERLANDS

All the all 14 branches of the state-owned casinos in Holland promote the Responsible Gambling Programme and list their goals (in the mission statements) as profit making through gambling and the implementation of the Responsible Gambling Programme.¹²

To emphasise on the prioritisation of the Responsible Gambling Programme (RGP), as a choice over the profiteering, the casinos mission statements outlines that if there is a conflict between the two goals, the RGP goal would prevail over the profit goal.

The RGP further incorporates the following elements:

- a) awareness programmes that outline the risks of the games and trains casino staff to identify and deal with suspected problem gamblers;
- b) gambling advertising is limited and low key such as not aiming at youngsters or other risk groups;
- c) all¹⁴ Holland's casinos are **linked to an ID based computer registration system which tracks individuals' frequency of play, location of play, hours played, money spent and lists of any incidents or observation reports involving an individual;** and
- d) the casinos offer voluntary self-exclusion and monitor high risk players.

4.2.3. CANADA

The adopted RGP approaches used by Canadian jurisdictions include:

- a) voluntary self-exclusion programmes from certain gambling venues;
- b) harm reduction measures on electronic Gaming Machines (EGM) such as pop-up warnings, clocks, problem gambling hotline referrals and player expenditure data;
- c) restrictions of betting limits minimum, age of players, alcohol and or tobacco consumption, hours of operation, cheque cashing and credit granting;
- d) responsible gambling training for gambling industry employees;
- e) problem gambling education and awareness campaigns as in gambling venue player information brochures and posters with information on odds, payback percentages and how games work and problem gambling modules for use in school curricula;
- f) gambling venue information / counselling kiosks that provide facts about the gambling products, tips for gambling prudently, signs of problem gambling and available treatment and in some case crisis intervention; and
- g) limits on the amount and type of gambling advertising and promotional activities

4.2.4. SINGAPORE

The Singapore National Council on Problem Gambling (NCPG) adopted a RGP focusing on the following aspects¹³:

- a) raising awareness of and support effective treatment programmes to help individuals with gambling disorders;
- b) a voluntary stop-loss service affording patrons to limit the amounts of money they wish to spend on gambling;
- c) the casino establishments prominently display responsible gaming signage featuring the city-state's problem gambling help line and offer on-site counselling services to provide immediate assistance to patrons experiencing gambling problems; and

¹² *The Future of Gambling in Europe and North America: Comparisons and Contrasts of Economic and Political Trends, and of Social Pressures*. Institute for the Study of Gambling and commercial gaming, University of Nevada, Reno. Eadington. W. R. (2008),

¹³ *Ibid*

- d) the casino establishments train staff members to detect and address problem gambling cases.

4.2.5. UNITED STATES OF AMERICA

The Massachusetts Partnership for Responsible Gambling has taken proactive measures, to ensure that problem gambling prevention and responsible gaming are key considerations in any policy decisions¹⁴. Responsible gambling programmes are comprehensive and include provision of information and counselling services on problem gambling, staff training for identifying and dealing with problem gambling, a voluntary stop-loss service, legislation that regulates provisioning of resources for problem gambling and the establishment of an oversight body to oversee implementation of problem gambling programmes and the effectiveness thereof.

The Massachusetts Partnership for Responsible Gambling provides the development of responsible gambling policy and provides the oversight structures and mechanisms.

4.2.6. AUSTRALIA

The Responsible Gambling Regulatory Programmes are established in Australian jurisdictions through legislation, regulations, licence conditions and codes of conduct¹⁵.

The responsible gambling practices include: venue exclusions; policies for identifying problem gambling; voluntary pre-commitment based on loyalty card systems and limitations on cash withdrawals and credit facilities.

The casinos implement responsible gambling policies or practices, ranging from providing information on counselling services to **proactive systems** concerning the identification of problem gamblers on the gaming floor.

According to South Australian Centre for Economic Studies Report, the responsible gambling measures broadly fit into the following categories¹⁶:

CASINO SELF-EXCLUSION PROGRAMMES

Self-exclusion programmes sanction problem gamblers to facilitate their own exclusion from the venue. Gamblers commit to the exclusion through signing agreements at the relevant casino and/or seek an exclusion from a relevant regulatory body, or varying periods and may, or may not, include a cooling-off period wherein gamblers can decide not to proceed with the exclusion.

The casinos are obliged to take reasonable steps to identify people experiencing gambling-problems (or who are at risk of harm). The New Zealand Gambling Act 2003 obliges casinos to establish policies and procedures to assist in the early identification of customers experiencing gambling-related harm or who at 'at risk' of developing harm. The identification policy is determined by the industry, though the staff training is approved by the New Zealand Gambling Commission. Similar provisions exist in many jurisdictions in Australia.

¹⁴*ibid*

¹⁵ *Responsible Gambling and Casinos in Australia*, South Australian Centre for Economic Studies, University of Adelaide ORC International Pty Ltd, 2005

¹⁶ *Responsible Gambling and Casinos in Australia*, *ibid*

SMART SYSTEMS

The 'smart systems' refers to electronic methods for monitoring and/or reducing the problems associated with gambling at casinos. These **systems operate together with loyalty card systems** and offer players to fix limits on their play (pre-commitment capability), and can be utilized **to track periods of gambling to identify patterns that indicative of problem gambling**.

STAFF TRAINING

Responsible gambling training is promoted by the code of practice applicable in the jurisdiction.

In Australia, the casino staff is capacitated in:

- a) staff responsibilities in terms of the legislation;
- b) the nature of problem gambling; the operation of exclusion programmes; how to contact counselling agencies; and
- c) the warning signs of problem gambling; and, how to intervene when problem gamblers experience problems.

Adelaide and Auckland have extensive Host Responsibility Programs that identifies problem gamblers and coordinating with support services and provide on-site counselling. The accredited training programmes include documented procedure manuals.

4.2.7. SOUTH AFRICA

The National Responsible Gambling Programme (NRGP) constitutes a set of activities that integrate treatment and counselling, public awareness, education, training and research.

The public education and awareness campaigns

The public advocacy campaign is aimed at educating gamblers and potential gamblers about responsible gambling. The public education programme includes campaign in the media, both printed and electronic, the production and regular placement of public service advertorials nationally in newspapers and magazines and on actuality programmes.

National schools programme

The NRGP's National Schools Programme was implemented to comply with the provision of national gambling legislation, mandating that all school learners be taught about the risks associated with gambling.

National Responsible Gambling Programme commissioned a school curriculum including responsible gambling, targeting learners, as part of the life skills orientation syllabus.

Treatment and Counselling

The treatment and counselling is provided through a Problem Gambling Counselling Line service and Clients with complex gambling issues are provided with psychiatric interventions.

Literature Review Conclusion

The gambling industry throughout all jurisdictions, worldwide, has the potential of causing harm to the participants. To mitigate this challenge, the gambling and betting industries have adopted the Responsible Gambling Programme, composed of a variety of responsible gambling measures and interventions.

The measures broadly address the common harm minimisation strategies associated with problem gambling and broad consumer protection functions.

PART 1

AN ASSESSMENT OF THE EFFECTIVENESS AND IMPACT OF THE RESPONSIBLE GAMBLING MESSAGES

based on a

PRIMARY RESEARCH

PART I – AN ASSESSMENT OF THE EFFECTIVENESS AND IMPACT OF THE RESPONSIBLE GAMBLING MESSAGES AND PLATFORMS

5. FINDINGS OF THE STUDY

The National Responsible Gambling Programme communicated several responsible gambling messages via posters, pamphlets, TV and radio media. The effectiveness and potential impact of each to change gambling behaviour are evaluated below.

To do so, respondents were required to indicate:

- whether they saw the poster before;
- indicate out of 10 points a score for the responsible gambling message and another 10 points for indicating the degree to which the message could change gambling behaviour, and
- the product of (a) and (b) yields a numerical value to indicate the effectiveness and impact of the responsible gambling messages.

Other aspects relating to the assessment of platforms utilised in the responsible programme is dealt with later in the report.

The findings of this section are based on the responses from questionnaires 4(a) and 4(b).

5.1. Sample Demographics – Gender

This sample of 207 individuals, fairly reflected the representation of all persons in South Africa.

Table 2: The Sample – Race group and Gender

GROUPS	Female	Male	Grand Total	% of Total
AFRICAN	58	78	136	66%
ASIAN		1	1	0%
COLOURED	14	18	32	15%
ETHIOPIAN		1	1	0%
INDIAN	1	3	4	2%
WHITE	17	16	33	16%
Grand Total	90	117	207	
	43%	57%	100%	

5.2. Sample Demographics – Age Groups

The random sample was composed of all age groups who can gamble. The 18 and 19 year olds represented 1% followed by 20 - 40-year-old group (62%); 41 - 60-year-old group (21%); Over 60-year-old group (5%) and the 11% adults who did not disclose their ages.

Table 3: The Sample – Age and Race Groups

Groups	20 to 40-year age group	41 to 60-year age group	Did not Disclose	Older than 60	Under 20-year age group	Grand Total
AFRICAN	98	15	19	4	1	137
ASIAN	1					1
COLOURED	17	13		1	1	32
ETHIOPIAN	1					1
INDIAN		3	1			4
WHITE	13	12	2	6		33
Grand Total	130	43	22	11	2	208

THE DISTRIBUTION OF AGE GROUPS AS A PERCENTAGE OF TOTAL SAMPLE

Groups	20 to 40-year age group	41 to 60-year age group	Did not Disclose	Older than 60	Under 20-year age group	Grand Total
AFRICAN	47,1%	7,2%	9,1%	1,9%	0,5%	65,9%
ASIAN	0,5%					0,5%
COLOURED	8,2%	6,3%		0,5%	0,5%	15,4%
ETHIOPIAN	0,5%					0,5%
INDIAN		1,4%	0,5%			1,9%
WHITE	6,3%	5,8%	1,0%	2,9%	0,0%	15,9%
Grand Total	62,50%	20,67%	10,58%	5,29%	0,96%	100,00%

5.3. Sample Demographics – Home Language Groups

The random sample was composed of 56% Xhosa speakers, 18% English, 16% Afrikaans speakers fairly representing the population of the Eastern Cape (where the sample was drawn from)

Table 4: The Sample – Home Language and Gender

Languages	Female	Male	Grand Total	% of Total
AFRIKAANS	12	21	33	15,9%
ENGLISH	19	19	38	18,4%
ETHIOPIAN		1	1	0,5%
FILIPINO		1	1	0,5%
NIGERIAN		2	2	1,0%
Shona		2	2	1,0%
SOTHO	10	4	14	6,8%
XHOSA	48	67	115	55,6%
ZULU	1		1	0,5%
Grand Total	90	117	207	
	43%	57%	100%	

5.4. The Posters Based Advertorial – Message Impact and Effectiveness

26 different posters were presented to 208 respondents to determine the effectiveness of the responsible gambling message based on Questionnaire 4(b).

Respondents were asked to rate the 26 posters out of ten points for each of the two following questions:

- which poster conveys the best “Responsible Gambling Message,”
- “would this poster make you think twice about gambling, and
- have you seen this advert before?

The cumulative product of (a) and (b) above were ranked in descending order to obtain the list below and the relative weighting to the overall total obtained.

Assuming the organisation had only R1 million budget, the percentage of total effective rating could be used to determine the relative budgets.

The more effective posters are also identified for use in the themes e.g. Christmas; Easter; Women; Youth and Generic Adverts.

COMPARATIVE RATINGS FOR THE 26 POSTERS

Table 5: Effectiveness Ranking of the 26 Poster Adverts and their Percentage Effectiveness

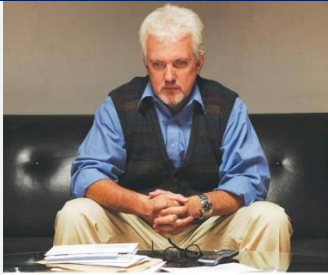
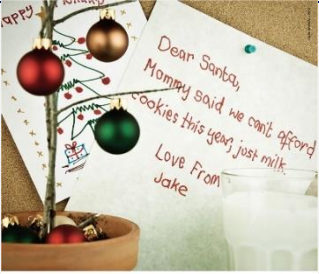
Effectiveness Ranking	Printed Poster Adverts	% of Total Effective Rating	Proposed Budget Spend per R1m
1	Christmas 1.3 No Cookies for Santa - Oh Oh Oh	13%	R 129 931,91
2	Generic Ad 1.3 Grandma who lost her house	7%	R 65 341,19
3	Generic Ad 3.3 Young man who bet his house and lost his home	6%	R 63 040,10
4	Christmas 2.3 You Bet, I'm hungry	5%	R 54 045,40
5	Generic Ad 2.3 Dad bothered by a debt collector	5%	R 53 256,30
6	Youth 3.3 Cry for Help	5%	R 51 253,19
7	Christmas 3.3 Oh Oh Oh - Sad Christmas	4%	R 44 096,06
8	Youth 4.3 Game Over - Despondent and Alone	4%	R 42 275,05
9	Youth 1.3 Young depressed youth - Dicing with Risk	4%	R 40 216,76
10	Illegal Gambling 3.3 Unlicensed establishment gambling	4%	R 35 167,59
11	Christmas 6.3 Don't Kiss your Bonus Goodbye	4%	R 35 140,00
12	Youth 5.3 Dice with Risk - Despondent and Alone	3%	R 34 593,69
13	Generic Ad 4.3 080 006 008 Make the right call - slot wheel	3%	R 30 151,53
14	Generic Ad 5.3 Stay on Track Horse Racing	3%	R 28 832,68
15	Generic Ad 6.3 0800 006 008 Make the right call - Roulette	3%	R 28 755,42
16	Christmas 4.3 Jingle Bells	3%	R 27 822,84
17	Easter 1.3 Broken Easter Egg - Gamble with Care	3%	R 27 745,59
18	Illegal Gambling 2.3 Dice - U - Bupala mataese?	3%	R 27 320,69
19	Generic Ad 7.3 Money or the Box - Dominos	3%	R 25 505,19
20	Christmas 5.3 Ho Ho Ho - Winning Hand	3%	R 25 262,39
21	Youth 2.3 Youth playing Cards - Just a Game	2%	R 24 903,71
22	Illegal Gambling 1.3 Ifafi / Mo - China	2%	R 23 082,70
23	Women's Day 2.3 Good Bye Lady Luck	2%	R 22 254,96
24	Women's Day 1.3 Queen of My Heart	2%	R 20 632,61
25	Youth 6.3 Dice - Hey Dude	2%	R 19 716,58
26	Youth 7.3 Playground - Roll on Break Time	2%	R 19 655,88
		100%	R 1 000 000,00

5.5. The Top 26 Poster Adverts - Per Effectiveness Ranking

Based on the table above, the posters reflect the order of effectiveness as found in the research with regards to the effectiveness of the gambling messages.

Table 6: The Posters Ranked and their percentage effectiveness

Christmas 1 - No Cookies for Santa – Oh, Oh, Oh ... Ranked 1	Generic Ad 1 - Grandma who lost her house Ranked 2	Generic Ad 3 - Young man who bet his house and lost his home Ranked 3
		

Christmas 2 - You Bet, I'm hungry Ranked 4  You bet, I'm hungry For a minority of players, excessive gambling can become a real problem. If you, or someone you care about, needs help, call the NGBP toll free problem gambling counselling line on 0800 006 008 or email counsellor@responsiblegambling.co.za and a trained counsellor will help you. Expert confidential help is available free of charge. WINNERS KNOW WHEN TO STOP TOLL FREE COUNSELLING LINE 0800 006 008   	Generic Ad 2 - Dad bothered by a debt collector - Ranked 5  "What I didn't bet on was debt collectors calling me" A gambling problem hurts. It doesn't have to be that way. CALL OUR TOLL FREE COUNSELLING LINE 0800 006 008 or send a "please call me" or sms to 076 675 0710. counsellor@responsiblegambling.co.za WINNERS KNOW WHEN TO STOP   	Youth 3 - Cry for Help Ranked 6  It's a free call For a minority of players, excessive gambling can become a real problem. If you, or someone you care about, needs help, call the NGBP toll free problem gambling counselling line on 0800 006 008 or email counsellor@responsiblegambling.co.za and a trained counsellor will help you. Expert confidential help is available free of charge. WINNERS KNOW WHEN TO STOP TOLL FREE COUNSELLING LINE 0800 006 008 or send a "please call me" or sms to 076 675 0710   
Christmas 3 - Oh Oh Oh - Sad Christmas Ranked 7  Oh, Oh, Oh... For a minority of players, excessive gambling can become a real problem. If you, or someone you care about, needs help, call the NGBP toll free problem gambling counselling line on 0800 006 008 or email counsellor@responsiblegambling.co.za and a trained counsellor will help you. Expert confidential help is available free of charge. WINNERS KNOW WHEN TO STOP TOLL FREE COUNSELLING LINE 0800 006 008   	Youth 4 - Game Over - Despondent and Alone Ranked 8  Dicing with risk For a minority of players, excessive gambling can become a real problem. If you, or someone you care about, needs help, call the NGBP toll free problem gambling counselling line on 0800 006 008 or email counsellor@responsiblegambling.co.za and a trained counsellor will help you. Expert confidential help is available free of charge. WINNERS KNOW WHEN TO STOP TOLL FREE COUNSELLING LINE 0800 006 008 or send a "please call me" or sms to 076 675 0710   	Youth 1 - Young depressed youth - Dicing with Risk Game Over - Ranked 9  GAME OVER For a minority of players, excessive gambling can become a real problem. If you, or someone you care about, needs help, call the NGBP toll free problem gambling counselling line on 0800 006 008 or email counsellor@responsiblegambling.co.za and a trained counsellor will help you. Expert confidential help is available free of charge. WINNERS KNOW WHEN TO STOP TOLL FREE COUNSELLING LINE 0800 006 008 or send a "please call me" or sms to 076 675 0710   
ILLEGAL GAMBLING 3 - UNLICENSED ESTABLISHMENT GAMBLING Ranked 10		
	Do you know that gambling in an unlicensed establishment is a crime? Gambling in an unlicensed operation or machine is prosecutable crime. If you want to gamble, be responsible and gamble in a licensed operation. For more information on illegal gambling call the National Gambling Board on 086 722 7713. If you or someone you know has a gambling problem you can contact the Problem Gambling Treatment and Counselling Centre on 0800 006 008 or text Help to 076 675 0710 or email helpline@sargf.org.za for free and professional advice.  WINNERS KNOW WHEN TO STOP A GAMBLING PROBLEM HURTS Call Our Toll Free Counselling Line 0800 006 008 or SMS 076 675 0710  	

Christmas 6 - Don't Kiss your Bonus Goodbye - Ranked 11	Youth 5 - Dice with Risk - Despondent and Alone - Ranked 12	Generic Ad 4 0800 006 008 Make the right call - slot wheel - Ranked 13
 Don't kiss your bonus goodbye For the overwhelming majority of South Africans gambling is harmless entertainment. But for the very few who gamble more than they can afford over the festive season, it can become a problem. If you, or someone you care about needs help, call the NRGPF toll free problem gambling counselling line on 0800 006 008 or email counsellor@responsiblegambling.co.za and a trained counsellor will help you. Expert confidential help is available free of charge. Winners know when to stop. Toll Free Counselling Line 0800 006 008 	 DICE WITH RISK. If you, a friend, or someone you care about needs help, call the NRGPF toll free problem gambling counselling line on 0800 006 008 or email counsellor@responsiblegambling.co.za and a trained counsellor will help you. Expert confidential help is available free of charge. Winners know when to stop. Toll Free Counselling Line 0800 006 008 	 Make the right call. If you, or someone you care about needs help, call the NRGPF toll free problem gambling counselling line on 0800 006 008 or email counsellor@responsiblegambling.co.za and a trained counsellor will help you. Expert confidential help is available free of charge. Winners know when to stop. Toll Free Counselling Line 0800 006 008 
Generic Ad 5 - Stay on Track Horse Racing Ranked 14	Generic Ad 6 - 0800 006 008 Make the right call – Roulette - Ranked 15	Christmas 4 – Jingle Bells Ranked 16
 Stay on track. For the overwhelming majority of South Africans gambling is harmless entertainment. But for the very few who gamble excessively, it can become a problem. If you, or someone you care about needs help, call the NRGPF toll free problem gambling counselling line on 0800 006 008 or email counsellor@responsiblegambling.co.za and a trained counsellor will help you. Winners know when to stop. Toll Free Counselling Line 0800 006 008 	 Make the right call. If you, or someone you care about needs help, call the NRGPF toll free problem gambling counselling line on 0800 006 008 or email counsellor@responsiblegambling.co.za and a trained counsellor will help you. Expert confidential help is available free of charge. Winners know when to stop. Toll Free Counselling Line 0800 006 008 	 Jingle Bells For the overwhelming majority of South Africans gambling is harmless entertainment. But for the very few who gamble more than they can afford over the festive season, it can become a problem. If you, or someone you care about needs help, call the NRGPF toll free problem gambling counselling line on 0800 006 008 or email counsellor@responsiblegambling.co.za and a trained counsellor will help you. Expert confidential help is available free of charge. Winners know when to stop. Toll Free Counselling Line 0800 006 008 
Easter 1 - Broken Easter Egg - Gamble with Care - Ranked 17	ILLEGAL GAMBLING 2 - DICE - U - BUPALA MATAESE? - Ranked 18	
 Gamble with care. For the overwhelming majority of South Africans gambling is harmless entertainment. But for the very few who gamble more than they can afford over the Easter holidays, it can become a problem. If you, or someone you care about needs help, call the NRGPF toll free problem gambling counselling line on 0800 006 008 or email counsellor@responsiblegambling.co.za and a trained counsellor will help you. Expert confidential help is available free of charge. Winners know when to stop. Toll Free Counselling Line 0800 006 008 	 U bupala mataese? For many women, gambling with dice is just a harmless game, but did you know that it is illegal gambling? Such games may only take place inside registered institutions, and have to be controlled by a regulating body. If you or someone you know has a gambling problem you can contact the Problem Gambling Treatment and Counselling Centre on 0800 006 008 or text Help to 076 675 0710 or email help@narg.org.za for free and professional advice.  	

Generic Ad 7 - Money or the Box – Dominos - Ranked 19  Money or the box. For the overwhelming majority of South Africans gambling is harmless entertainment. But for the very few who gamble excessively, it can become a problem. If you, or someone you care about needs help, call the NRGP toll free problem gambling counselling line on 0800 006 008 or email counsellor@responsiblegambling.co.za and a trained counsellor will help you. Winners know when to stop. Toll Free Counselling Line 0800 006 008 	Christmas 5 - Ho Ho Ho - Winning Hand Ranked 20  Ho Ho Ho... For the overwhelming majority of South Africans gambling is harmless entertainment. But for the very few who gamble more than they can afford over the Festive Season, it can become a problem. If you, or someone you care about needs help, call the NRGP toll free problem gambling counselling line on 0800 006 008 or email counsellor@responsiblegambling.co.za and a trained counsellor will help you. Expert confidential help is available free of charge. Winners know when to stop. Toll Free Counselling Line 0800 006 008 	Youth 2 - Youth playing Cards - Just a Game - Ranked 21  JUST A GAME? For a minority of players, excessive gambling can become a real problem. If you, or someone you care about needs help, call the NRGP toll free problem gambling counselling line on 0800 006 008 or email counsellor@responsiblegambling.co.za and a trained counsellor will help you. Expert confidential help is available free of charge. WINNERS KNOW WHEN TO STOP TOLL FREE COUNSELLING LINE 0800 006 008 or send a "please call me" or sms to 076 675 0710 
ILLEGAL GAMBLING 1 - IFAFI / MO – CHINA - Ranked 22  Ifafi ukudlala nje? Fafi, or 'mo-china', is a very popular game, especially in the townships. But did you know that it is actually a betting racket, and is illegal? If you or someone you know has a gambling problem you can contact the Problem Gambling Treatment and Counselling Centre on 0800 006 008 or text Help to 076 675 0710 or email help@nargf.org.za for free and professional advice. 		Women's Day 2 - Good Bye Lady Luck Ranked 23  <i>Goodbye Lady Luck</i> For the overwhelming majority of women, gambling is just harmless entertainment. But for the very few who gamble excessively, it can become a problem. It's a problem that can affect South African women, from all walks of life. If you, or someone you care about needs help, call the NRGP toll free problem gambling counselling line on 0800 006 008 or email counsellor@responsiblegambling.co.za and a trained counsellor will help you. Expert confidential help is available free of charge. Winners know when to stop. Toll Free Counselling Line 0800 006 008 
Women's Day 1 - Queen of My Heart - Ranked 24  <i>Queen of my Heart</i> For the overwhelming majority of women, gambling is just harmless entertainment. But for the very few who gamble excessively, it can become a problem. It's a problem that can affect South African women, from all walks of life. If you, or someone you care about needs help, call the NRGP toll free problem gambling counselling line on 0800 006 008 or email counsellor@responsiblegambling.co.za and a trained counsellor will help you. Expert confidential help is available free of charge. Winners know when to stop. Toll Free Counselling Line 0800 006 008 	Youth 6 - Dice - Hey Dude Ranked 25  HEY DUDE If you, a friend, or someone you care about needs help, call the NRGP toll free problem gambling counselling line on 0800 006 008 or email counsellor@responsiblegambling.co.za and a trained counsellor will help you. Expert confidential help is available free of charge. Winners know when to stop. Toll Free Counselling Line 0800 006 008 	Youth 7 - Playground - Roll on Break Time - Ranked 26  ROLL ON BREAKTIME If you, a friend, or someone you care about needs help, call the NRGP toll free problem gambling counselling line on 0800 006 008 or email counsellor@responsiblegambling.co.za and a trained counsellor will help you. Expert confidential help is available free of charge. Winners know when to stop. Toll Free Counselling Line 0800 006 008 

5.6. The Uses of Themes in Promoting Responsible Gambling

It is recommended that the National Responsible Gambling Programme continues with its themes and advertise at the appropriate times.

The table below shows the impact / effectiveness the various posters had within the themes and how it could inform the responsible gambling programme. Table 7 illustrates how a budget could be informed by the findings of the research.

The thematic advertorials are: Christmas; Easter; Generic Ads; Women; and Youth.

Table 7: Comparison and Ranking of the Thematic Advertorials Posters

Effectiveness Ranking	Printed Poster Adverts	% of Total Effective Rating	Proposed Budget Spend per R1m
1	Christmas 1.3 No Cookies for Santa - Oh Oh Oh	13%	R 129 931,91
4	Christmas 2.3 You Bet, I'm hungry	5%	R 54 045,40
7	Christmas 3.3 Oh Oh Oh - Sad Christmas	4%	R 44 096,06
16	Christmas 4.3 Jingle Bells	3%	R 27 822,84
20	Christmas 5.3 Ho Ho Ho - Winning Hand	3%	R 25 262,39
11	Christmas 6.3 Don't Kiss your Bonus Goodbye	4%	R 35 140,00
17	Easter 1.3 Broken Easter Egg - Gamble with Care	3%	R 27 745,59
2	Generic Ad 1.3 Grandma who lost her house	7%	R 65 341,19
5	Generic Ad 2.3 Dad bothered by a debt collector	5%	R 53 256,30
3	Generic Ad 3.3 Young man who bet his house and lost his home	6%	R 63 040,10
13	Generic Ad 4.3 0800 006 008 Make the right call - slot wheel	3%	R 30 151,53
14	Generic Ad 5.3 Stay on Track Horse Racing	3%	R 28 832,68
15	Generic Ad 6.3 0800 006 008 Make the right call - Roulette	3%	R 28 755,42
19	Generic Ad 7.3 Money or the Box - Dominos	3%	R 25 505,19
22	Illegal Gambling 1.3 Ifafi / Mo - China	2%	R 23 082,70
18	Illegal Gambling 2.3 Dice - U - Bupala mataese?	3%	R 27 320,69
10	Illegal Gambling 3.3 Unlicensed establishment gambling	4%	R 35 167,59
24	Women's Day 1.3 Queen of My Heart	2%	R 20 632,61
23	Women's Day 2.3 Good Bye Lady Luck	2%	R 22 254,96
9	Youth 1.3 Young depressed youth - Dicing with Risk	4%	R 40 216,76
21	Youth 2.3 Youth playing Cards - Just a Game	2%	R 24 903,71
6	Youth 3.3 Cry for Help	5%	R 51 253,19
8	Youth 4.3 Game Over - Despondent and Alone	4%	R 42 275,05
12	Youth 5.3 Dice with Risk - Despondent and Alone	3%	R 34 593,69
25	Youth 6.3 Dice - Hey Dude	2%	R 19 716,58
26	Youth 7.3 Playground - Roll on Break Time	2%	R 19 655,88
		100%	R 1 000 000,00

5.7. The TV and Radio Based Advertorial – Impact and Effectiveness

The following four TV adverts were flighted but of the 96 respondents only 7% of the sample saw the adverts.

All four were highly rated. There is a greater likelihood of reaching a wider audience via TV compared to the posters or pamphlets.

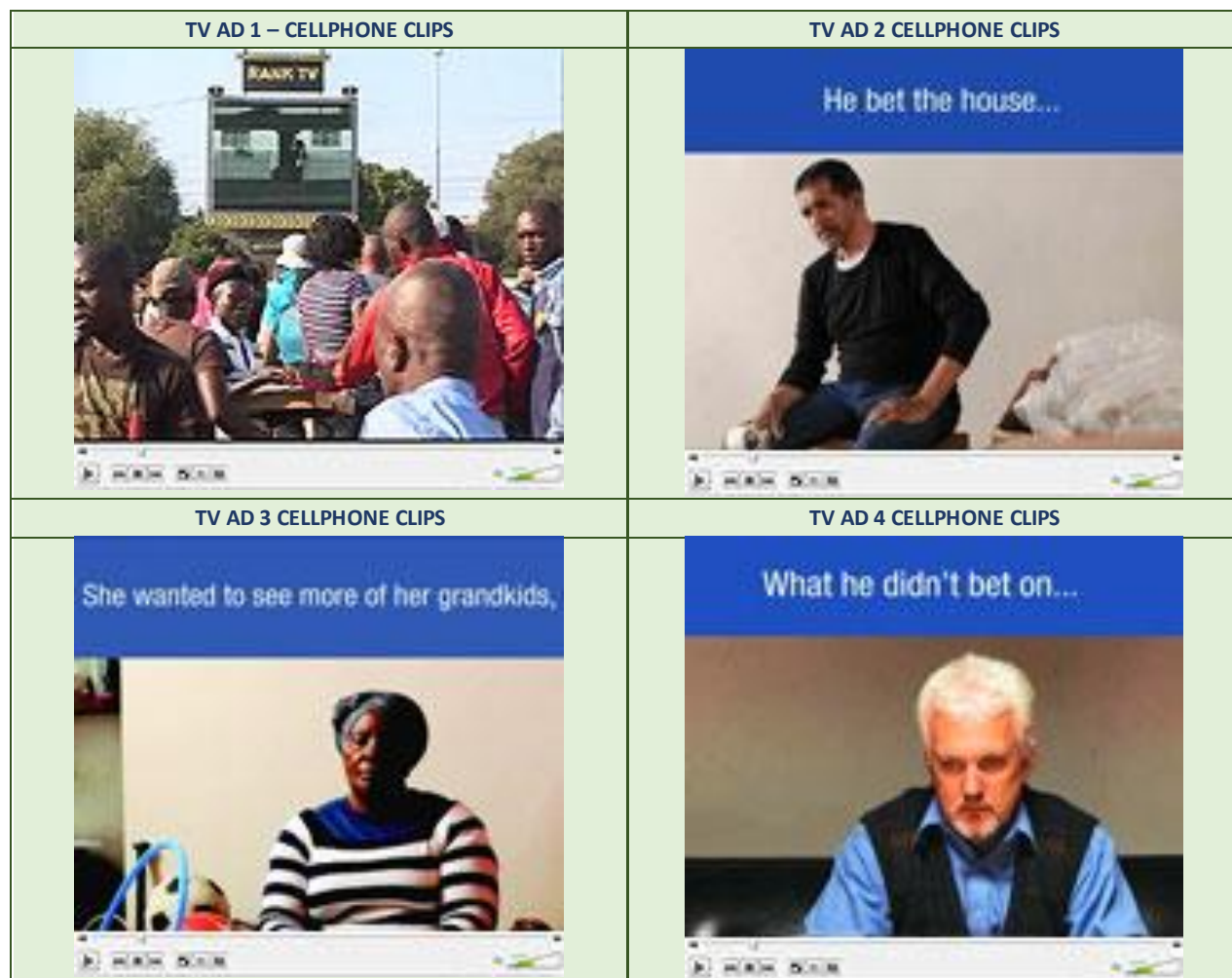


Figure 2: The TV Adverts

Only 7% of the research sample saw the TV adverts and 4% heard the radio advert. At this stage, it is not known how frequently, at what time and on what stations these adverts were flighted.

Table 8: Awareness of the TV Adverts

Platform Utilised TV	Yes	No	TOTAL	% Yes	% No
TV Ad 1.1TV Ad 1ResponsibleGambling Message					
TV Ad 1.4TV Ad 1Have you seen this ad before Y / N	9	87	96	9%	91%
TV Ad 2.4TV Ad 2Have you seen this ad before Y / N	7	85	92	8%	92%
TV Ad 3.4TV Ad 3Have you seen this ad before Y / N	4	90	94	4%	96%
Total	20	262	282	7%	93%
Platform Utilised Radio	Yes	No	TOTAL	% Yes	% No
Total	14	356	370	4%	96%

PAMPHLET 3 - GENERIC LEAFLET - RESPONSIBLE GAMBLING - ENGLISH

If you stick to these rules, you can avoid problems with your gambling

1. Decide beforehand how much money you are willing to spend. Stick to your limit.
2. Don't try and win more money. You may lose your money.
3. Be aware of the odds, and for how long you play.
4. When you are winning, take occasional breaks. Think about the money that you have won.
5. Remember that gambling is entertainment. It is not a way to get rich quickly, or to pay off your debts.
6. Don't forget that gambling is all about chance. There are no systems or formulas to guarantee success.

If you need help with a gambling problem, for yourself, a friend or for someone you care for, call the NCRG's problem gambling toll-free counselling line on 0800 006 008

Winners know when to stop

For more information call 0800 006 008 or visit our website at www.ncrg.org.za

The South African National Responsible Gambling Programme

For the overwhelming majority of people, gambling is harmless recreation. For most people, gambling is a form of leisure and entertainment. They go to the races, or sit at a sports event, knowing how much money they can afford to spend. They know the more they play they are likely to be gambling often.

Certainly, they do not regard their losses and disbursements related to gambling, or the time they get into serious financial difficulties because of gambling, and then think that they now gambling will solve their financial problems.

However, for a small proportion of people through the years, gambling often becomes a problem. In fact, in particular, they think that it would be better if they stopped gambling, or at least did so and controlled their gambling. For some of these people, gambling may become an addiction.

Question: *Will I have to pay to create help if I have a problem with my gambling?*

Costs to the counselling line (0800 006 008) are free, and it is unnecessary to make a self-referral or patient treatment from any of the NCRG's medical professionals. These costs are borne by the programme, not the patient.

Winners know when to stop

For more information call 0800 006 008 or visit our website at www.ncrg.org.za

Question: *Isn't it very shameful to admit to having a problem with gambling?*

No. Problem gambling is a disease. It is a disease if you cannot stop it, and it is your responsibility to do something to solve it. What is shameful is to continue doing serious damage to yourself and your loved ones and doing nothing about it. Obviously, it's best if people can avoid the situation in which their gambling becomes uncontrollable. It does, people need to be aware of the danger signals which can arise from early warning. They may then be able to take appropriate action without seeking further help. One way of doing this is to approach a crisis manager. For example, and not that you are prevented from gambling. This is called self-exclusion.

Question: *Can I get well off, self-employed and others, myself if someone that I can control my gambling?*

Not necessarily. Anyone can become a problem gambler of any age, race, religion, social class, education, status and moral character. Problem gambling is a disease which can affect anyone. Some people just seem to be naturally hanging on to build tendency to develop problems with gambling. For some people have a tendency to develop addictive problems with alcohol and other drugs.

Winners know when to stop

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Question: *Can I get well off, self-employed and others, myself if someone that I can control my gambling?*

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[illegible]

PAMPHLET 5 - GAMBLING MYTHS & FACTS - ENGLISH

MYTH The longer a slot machine is played without a big win, the more likely it is to pay out next time.

FACT Each spin of the machine, whether a casino or one of the United States' thousands (2,000) of public and private slot machines, produces a random number. While no machine pays out at regular intervals, it is impossible for random numbers to be influenced by a previous sequence of random numbers.

TIPS FOR GAMBLING RESPONSIBLY

- Set limits and stick to them. Decide how much money you can afford to spend.
- Stop before it's too late. Be aware of how much time you are spending.
- Resist the temptation to play more when you start losing. Keep trying to win because, because you may only increase your losses.
- Gambling and alcohol are not good mixtures. Don't gamble while drinking because you could get involved and lost when you are not clear.
- Don't lose time when you're winning the big jackpot.
- Think about the return time to stop. The longer you gamble, the more the odds become in your favor.

SIGNS OF PROBLEM GAMBLING

- Spending more time or money on gambling than intended
- Becoming more and more desperate to fund gambling
- Missing work or school or other commitments to gamble
- Gambling more to increase your losses
- Feeling worried, guilty and nervous when you are not gambling
- Family relationships breaking down because of debt and dishonesty
- Hiding your gambling from others but unable to stop gambling
- Gambling with ever larger amounts to reach the desired level of excitement

GAMBLING MYTHS AND FACTS

For most people, gambling is harmless entertainment. But gambling can become a problem when people have false beliefs about how it works. There are many reasons for stopping gambling, but the best is:

Gambling can be a dicey business...

Gambling can become a problem when people have false beliefs about how it works. They don't understand the laws of probability or how random systems are governed. They do not understand systems and formulas can never guarantee results and only create an illusion of control. They think they know on Lady Luck who doesn't have a soul!

Gambling is all about chance. There are no systems or formulas to guarantee success. Gambling is pure Gamble, and a way to get into quickly to pay off debts.

GAMBLING MYTHS AND FACTS

According to the Encyclopedia Britannica, gambling involves betting or putting something of value on the result of a game, match or event, which is decided by chance or randomness, leaving a certain outcome, risk, but nothing to be gained or lost.

They usually are supposed to bring gambling good luck. But, for example:

- walking and a circle by walking around the chair while sitting down, to bring good luck
- to change their luck
- sitting on the same seat in the casino, to bring good luck
- always playing on the same dice machine
- wearing a lucky charm in the bag of money
- having a superstition or believing in lucky numbers based on some pattern or method
- leaving the dice before throwing them for good luck.

There are all just good gambling superstitions!

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Gambling is all about chance. There are no systems or formulas to guarantee success. Gambling is pure Gamble, and a way to get into quickly to pay off debts.

MYTH If you keep track of previous results you can figure out future outcomes.

FACT Every gambling game is an independent random event with no memory. In other words, the results of a horse race, a lottery, a roulette, a slot machine, a card game, a dice roll, and so on, are completely random events.

MYTH A racing bet, the race goes to the strongest, fastest horse.

FACT In the horse race, the top performance of a horse is not a predictor of its future performance. A horse's performance is a random event. However, the handicap system takes the odds on a specific horse and increases the odds of a horse to win.

Gambling can be a dicey business...

MYTH If you know the rules of a game, you can increase your chances of winning.

FACT Knowing the rules of a game can only help you make decisions while playing. It cannot help you change the odds of winning. The only way to win is to have a better understanding of the game and to be able to control your bets.

Gambling can be a dicey business...

MYTH The longer a slot machine is played without a big win, the more likely it is to pay out next time.

SIGNS OF PROBLEM GAMBLING

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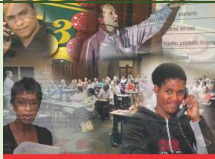
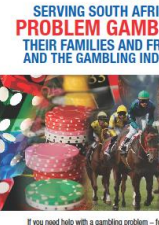
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Gambling can be a dicey business...

[illegible]

PAMPHLET 7 - YOU BET IT CAN BECOME AN ADDICTION You bet it can be/become an addiction 1. Recreational gamblers are after a good time; they gamble for the excitement, but they control how long and how much money they spend when gambling. 2. Problem gamblers spend more time and money gambling than they should, but can control themselves when they are shown how to avoid the pitfalls of gambling. 3. Pathological or compulsive gamblers play for the sake of playing – this is defined as a psychiatric disorder of impulse control. It becomes a 24-hour preoccupation, no matter whether they win or lose. They often cheat and lie and blame their losses on others, and don't understand the link between money and value. 4. Professional gamblers have a plan or strategy and set themselves strict limits when gambling.   Problem Gambling Counselling Line 0800 006 008 or send a "please call me" or sms to 076 675 0710 www.responsiblegambling.co.za	PAMPHLET 8 - TIPS FOR GAMBLING RESPONSIBLY Tips for gambling responsibly 1. Decide beforehand how much money you are willing to spend. Stick to your limit. 2. Don't try and recoup your losses. They may only increase. 3. Be aware of how often, and for how long you play. 4. When you are winning, take occasional breaks. Think about the smart time to stop. 5. Remember that gambling is entertainment. It is not a way to get rich quickly or to pay off your debts. 6. Don't forget that gambling is all about chance. There are no systems or formulas to guarantee success.   Problem Gambling Counselling Line 0800 006 008 or send a "please call me" or sms to 076 675 0710 www.responsiblegambling.co.za
PAMPHLET 9 - THE WARNING SIGNS OF PROBLEM GAMBLING The warning signs of problem gambling 1. Spending more time or money on gambling than you intended. 2. Borrowing or stealing money to fund your gambling. 3. Missing work or school or other commitments to go gambling. 4. Gambling more to recover your losses. 5. Feeling worried, anxious and moody when you are not gambling. 6. Family relationships breaking down because of your debt and dishonesty. 7. Hiding your gambling from others, but unable to stop gambling. 8. Gambling with ever bigger amounts to reach the desired level of excitement.   Problem Gambling Counselling Line 0800 006 008 or send a "please call me" or sms to 076 675 0710 www.responsiblegambling.co.za	
PAMPHLET 10 - WINNERS KNOW WHEN TO STOP - MACHINE STICKER Winners know when to stop Problem Gambling Counselling Phone 0800 006 008  or send a "please call me" or sms to 076 675 0710	
PAMPHLET 11 - HELP FOR FAMILIES AND FRIENDS OF PROBLEM GAMBLERS  INDUSTRY SUPPORT SERVICES Training Currently, the NRGP training division provides expert basic, advanced and train-the-trainer training courses in responsible gambling for all gambling industry employees in the various sectors (casinos, major bookmakers/shops, LPR and large operators) – as well as the national and provincial regulators throughout South Africa. All employees in the gambling industry are required to complete the NRGP basic course on a regular basis. The advanced course is designed specifically for gambling industry personnel of managerial or supervisory level. Other continued courses are available to suit the particular needs of public servants, including healthcare and social workers, treatment professionals, law enforcement, the National Lottery, self-help support groups, and companies holding corporate wellness days for their employees. Mentorship A mentorship service is available telephonically 24/7, but specifically for gambling industry employees and management ONLY. It includes direct telephone support during a crisis and debriefing afterwards, monitoring assistance to meet specific needs (e.g. help dealing with self-exclusion), meetings once or twice a year by request, to discuss specific problems, and an e-mailing facility to deal with queries.  FOR ANYONE WHO WANTS TO DESIST A GAMBLING PROBLEM: 0800 006 008 OR SEND AN SMS TO 076 675 0710 Johnannesburg 011 026 7323 Cape Town 021 674 5826 International +27 21 674 5820 Confidential email: counsellor@nrgp.org.za Website: www.responsiblegambling.co.za South African Responsible Gambling Foundation: 141 The Strand @ Varsity Groves Gardens Park, Wentworth, 58 Abney Avenue Gardens 2196 PO Box 752484, Sandton 2146  0800 006 008 OR SMS 076 675 0710 <i>A uniquely South African Solution to Problem Gambling</i> The National Responsible Gambling Programme (NRGP) is managed by a registered Non-Profit Company (NPC) called the South African Responsible Gambling Foundation – a public/private sector partnership of government regulators and the gambling industry in South Africa. Founded in 2000, it is a comprehensive response to the challenges posed by problem gambling in a developing nation such as South Africa. It is the first national initiative which includes public awareness and prevention, a problem gambling counselling line, treatment, research and industry training and mentorship within a single organisation. Because of this integrated approach to problem gambling, it is highly regarded internationally as one of the best programmes of its kind in the world. The NRGP is funded by voluntary contributions from the gambling industry. THE WARNING SIGNS OF PROBLEM GAMBLING • Spending much more time or money gambling than was originally intended • Finding yourself becoming increasingly pre-occupied with gambling and planning your daily activities around gambling opportunities • Manipulating people into providing you with money to gamble • Gambling more to try and recover your losses • Gambling with progressively bigger amounts • Ignoring work or school • Reacting to criminal behaviour to fund your gambling • Feeling anxious and moody when you are unable to gamble • Close relationships breaking down because of gambling debt and dishonesty • Lying to concerned others about your gambling activity HELPING PROBLEM GAMBLERS – THEIR FAMILIES AND FRIENDS Problem Gambling Counselling Line The service provides confidential, free, professional help for problem gamblers, their families and friends – 24 hours a day, 7 days a week by – calling a toll free counselling line at 0800 006 008 – sending an SMS to 076 675 0710 – sending an email to counsellor@nrgp.org.za. Therapeutic interventions are tailored specifically for problem gamblers. • After a telephone assessment our trained telephone counsellors refer problem gamblers for treatment to a treatment professional in their area. • A psychiatrist is also available to assess clients – in cases they also suffer from other mental conditions – and to plan tailored treatment interventions for them in consultation with the other medical professionals who form part of the NRGP's national treatment network based all over South Africa. • Our treatment professionals are registered psychologists and social workers and are specialists in the treatment of problem gambling. Outpatient and inpatient treatment The treatment programme is based on international best practice and comprises a nationalised counselling programme up to nine sessions. • The problem gambler is referred for a free face-to-face psychotherapeutic programme with one of the treatment professionals in our network. • Under very specific circumstances a problem gambler will be referred for FREE or subsidised inpatient treatment at one of our accredited inpatient facilities. Public awareness initiatives To provide awareness about problem gambling – the signs and symptoms – and to dispel popular myths about gambling, the NRGP produces books, newsletters and various reports, places advertisements in the country's media, and supplies collateral for the gambling industry. We also have a presence at various dance events across the country. Website A website www.responsiblegambling.co.za is a valuable source of information for the public in addition to details of what we do and all our services, the alpha content of our research reports as well as the NRGP's Handbook on Addictions. The Handbook on Addictions covers diverse responsible gambling issues, and includes information on the theory, psychology and regulations pertaining to gambling, as well as money management matters. National Schools Programme – and teacher training initiatives With the full co-operation of the Department of Education in the various provinces, the NRGP has sponsored teacher training workshops around the country. Teaching materials and learning resources including a course book have been developed to form part of the life skills component of the National Curriculum and to conform with the requirements of CAPS-based education. The teaching materials have been designed to be mutually interactive, to be engaging and easy to use for both teachers and learners – and to teach learners how to make responsible decisions about other high-risk forms of behavior, including gambling. Research The NRGP also commissions ad hoc research projects and periodic prevalence studies to monitor the status of problem gambling in South Africa. Read all about it under "Research Documents" on our website.	

5.9. The Comic Book Based Responsible Gambling Lessons

Only one comic book was available for assessment. It is understood that there were three, one for each of Grades 10, 11 and 12.

These were not distributed to the schools in the Eastern Cape. The comic book below, whilst very informative and a must read for every learner, it requires an educator's / teacher's guide as well.



5.10. Preferred Platforms for Responsible Gambling Messages

Other key findings relating to platforms of communication found:

- a) 43% heard responsible related gambling messages on the radio;
- b) 41% saw such messages on TV whilst, and
- c) 19% noted it on social media.

When choosing audio versus audio-visual and written messages, the study found that:

- d) 54% thought that audio-visual messages were effective whilst,
- e) 38% preferred audio and 8% written messages.

Table 10: Awareness of the Radio and Social Media Adverts – Written / Audio and Audio-Visual

Age Group	Have you heard any radio adverts for responsible gambling	Have you seen any TV advert for responsible gambling	Have you seen any advert on social media	Which adverts were effective Written / Audio / Audio Visual
Yes	43	41	19	
No	57	58	81	-
AUDIO	-	-	-	19
AUDIO VISUAL	-	-	-	27
WRITTEN	-	-	-	4
	100	99	100	50
Yes	43%	41%	19%	0%
No	57%	59%	81%	0%
AUDIO	0%	0%	0%	38%
AUDIO VISUAL	0%	0%	0%	54%
WRITTEN	0%	0%	0%	8%

5.11. Community Preferences for Communication Platforms

First Choice of Communication Platform

The most popular method of preferred communication is by “*Word of Mouth*.” 46% preferred to be told about dangers of gambling and responsible gambling followed by workshops / presentations. This was followed by information shared at pension pay points (35%); pamphlets; pop up messages; and at ATMs near betting and gambling (33%)

1	2	3	4	5	6	7	8	9	10	11
Row	Various Advertorial Platform Preferences by Eastern Cape Community	1st Choice	2nd Choice	3rd Choice	4th Choice	5th Choice	Total	In favour (1st 50%)	Not in favour (2nd 50%)	Recommendation Order
4	TV:	51%	20%	11%	11%	6%	100%	76%	23%	1
3	Radio:	35%	29%	18%	11%	7%	100%	73%	27%	2
1	Newspaper:	34%	17%	21%	14%	14%	100%	62%	38%	3
12	Pamphlet	33%	22%	11%	22%	11%	100%	61%	39%	4
20	Word of Mouth	46%	6%	17%	11%	20%	100%	60%	40%	5
2	Magazines:	21%	21%	35%	6%	18%	100%	59%	41%	6
6	Social Media - Facebook, Twitter, Instagram, Pinterest	40%	7%	17%	21%	14%	100%	56%	44%	7
9	Workshop / Presentations	35%	18%	6%	18%	24%	100%	56%	44%	8
19	At ATMs near gambling / betting points	33%	17%	0%	8%	42%	100%	50%	50%	9
18	At Pension Pay-out Points	35%	6%	12%	0%	47%	100%	47%	53%	10
16	Gambling machine Pop Up Messages	33%	11%	0%	0%	56%	100%	44%	56%	11
11	Brochure	22%	11%	17%	17%	33%	100%	42%	58%	12
8	Printed Large format Bill board	19%	15%	8%	27%	31%	100%	38%	62%	13
17	Sports Matches / Large Music Shows	11%	11%	22%	11%	44%	100%	33%	67%	14
14	Mail Messages	14%	7%	21%	7%	50%	100%	32%	68%	15
13	Digital news	19%	6%	6%	31%	38%	100%	28%	72%	16
10	Exhibitions	9%	0%	27%	36%	27%	100%	23%	77%	17
5	Websites:	7%	7%	7%	21%	57%	100%	18%	82%	18
7	Gambling Support groups:	9%	0%	0%	55%	36%	100%	9%	91%	19
15	Mail pop-ups	0%	0%	14%	0%	86%	100%	7%	93%	20

Table 11: Comparison of the Effectiveness of the 15x Communication Platforms Assessed

The Broader Community Preferred Communication Platforms

Having a broader look at what the top 50% of the population would prefer, the following is found:

- TV appealed to 76% and is the most popular broad method of communication;
- next is, the Radio (73%); Newspaper (62%); Pamphlets (61%); Word of Mouth (60%);
- magazines followed at 59%; Social media and Workshops / Presentation (56%), and
- ATMs near gambling and betting points (50%).

Below the top 50% we find:

- notices at pension pay-out points (47%); pop-up messages on gambling machine (44%);
- brochures appeal to 42%; billboards will get the message across to 38%;
- sports matches and sporting events appeal to 33% whilst mail messages (432%) is followed by digital news (28%);
- exhibitions will appeal to 28%; websites (18%);
- gambling support groups score 9% and mail pop up messages are rated at 7% popularity to convey responsible gambling messages;
- large billboards –will appeal to 42% of the population but if it is audio-visual based eg at taxi ranks it will reach a larger population for a reasonable cost;
- workshops and presentations will appeal to 59% of the population but its time consuming to reach a large population and very expensive;
- exhibitions will not appeal to the majority;
- brochures have a 50-50 appeal. It is needed but 50% will not read it;
- pamphlet formats will appeal to two thirds of the population but the message must be concise;
- digital news is rapidly evolving worldwide and presently it will appeal to one third of the population;
- similarly mail messages, being written and technology dependent will appeal to 43% of the population;
- pop-up messages on the gambling machines will appeal to 44% of the players;
- similarly, messages promoted at sports matches / large music shows will appeal to 44%;
- at the pension pay-out points – 53% will be receptive to the message;
- at ATMs near the betting / gambling points only 50% will take heed, and
- whilst 69% will take note of a “*Word of Mouth*” message.

PART 2

CONSTRUCTING A PROFILE OF A PERSON WITH A GAMBLING PROBLEM and DETERMINING THE COST EFFECTIVENESS OF THE NATIONAL RESPONSIBLE GAMBLING PROGRAMME

based on a

A 10-YEAR TREND IN GAMBLING RELATED CALLS FOR ASSISTANCE

on the

0800 006 008 HELP-LINE

2005-2014

PART II: A SOUTH AFRICAN PROFILE OF PERSONS WITH A GAMBLING PROBLEM:

If there was a better understanding of the typical profile of the group of persons who have requested help, then agencies could:

- a) determine appropriate advertising / advocacy messages to the appropriate target (LSM) groups;
- b) analyse the spend and determine if resources were deployed optimally;
- c) design / recommend an appropriate strategy / marketing / advertorial plan, and
- d) other.

6. PROFILING PERSONS AFFECTED BY PROBLEM GAMBLING

For a prevention or treatment programme to be successful, it is useful to perform a market segmentation study on persons who are likely to develop a gambling related problem and to understand the profile of those who already have a problem.

In this way, an optimal and cost effective responsible gambling programme can be designed and implemented.

6.1. 0800 006 008 Calls Received over a 10-year period

The study also collated and synthesised information from the annual reports of the South African Responsible Gambling Foundation, as it pertained to the calls received by the National Responsible Gambling Programme on its toll-free help line 0800 006 008 over a ten-year period (2005-2014).

The primary access was via the telephone. Table 1 below provides a summary of the calls received per annum per broad category.

Nationally, over a 10-year period, 254 954 calls were received on the 0800 006 008 helplines of which:

- a) **Problem Gambling Related Calls** - 10.8% or 27 426 calls which resulted in the following actions:
 - a. treatment referrals of problem gamblers;
 - b. telephone Counselling of Problem Gamblers, and
 - c. information about Problem Gamblers.
- b) **Other Gambling Referrals** - 1% (3645) which included:
 - a. repeat outpatient referrals;
 - b. in-patient treatment referrals, and
 - c. treatment referrals - family programme.
- c) **Other Calls** - 88% (223 883) which included:
 - a. general enquiries;
 - b. hoaxes, and
 - c. silent calls.

The table below summarises all the calls received by the 0800 006 008 Gambling Help Line from 2005 – 2014.

Table 12: A Comparison of the 0800 006 008 Calls received 2005 – 2014

TYPES OF CALL CATEGORIES	PROBLEM GAMBLING CALLS	Other problem gambling referrals	OTHER CALLS	Total Calls Received	Average 10 yr %
2005	3 412	289	37 324	41 025	16%
2006	3 298	444	56 643	60 385	24%
2007	3 387	522	40 405	44 314	17%
2008	3 224	408	26 441	30 073	12%
2009	3 305	392	17 757	21 454	8%
2010	3 104	376	15 257	18 737	7%
2011	2 517	284	13 301	16 102	6%
2012	1 761	274	6 516	8 551	3%
2013	1 856	356	6 487	8 699	3%
2014	1 562	300	3 752	5 614	2%
Total 2005 - 2014	27 426	3 645	223 883	254 954	100%
Average % of Total	11%	1%	88%	100%	

Source: HARRIS, E, S. Buthelezi, CM. Ntlonze, 2017

6.2. 0800 006 008 Calls Leading to a Treatment Intervention / Support

By excluding the 223 883 “Other Calls” relating to general enquiries, hoaxes and silent calls it is noted that over a 10-year period, a total number of 31 071 calls led to an intervention / support. These were received from both first time and repeat users of the 0800 006 008 helplines.

Of these 31 071 calls, 27 426 were problem gambling telephone calls (88%) and 3 645 (12%) were referred to as “Other problem gambling referrals.”

Table 13: Problem Gambling and Other Problem Gambling Referral Calls

TYPES OF CALL CATEGORIES	PROBLEM GAMBLING CALLS	OTHER PROBLEM GAMBLING REFERRALS	TOTAL CALLS RECEIVED	% OF TOTAL
2005	3 412	289	3 701	12%
2006	3 298	444	3 742	12%
2007	3 387	522	3 909	13%
2008	3 224	408	3 632	12%
2009	3 305	392	3 697	12%
2010	3 104	376	3 480	11%
2011	2 517	284	2 801	9%
2012	1 761	274	2 035	7%
2013	1 856	356	2 212	7%
2014	1 562	300	1 862	6%
Total 2005 - 2014	27 426	3 645	31 071	100%
Average % of Total	88%	12%	100%	
Average Calls per Annum	2 743	365	3 107	

Of the 254 954 calls received 31 071 (12.1%) were from persons who sought and participated in the help programme

Fortunately, the hoax, silent call have decreased from the 56 642 in 2006 to 3 752 in 2014

These calls will need further support and follow up as these may be due to persons who were intimidated by the interaction, language, cultural constraints, vocal and aural disabilities.

Source: *Ibid*

The numbers of calls had decreased significantly. In 2005, there were 3 412 (16%) problem gambling calls received and in 2014, this number had dropped by 50% to 1 562 calls (6%).

The above is against the milieu that there is greater access to gambling. This could imply that:

- less persons are having gambling problems, and

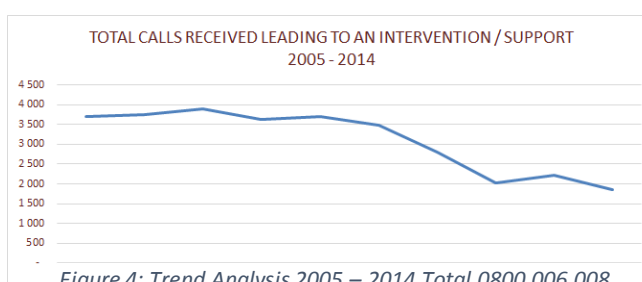


Figure 4: Trend Analysis 2005 – 2014 Total 0800 006 008 Calls Received

- b) lack of confidence with the mode of assistance or the help being offered.

The graph above shows the trend in the total calls received over a period 2005 – 2014.

Problem Gambling Telephone Calls - Of the 27 426 calls over a 10-year period, in this category,

- a) 46% (12 524) persons were referred for treatment;
- b) 10% (2 699) received telephone counselling, and
- c) 44% (12 203) of the calls were seeking information about problem gamblers.

Initially, in the 2005 – 2007 period, callers sought information about problem gamblers. During this period, up to 2009 there was an increase in the number of people seeking help.

A dramatic drop steadily occurred from 2010 to 2014 and needs to be investigated.

Other Gambling Calls – This category is being used to keep track of the categories of patients with gambling problems listed below:

- a) repeat outpatient referrals, 558 calls (15%);
- b) in-patient treatment referrals 112 calls (3%), and
- c) treatment referrals, 2975 (82%) - Family Programme.

The graph shows the trend in outpatient referrals, inpatient treatments and treatment referrals.

Broadly, of those who sought help, the 112 in-patient clients represented persons with serious to pathological gambling problems in South Africa.

There are 31 071 persons with a reported serious gambling problem who sought direct help from the 0800 006 008 helpline service. A further study is now needed to determine the impact of the treatment programme.



Figure 5: Trend analysis of Problem Calls Received 2005 – 2014

Source: *Ibid*

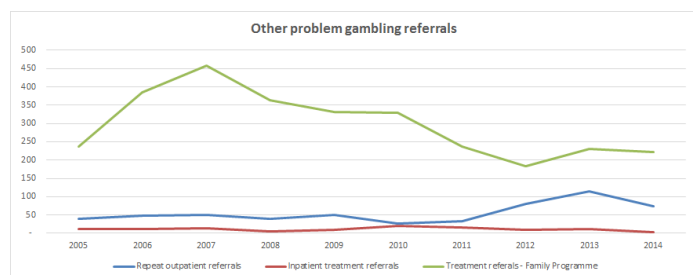


Figure 6: Trend Analysis of "Other" Calls received 2005 - 2014

6.3. 0800 006 008 Calls Not Leading to Treatment Intervention / Support

Of the 254 964 calls received on the 0800 006 006 helplines, 223 883 did not result in an active treatment / counselling support. The following is noted:

- a) 50 285 were hoaxes. These have reduced drastically over the years with 8 966 in 2006 to the 319 calls in 2014;
- b) wrong numbers dialled reduced from 8 966 in 2006 to 585 in 2014. These may or may not have been persons seeking assistance and bailing out at the last minute by not feeling comfortable ;

- c) 95 162 general enquires were received indicating that there are people out there with problems who are not using the help-line;
- d) There were a worrying 49 673 silent calls. These again may or may not have been persons with gambling problems.

Other Calls Received	No. Other Calls
Silent	49 673
General Enquiries	95 162
Wrong Number	28 763
	173 598

Erring on the side of caution, it could be deduced that there could have been another 173 598 persons who tried to reach out for help but backtracked (general enquires) or were not comfortable with the service or not ready to receive help (silent and wrong number).

Table 14: A Disaggregation of the Other 223 883 Calls received

88% (223 883) of the Total Calls that did not lead to support / intervention

OTHER CALLS	General Enquiries	Hoaxes	Silent	Wrong Number	Total Other Calls	% of Total over Ten Year Period
2005	10 051	10 879	10 751	5 643	37 324	17%
2006	15 523	17 092	15 062	8 966	56 643	25%
2007	12 891	10 154	10 338	7 022	40 405	18%
2008	14 409	4 606	4 966	2 460	26 441	12%
2009	11 058	2 517	2 579	1 603	17 757	8%
2010	10 466	2 040	2 031	720	15 257	7%
2011	9 272	1 662	1 666	701	13 301	6%
2012	4 722	573	837	384	6 516	3%
2013	4 441	443	924	679	6 487	3%
2014	2 329	319	519	585	3 752	2%
Total 2005 - 2014	95 162	50 285	49 673	28 763	223 883	
Average % of Total	43%	22%	22%	13%	100%	

Source: *Ibid*

6.4. Time of Call to 0800 006 008

From the data, available from 12 482 calls received during the period of 2006 – 2014 revealed that

- a) 39% of the calls were between 08:00 and 12:00;
- b) 54% of the calls for help were made between 12:00 and 20:00 followed by;
- c) 8% of the calls made between 20:00 and 08:00

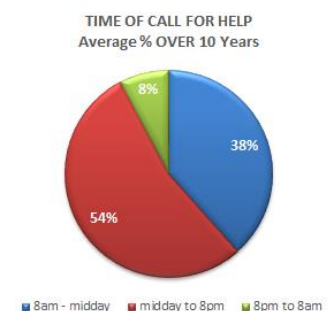


Figure 7: Pie Chart showing the Times Calls were made for Help

Table 15: Time of Calls Received Analysis

TIME OF CALL (PROBLEM GAMBLER)	8am - Midday	Midday to 8pm	8pm to 8am	Total calls
2006 - 2014	4 809	6 729	944	12 482
Average %	38,5%	53,9%	7,6%	

The above could assist the planning of a support service e.g., what percentage of telephone counsellors should be contracted to be on standby to minimise costs or when should the radio and TV ads be flighted to get maximum impact.

6.5. Family Programme Referrals - Relationship to the Gambler

With regards to family referrals, these have remained constant at 7 - 8 % over the period from 2005 – 2014.

In developing or evaluating the treatment programmes the following should be considered based upon the research findings. 65% of the persons who requested help for family members were, spouses (65%), 12% were parents, 14% children, 6% siblings and 3% “others.”

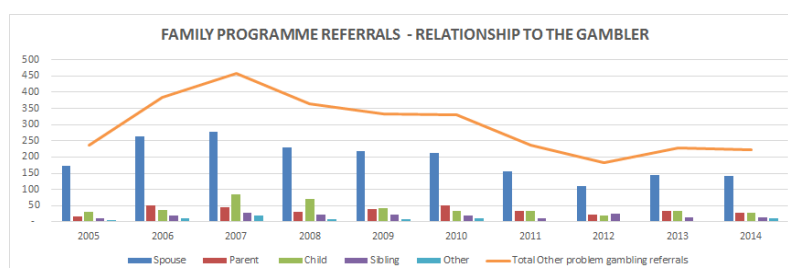
Table 16: Family member's referrals - Relationship to the Gambler

FAMILY PROGRAMME REFERRALS - RELATIONSHIP TO THE GAMBLER	2005	2014	Total 2005 - 2014	Average % of Total
Spouse	173	142	1 930	65%
Parent	18	27	355	12%
Child	30	28	414	14%
Sibling	12	15	193	6%
Other	5	10	81	3%
Total Other problem gambling referrals	238	222	2 973	100%
% of Ten Year, Total	8%	7%		

Source: *Ibid*

These criteria / trends should also be used when evaluating the efficacy of the gambling messages and platforms utilised. e.g. Do the messages speak to the spouses and what guidance is being offered.

These persons are also affected to the extent that they need support and treatment as can be seen in the next section.



Source: *Ibid*

Figure 8: Relationship to the Gambler 2005 - 2014

6.6. Family Programme Referrals - Counselling Programme

Family members also suffer the effects of persons who do not practice responsible gambling habits.

In 2014, on average 100 persons (42%) required counselling, 67 (53%) needed intervention planning support and 54 (6%) of family members needed both. Again, an adequate responsible gambling campaign and programme should be informed by these needs

Table 17: Family Programme Referrals - Counselling Programme

FAMILY PROGRAMME REFERRALS - COUNSELLING PROGRAMME	2005	2014	Total 2005 - 2014	Average % of Total
Counselling	162	101	1 248	42%
Intervention Planning	76	67	1 558	52%
Both		54	167	6%
Total Other problem gambling referrals	238	222	2 973	100%
% of Ten Year, Total	8%	7%		

Source: *Ibid*

Let's summarise what was determined thus far

- over the 10-year period 254 954 calls were received by the 0800 006 008 help-lines;
- of these calls, 50 285 were hoax calls;
- of the remaining 204 669 calls, 95 162 persons made enquiries which may or may not have led to a treatment intervention / support. It does however indicate that there are 95 162 persons with a gambling related problem so far;
- 28 673 of the callers said it was a wrong number, but again it is expected that all those who made the call, some may not go through with seeking help;
- 49 673 of the calls were silent calls and again these could be persons reaching out for help but failing to disclose at the last moment, and
- A follow up action policy is needed for these who fall in to the general enquiry, silent and wrong number category.

6.7. Gamblers with Problems - Age, Gender and Marital Status Profiles over a 10-year period

GENDER GROUPS WITH GAMBLING PROBLEMS

In designing or evaluating the current impact of the gambling message and profile, it is useful to know this market segment who declared their gambling problem.

More males (61%) than females (39%) reported their gambling problems.

Table 18: Gender of Population with Gambling Problems

GENDER	Male	Female	Unknown gender	Total
Total 2005 - 2014	7 644	4 947	23	12 614
Average % of Total	61%	39%	0%	100%

Source: *Ibid*

MARITAL STATUS GROUPS WITH GAMBLING PROBLEMS

Of this group, one would have expected persons who were single, divorced, widow / widower to be proportionately a larger percentage compared to those who are married. In SA, 46% of the adult population is married / living together as married couples yet 53% of these persons have a gambling problem.

Source: *Ibid*

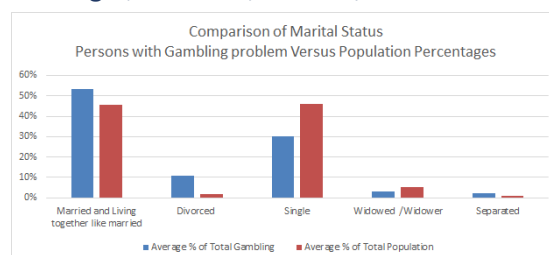


Figure 9: Marital Status of Persons with Gambling Problems

Table 19: Marital Status of Persons with a Gambling Problem

MARITAL STATUS	Total 2005 - 2014	Average % of Total Gambling	Derived Population	Average % of Total Population
Married and Living together like married	6 709	53%	15 391 506	46%
Divorced	1 385	11%	595 141	2%
Single	3 812	30%	15 562 893	46%
Widowed /Widower	387	3%	1 827 014	5%
Separated	257	2%	326 034	1%
Unknown	64	1%		0%
Total Marital Status	12 614	100%	33 702 589	100%

Source: *Ibid*

AGE GROUPS WITH GAMBLING PROBLEMS

The population referred to below exclude the under 18 year olds who are not allowed to gamble by law.

Gambling problems manifest across all other age groups.

The specific group who need urgent attention is the 40-59-year-old age group. This group of persons represents 27% of the population but have 43% of the gambling related problems.

Ceteris paribus, the 18-20 year olds comprise 9% of the population but fortunately only 2% had gambling problems.

The 20-40 year olds represent 52% of the population and 51% of those with a gambling problem.

This is what is expected from the law of large numbers and a sampling spanning 10 years.

Persons aged 60 and above represent 12% of the SA population and 2% of the persons with gambling problem.

The Lifestyle Measures (LSM) of these persons are vital to inform the gambling message and the platform used.

Policies, resources, gambling messages and platforms utilised and budgets allocation must take cognisance of these trends.

6.8. Language Preference Profiles

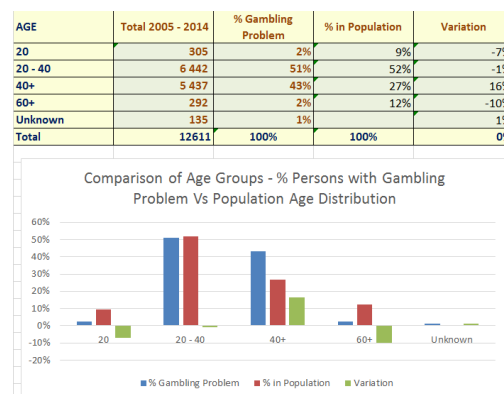
The language profile is essential in the message and messaging platforms used. A ten-year review found that 73% of the persons with a gambling problem spoke English yet English is only the first language of 9.5% of SA population.

Source: Ibid

It is very important to always apply the Constitution principles of equality of languages. The allocated budgets for the marketing programmes should reflect this.

In answering the 0800 006 008 number the person should be greeted and immediately asked to indicate the language of choice and referred to accordingly. This may account for the “wrong number,” or “silent calls” received. Much more emphasis

Table 20: Age Group Analysis - Problems Gamblers versus Population Statistics



Source: Ibid

Figure 10: Comparison of Age groups of persons with Gambling Problems versus Population Statistics

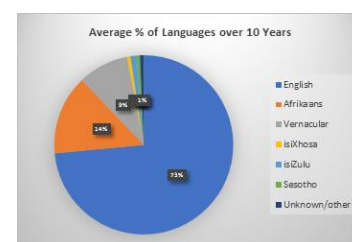


Figure 11: Pie Chart of language of persons who received treatment

Language	Eastern Cape	Free State	Gauteng	KwaZulu-Natal	Limpopo	Mpumalanga	North West	Northern Cape	Western Cape	Proposed Budget Allocations
1 Afrikaans	10.0%	5.0%	21.9%	2.4%	2.0%	4.2%	4.5%	8.8%	41.1%	13.2%
2 English	7.4%	1.6%	32.8%	27.3%	1.6%	2.5%	2.5%	0.8%	23.5%	9.5%
3 isiNdebele	1.4%	0.9%	34.9%	10.2%	9.6%	37.0%	4.0%	0.6%	1.4%	2.1%
4 isiXhosa	62.4%	2.5%	9.8%	4.2%	0.2%	0.6%	2.3%	0.7%	17.2%	15.6%
5 isiZulu	0.3%	1.0%	20.6%	68.2%	0.5%	8.3%	0.7%	0.1%	0.2%	22.4%
6 Sepedi	0.3%	0.2%	27.8%	0.4%	61.2%	8.1%	1.8%	0.1%	0.2%	8.9%
7 Sesotho	4.1%	44.6%	36.2%	2.1%	2.1%	3.6%	5.2%	0.4%	1.7%	7.4%
8 Setswana	0.3%	3.4%	26.9%	1.3%	2.6%	1.8%	53.9%	9.2%	0.6%	7.9%
9 Sign language	18.0%	14.0%	22.5%	20.7%	3.5%	3.8%	6.4%	1.7%	9.4%	0.5%
10 SiSwati	0.2%	0.2%	10.5%	0.6%	2.0%	85.3%	0.9%	0.0%	0.2%	2.5%
11 Tshivenda	0.3%	0.2%	22.5%	0.4%	73.8%	1.0%	1.3%	0.1%	0.4%	2.3%
12 Xitsonga	0.1%	0.4%	35.0%	0.4%	39.8%	18.3%	5.6%	0.1%	0.4%	4.4%
Other	4.5%	1.9%	44.9%	9.4%	10.4%	4.8%	7.3%	1.5%	15.3%	1.6%

Table 21: Mother Tongue languages per Province to inform the Gambling message Programme

must be placed on providing for culturally and linguistically diverse (CALD) communities in all forms of communication especially in South Africa.

The following 12 languages must be provided for as recommended in the Table 21. The table reflects the distribution of first languages in South Africa per Province as per Census 2011. Consideration and policy must also provide for communication for persons who have aural, ocular and voice disabilities.

Employment Profiles of Persons with Gambling Problem

A review of 12 614 persons who had a gambling problem revealed that 59% were employed, 17% self-employed, 12% unemployed. 4% were employed part time and 3% were housewives. Others were pensioners (3%) and 0.4% were retired. Other than their employment status, other attributes associated found of persons with a gambling problem were:

Table 22: Employment Status of Persons with Gambling Problem

EMPLOYMENT	Total 2005 - 2014	Average % of Total
Employed	7 421	58,8%
Self-employed	2 163	17,1%
Unemployed	1 565	12,4%
Part time/ temporary	496	3,9%
Optionally unemployed (eg housewife)	368	2,9%
Pensioner	365	2,9%
Dependent	140	1,1%
Retired	51	0,4%
Unknown	45	0,4%
Total	12 614	100%

Source: Ibid



Source: Ibid

Figure 12: Employment Status of Persons with a Gambling Problem

6.9. Related Problems

Persons who have gambling problems also have a range of other problems. This should be considered in the treatment programmes and gambling messages.

PREVIOUS GAMBLING TREATMENT: Of the group of 11 709 persons with gambling problems 1 109 (9%) of them had previous gambling treatment and had relapsed. There is a need to study these cases in evaluating the various treatment regimens available.

Table 23: Related Medical Problems and Social Problems of Problem gamblers

RELATED PROBLEMS	Total 2005 - 2014	Average % of Total
Previous Gambling Treatment	1 108	9%
Alcohol/Drug Problem	1 265	11%
Other Psychiatric Problems	1 108	9%
Suicidal Ideation	2 705	23%
Gamblers Anon Attendance	855	7%
Casino Exclusions	3 223	28%
Criminality	1 445	12%
Total	11 709	100%

Source: Ibid

CASINO SELF EXCLUSION: 28% of these persons had casino exclusions yet still had access to gambling. Much need to be done to improve the inter-gambling establishment communication and management of persons who had self-excluded.

SUICIDE IDEATION: 23% of persons with gambling problems have **Suicidal ideation**, also known as **suicidal thoughts**, concerns thoughts about or an unusual preoccupation with suicide.

CRIMINALITY: 12% had been involved in criminal activity

Source: *Ibid*

ALCOHOL / DRUG DEPENDENCE PROBLEMS: Figure 13: Gamblers and their Related Medical and Social Problems
11% had an alcohol and drug problem suggesting a need to integrate related support services.

OTHER PSYCHIATRIC PROBLEMS: 9% had other psychiatric problems and **7%** had attended **GAMBLERS ANON.**

6.10. Type of Gambling and Gambling Problems

This section will look at what type of gambling modes seem to be affecting more people. This must also be used in designing the responsible gambling messages and the platform used.

- Casino slots account for more than 53% of the modes of gambling and effort / inputs / budgets for the responsible gambling messages should be linked to this table.
- Casino table Games (215); more than one form of gambling (12%); Tote and Other (2.6%);
- LPM's at 2.2%; Private Gambling (1.6%); Bookmakers (1.4%); Internet gambling that is illegal in this country (1.35);
- The Lotteries (04%); is followed by Scratch Cards and Bingo at 0.3% each

Source: *Ibid*

The attributes of a slots persons indicate that this person enjoys digital / computer screen like information and this type of platform will appeal more to a person with this type of gambling problem.

As can be seen, the casino slots (53%) have topped the mode of gambling over the past 10 years.

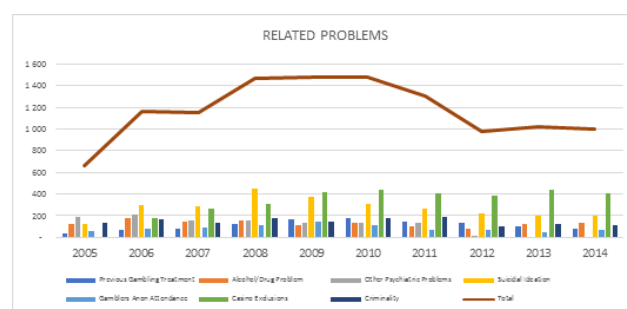


Table 24: Types of Gambling Modes and Gambling Related Problems

TYPE OF GAMBLING	Total 2005 - 2014	Average % of Total
Casino Slots	6 729	53,3%
Casino Table Games	2 594	20,6%
More than One	1 568	12,4%
Tote	334	2,6%
Other	331	2,6%
Non-Casino Slots (LPM)	282	2,2%
Private Gambling	201	1,6%
Bookmakers (Horses,Sport etc)	178	1,4%
Internet Gambling	168	1,3%
Unknown	96	0,8%
Lotteries	47	0,4%
Scratch Cards	43	0,3%
Bingo	43	0,3%
Total	12 614	100%



Figure 14: Types of Gambling Modes

6.11. Source of Counselling Number

The table below shows that collateral advertising at Gambling venues provided the largest sources of information.

COLLATERAL MARKETING AT GAMBLING VENUES: 44% of persons who received help on the National Responsible Gambling Programme 0800 006 008 number found this number at the gambling venue.

Table 25: Sources of the Counselling Numbers used by who received treatment

This clearly indicates that responsible gambling messages should be prominent in and near the gambling venues.

PRESS COVERAGE AND MEDIA INFORMED 34% and **STAFF AT GAMBLING VENUES** informed **5.3%** of persons with gambling problems of the counselling number.

Source: *Ibid*

Some persons found help on the **NRGP website** and **3.3%** obtained the number from the Gambling Board. Other sources are listed in Table 25.

SOURCE OF COUNSELLING NUMBER	Total 2005 - 2014	Average % of Total
Via Collateral Adverts in gambling venues	5 651	43,7%
Press Coverage & Media	4 444	34,3%
Via Staff in gambling venues	684	5,3%
NRGP Website	608	4,7%
Gambling Board	429	3,3%
More than one	341	2,6%
No. of Spouses currently in treatment	285	2,2%
Gamblers Anonymous	255	2,0%
Cannot recall	202	1,6%
No. of family members	42	0,3%
Total	12 941	100%

6.12. Treatments and Support - National Outpatient Statistics

TREATMENT DATA:

ATTENDANCE AS OUTPATIENTS: Over a 10-year period (2005 – 2014), of the 13 587 persons referred by the NRGPs for outpatient treatment, 10 891 appointments were made, 9 038 (83%) arrived for the appointment. 1 853 or 17% of the patients did not honour their appointments.

Table 26: National In-Patient and Outpatient Statistics

ATTENDANCE AS IN-PATIENTS: In 2014, of the 506 persons receiving treatment, 4 patients were in-patients (0.4%). This is an indication of the number of very serious compulsive gamblers and who also needed to be restrained from the gambling establishments.

National Outpatient Statistics	2005	2014	Total 2005 - 2014	Average % of Total
Patients referred for outpatient treatment	1 078	1 158	13 587	41%
Total first appointments made	865	975	10 891	32%
Total first appointments met (ie patient actually arrived)	699	807	9 038	27%
Total	2 642	2 940	33 516	100%
% of Ten Year Total	8%	9%		
TREATMENT DATA	2005	2014	Total 2005 - 2014	Average % of Total
Patient currently in Treatment	696	137	2 119	22,4%
Treatment Drop Outs	279		1 290	13,7%
No. of patients completing all 6 sessions	361	181	9 593	38,0%
No. of patients arriving for follow-up (7th session)	240	105	1 982	21,0%
No. sent for debt counselling		23	174	1,8%
No. sent for group sessions		56	250	2,6%
In-patients		4	41	0,4%
Total receiving Treatment	1 576	506	9 449	100%
% of Ten Year Total	17%	5%		

Source: *Ibid*

There were 137 patients currently receiving treatment and the national dropout rate over a 10-year period was 13.7%.

At the end of the 2014 financial year, 181 had completed their six treatment sessions and another 105 had reported for their 7th follow up session.

Others needed to be referred for group sessions (56). On average 2.6% of the persons with gambling problems are referred to group sessions, and 1.8% are sent for debt counselling.

6.13. Five Provinces with Highest Problem Gambling Referrals over a 10-Year Period

Table 27 and Figure 15 shows that out of every 10 000 persons in five of South Africa's Provinces, Gauteng refers the most persons per capita for problem gambling. This may not mean that Gauteng has the highest numbers of persons with a gambling problem per capita. It may be due to:

- a) having more persons with a gambling problem due to poor prevention programme; or
- b) a more effective responsible gambling programme resulting in a better awareness of the facility available;
- c) more effort and resources may be targeting the Gauteng Province, and etc.

What is known, is that for every 10 000 persons over age of seventeen in these Provinces, Gauteng refers 7 for treatment/ support followed by Western Cape (5), Kwa-Zulu Natal (3), Free State (2) and the Eastern Cape (2).

In short, on average, a percentage of 0.0462% of the population over 18 can expect to be referred for gambling problem if all Provinces had equal access to gambling facilities.

A conservative projection based on persons who received support for their gambling problem indicates that the NRGF will need to provide support to 15 571 persons per annum. Only 1862 received a treatment (intervention/ support).

Table 27: Comparison of the No. of Referrals per Province

	Eastern Cape	Free State	Gauteng	KwaZulu-Natal	Western Cape	Average 5 Provinces
Total Population	6 562 053	2 745 590	12 272 263	10 267 300	5 822 734	37 669 941
Age > 18	3 938 520	1 792 205	8 849 052	6 310 572	4 083 309	24 973 659
No of problem gambling referrals	850	373	6 225	2 138	1 954	11 540
% of > 18 yo referred fro gambling problem	0,0216%	0,0208%	0,0703%	0,0339%	0,0479%	0,0462%
Out of every 10 000 persons over 18	2	2	7	3	5	5

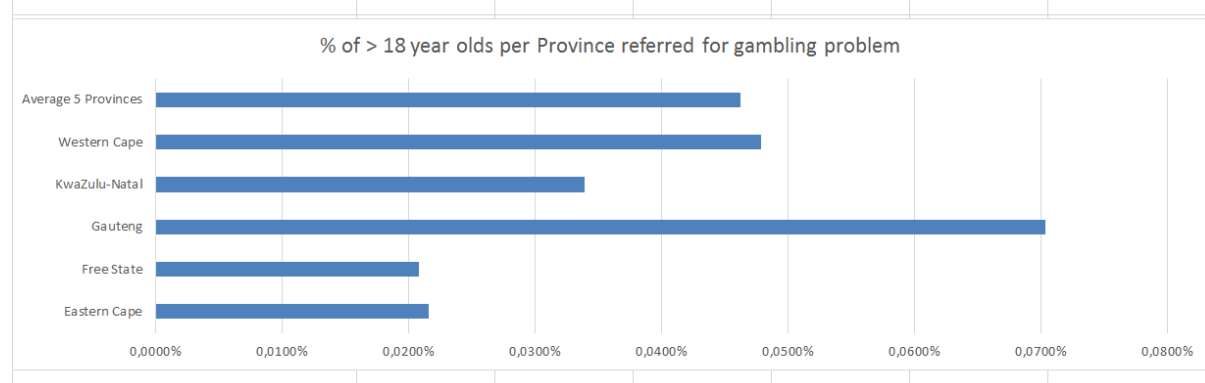


Figure 15: Comparison of the No. of Referrals per Province

Source: *Ibid*

PART 3

A 10 YEAR REVIEW OF THE COST EFFECTIVENESS OF THE RESPONSIBLE GAMBLING PROGRAMME

2005 - 2014

**Based on Audited Financial Statements of the
South African Responsible Gambling Foundation**

PART III: THE COST EFFECTIVENESS OF THE RESPONSIBLE GAMBLING PROGRAMME 2005 - 2014

7. A COST EFFECTIVENESS ANALYSIS

A review of the audited financial statements (where available¹⁷) over a 10-year period. The National Responsible Gambling Programme is funded by the gambling Licence Holders based on 0.01% of their Gross Gaming Revenue.

For the period 2005-2015 an amount of R163m funded the programme. A sharp drop of R4.7m in the funding of the programme occurred between 2013 and 2014.

The trend over the 2005-2014 investment in the NRGP reveals that:

- TREATMENT & TRAINING:** One third (32%) of the budgets available equivalent to R46m was spent on treatment programmes;
- PREVENTION AND PUBLIC EDUCATION:** One third (31%) equal to approximately R45m was spent on the prevention and education programme;
- RESEARCH:** 13% of the budget was spent on average over 10 years on research;
- CENTRAL MANAGEMENT OF THE PROGRAMME:** amounted to 10% or R14.6m, and
- SCHOOLS PROGRAMME:** 5% is spent on education learners at schools especially in Grade 10 - Grade 12 and miscellaneous expenses made up the balance.

Table 28: Financial Income and Budget Expenditure Analysis 2005 – 2015

ANALYSIS OF INCOME AND EXPENDITURE 2005 – 2014: RESPONSIBLE GAMBLING PROGRAMME

INCOME	2005*	2014	Total 2005 - 2014	Average % of Total
Grants 1	R 8 661 442,00	R 20 019 879,00	R 154 547 363,00	100%
Grants 2	R -	R -	R -	0%
Total Revenue	R 8 661 442,00	R 20 019 879,00	R 154 547 363,00	100%
YTY % Increase in Income				
BUDGET ALLOCATION / EXPENSESE	2005	2014	Total 2005 - 2014	Average % of Total
Training, Counselling, Help Line and Treatment	R 2 723 684,00	R 5 666 787,00	R 38 556 920,00	28%
Prevention and Public Education	R 2 905 097,00	R 6 268 068,00	R 42 095 707,00	31%
Research	R 1 964 421,00	R 768 085,00	R 17 228 945,00	13%
Training		R 934 149,00	R 5 018 755,00	4%
Other expenses			R 235 002,00	0%
National Schools		R 78 840,00	R 6 900 763,00	5%
Central Management		R 2 927 525,00	R 14 624 437,00	11%
Special projects		R 3 256 606,00	R 3 256 606,00	2%
Unspent contributions for the year			R 8 240 190,00	6%
TOTAL EXPENSES	R 8 661 442,00	R 19 900 060,00	R 136 157 325,00	100%

Source: *Ibid*

Source: *Ibid*

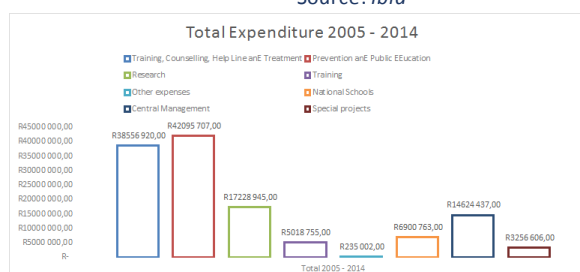


Figure 16: Total Expenditure Spend 2005 – 2014

¹⁷ Financial Statements were reviewed from 2005 to 2014. No statements were available to the researchers for the 2005, 2007 and 2011. The average of the two neighbouring years was used to estimate the missing years

7.1. Cost Effectiveness on Treatment and Prevention Cycles Per Capita

TREATMENT: The spend per patient for treatment is very low prior to 2013 with an average treatment spend of R362 per patient. The recent 2013-2014 of up to R1924 per patient reflects more the current reality of real costs. This may need a closer look as the budget and the patient numbers had decreased significantly. A closer look is needed to explain why the main cost driver (number of patients) had decreased.

Source: *Ibid*

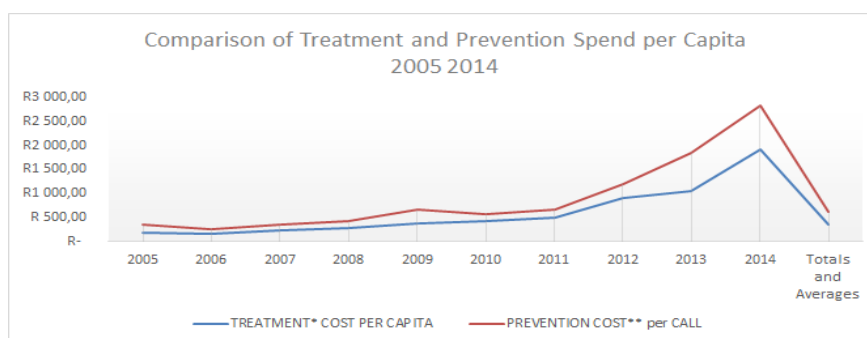


Figure 17: Trend Analysis – Per Capita Spend on Treatment per Annum.

On average, the investment spent in the prevention had quite correctly exceeded treatment spend as can be seen on the graph above and the table below :

Table 29: Cost of Treatment per Capita 2005 -2014

TREND ANALYSIS 2005 – 2014 – PER CAPITA SPEND ON TREATMENT

Year	No. of Patients Treated	Expenditure for Treatment & Training Programmes Rands	TREATMENT* COST PER CAPITA	Expenditure for Prevention Programmes Rands	PREVENTION COST** per CALL
2005	13 752	R 2 723 684,00	R 198,06	R 4 869 518,00	R 354,10
2006	19 265	R 3 075 741,00	R 159,65	R 5 104 520,00	R 264,96
2007	16 800	R 3 945 287,00	R 234,84	R 5 980 278,00	R 355,97
2008	18 041	R 4 948 809,50	R 274,31	R 7 805 240,50	R 432,64
2009	14 755	R 5 680 977,00	R 385,02	R 9 716 507,00	R 658,52
2010	13 946	R 6 034 239,00	R 432,69	R 8 043 057,00	R 576,73
2011	12 073	R 6 063 106,50	R 502,20	R 8 132 561,50	R 673,62
2012	6 757	R 6 063 106,50	R 897,31	R 8 132 561,50	R 1 203,58
2013	6 653	R 7 011 928,50	R 1 053,95	R 12 279 154,50	R 1 845,66
2014	4 191	R 8 064 698,50	R 1 924,29	R 11 835 361,50	R 2 823,99
Totals and Averages	126 233	R45 687 469,50	R 361,93	R 77 029 241,50	R 610,21

Source: *Ibid*

In short, the programme is being operated on the lowest possible cost and given the growth in the industry, this programme probably need a budget more in the range of R100m per annum if it is to also reach the two million learners in Grade 10 – Grade 12 and offer the additional ancillary services needed.

PART FOUR

A PROPOSED POLICY FRAMEWORK TOWARDS A NATIONAL RESPONSIBLE GAMBLING PROGRAMME

based on

THE INTEGRATION OF PARTS 1 – PARTS 3

PART IV: TOWARDS A POLICY FRAMEWORK INFORMING A RESPONSIBLE GAMBLING PROGRAMME

8. INPUTS TOWARDS A STRATEGIC POLICY CONVERSATION

By integrating Parts 1 - Parts 3 it leads to key elements of a policy framework which should be used to guide the various Boards and Management to design informed responsible gambling programmes. Implementation thereof should ideally lead to a minimisation of gambling harm and a focussed spend on the responsible gambling programme.

8.1. KEY RECOMMENDATIONS BASED ON FINDINGS

The following key recommendations should inform the Responsible Gambling Programme Policy.

8.2. LEADERSHIP AND GOVERNANCE:

A national strategic conversation is needed relating to the leadership and governance of the South African Responsible Gambling Foundation. Whilst the social responsibility of the casino industry to contribute to the funding of the programme is commendable, the governance conflicts with the King IV Corporate Governance Guidelines.

The key question should be whether this important foundation should not be as a registered Section 3C public entity under the Department of Economic Affairs.

8.3. STRATEGY AND OPERATIONAL POLICY:

All gambling entities should contribute financially to the responsible gambling programme. The relative contributions could be based upon the *“Types of Gambling Causing More Problems”* above. The key marketing strategies must be informed by language, gender, marital status, age, employment status and the life style measures of the profile of persons who have gambling problems.

8.4. PROPOSED NEW ADDITIONAL GAMBLING REGULATIONS

The regulations could prescribe that:

- a) all players be registered with smart cards supplied and are traceable for communication purposes for all gambling codes;
- b) a compulsory *“Do You Know Your Score?”* self-assessment to be completed by all players on the registration or renewal of the loyalty cards which should be linked for all establishment in the country;
- c) players should be workshopped before allowing to play in short focussed briefing sessions (15 minutes) especially at larger establishments with 30 or more machines. Briefing are to include the statistically probabilities in decision making and the dangers of excessive gambling, recognising symptoms of problems gambling and treatment options;
- d) smart card technology will indicate if the player is excluded or not thereby eliminating the current loop holes in the management of self-exclusion;
- e) all gambling machines use SMART Card technology and Pop-Up messages warning players on Amount Played against the pre-determined budget for the session and the time spend at the establishment. Machines could be programme for forced break in play;

- f) with prior permission on application, players Big Data should be data-mined quarterly to determine players with a trend towards developing a gambling problem and a pro-active preventative counselling enforced;
- g) interfacing with the Responsible gambling programme should be multi-faceted to allow access for persons with disabilities (aural, vocal, language barriers etc.), and
- h) licensing of Bingos need to be relooked at as it may mislead the public thinking they will be entertained to a bingo session when these establishments are predominantly mini slots casinos.

8.5. FUNDING:

A clearer and more transparent mechanism is needed so that the NRGF receives its fair share of funding in terms of the 0,01% of the Gross Gaming Revenue as agreed to. All Sectors should contribute this amount. The school's education programme need to be jointly funded and rolled out by the relevant mandated departments.

8.6. HUMAN RESOURCES AND INFRASTRUCTURE:

The SARGF operates on a shoe-string budget and a fivefold increase in its budget is needed to respond to the country's needs. Currently operations are tailored to suit the budget. These include Human Resources, and the number of counsellors available to the programme. There is a need for an equitable spread. Lack of integrated online information based information technology systems is evident in the management of both the SARGF and the Gambling and Betting Board.

8.7. PROCESS IMPROVEMENTS:

A joint review and study involving the SA Association of Psychologists to investigate the effectiveness of the gambling treatment programme to find the optimal treatment programme which will also consider cultural beliefs and value systems.

LPMs, sports betting and horse racing establishments need to be revamped significantly as the responsible gambling messages and notices are rather limited at these establishments.

8.8. EXPECTED OUTCOMES: KNOWING YOUR SCORE AND PRE-DISPOSITION TO GAMBLING ADDICTION

The key expected outcomes are that players who gamble and bet enjoy themselves within their available means and that they wisely avoid gambling becoming a problem. Unfortunately and sadly a few will become pathological gamblers and others will develop a gambling problem of different degrees of severity.

The ideal is a win-win-win situation. The client gets value for money entertainment and hopefully breaks even financially, the gambling enterprises make a fair profit for the services rendered, the government receives its taxes and implements a preventive problem so that gambling does not become a health issue.

Current thinking internationally includes patrons / clients knowing their predisposition to become problem gamblers and take early evasive action.

It is essential that every person who gambles "*Know their Scores.*" This is a self-assessment that should be made available and monitored by all establishments at the point of registration.

8.9. SIGNS OF GAMBLING ADDICTION¹⁸

Often referred to as a “hidden illness,” gambling addiction has no obvious physical signs or symptoms that can be quickly or easily spotted. Problem gamblers often go unnoticed for many years before the signs of the addiction finally become evident even to close friends and family members. In fact, because many gambling addicts can control their behaviors much of the time, it could be very difficult to spot a gambling addiction unless you physically go with the gambler into a situation in which they are gambling, then you may quickly realize that they are out of control.

The following behaviours are all potential signs of gambling addiction:

- a) being preoccupied with gambling, playing lotto, going to the casino, gambling online, etc.;
- b) avoiding obligations at work, school, home or socially to spend time gambling;
- c) avoiding friends or family members who have voiced concern of a potential gambling addiction;
- d) financial hardships such as loss of house, car, job, or other possessions to gambling;
- e) stealing money to gamble or to pay debts;
- f) selling possessions to acquire money to gamble or pay debts;
- g) inability to control behaviors despite a desire to have such control;
- h) neglecting expenses such as bills or other financial obligations to gamble;
- i) sneaking around, telling lies about gambling or otherwise masking a potential problem, and
- j) denying actions or minimizing problems.

8.10. RECOGNIZING SYMPTOMS OF GAMBLING ADDICTION

Although the signs of gambling addiction are often difficult for others to spot, if you like to gamble, there’s a good chance that you will be able to recognize the symptoms of gambling addiction in yourself early on, well before others will even notice.

You might have a gambling problem if you:

- a) feel out of control or have little control over your desire to gamble;
 - b) feel compelled to keep gambling until you’ve spent your last 5c cent;
 - c) hide your gambling from friends or family members;
 - d) spend money that you don’t have available to spend on gambling, and
 - e) want to stop gambling but you seem always to fall back into a situation that causes you to gamble.
- If so, you could:



**CALL OUR TOLL FREE
COUNSELLING LINE
0800 006 008 Or
SMS HELP To 076 675 0710**



¹⁸ <https://www.addictions.com/gambling/>

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10. QUESTIONNAIRES

The six questionnaires are obtainable from the Eastern Cape Gambling and Betting Board or South African Responsible Gambling Foundation and not included to minimised pages printed.

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Outside of the mandate, but to give focussed impact of the report the authors researched and included a ten-year review of problem gambling trends thereby constructing a South African profile of groups with a reported gambling problem. We thank them for going beyond the call of duty.

Special mention is made of both the board members and management of the Eastern Cape Gambling and Betting Board as well as the South African Responsible Gambling Foundation.

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Ewan Harris - Research Team Leader / Author

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I have a gambling problem...

it's my dad.

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• losing all your money • ruining your child's future?
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GAMBLE ONLY FOR THE FUN OF IT • SET A LIMIT AND DON'T EXCEED IT • DON'T CHASE LOSSES • WALK AWAY • THINK OF THE PEOPLE WHO NEED YOUR SUPPORT • STAY IN CONTROL