



Gambling in Indigenous Populations in Canada

Kristy R. Kowatch, M.A. Clinical Psychology Student

Introduction

Gambling has traditionally been a part of many Indigenous cultures. In Canada, games such as stick and dice games, games of chance, foot racing, and horse races, served as social events to bring different communities together, as well as redistribute wealth.^{1,2,7} Current Indigenous attitudes about gambling are varied. A recent survey of urban Indigenous people found that the majority thought gambling was morally wrong and that gambling harm outweighed the good.³ However, other communities of Indigenous people believe that gambling in moderation is a good hobby that is grounded in Indigenous tradition.¹³ Despite these varying attitudes, the majority of Indigenous people have gambled within the last year (60%-89.8%).

Indigenous populations experience higher rates of problem or pathological gambling in comparison to mainstream populations in Canada, as well as in Australia, New Zealand, and the USA.⁴ In Canada, Indigenous populations (which consist of First Nation, Inuit, and/or Métis people) are two to four times more likely to experience problematic or pathological gambling in comparison to mainstream Canadians.^{3,5} This means that approximately 10% to 20% of the Indigenous population in Canada will experience some gambling problem in their life.⁴

Gambling frequency and types

The majority (51%-74%) of Indigenous people in Canada gamble once a month or more, and a large portion gamble one or more times per week (14%-50%).^{5,13} The types of preferred gambling activities differ based on whether Indigenous people are living in a rural Indigenous community (e.g. a reserve or Northern community) or if they are living in a city. In Indigenous communities, one of the most popular forms of gambling is bingo^{7,8} whereas in urban Indigenous populations, electronic gaming machines (EGM's; which include slot machines and video lottery terminals [VLT's]) are the most popular form.⁵ Some of these differences may be due to availability and licencing in rural or remote locations.⁸ Across urban and rural Indigenous populations, instant win and lottery tickets are also popular forms of gambling.^{2,5,13}

The effects of adverse experiences

Indigenous people in Canada have faced centuries of government policies and practices that have resulted in increased rates of many psychological difficulties including substance use, depression, and anxiety.¹⁰ Canadian researchers have demonstrated communities experiencing racism, physical, emotional, or sexual abuse is predictive of increased rates of high risk or problem gambling for Indigenous people.^{10,1}

Key Message

Gambling is a popular activity among Indigenous populations

- the majority (51% - 74%) of Indigenous people in Canada gamble on a regular basis
- bingo, electronic gaming machines, instant win, and lottery are the most common forms of gambling

Indigenous people are at an increased risk for problem or pathological gambling

- Indigenous people in Canada are 2 – 4 times more likely to experience problematic or pathological gambling in comparison to Canadians
- increased rates of high risk and problem gambling are associated with experiences of racism and abuse
- treatment seeking for gambling problems is low

Recommendations & best practices

- mixed-method research is needed to obtain an accurate understanding of how gambling affects Indigenous people and communities
- future research can assess the positive aspects of gambling for communities, as well as community level factors that affect engagement in, and treatment for, gambling

Treatment

Unfortunately, rates of treatment seeking for problem gambling in Indigenous populations are low.^{5,13} Some of the barriers to stopping gambling include¹³:

- A lack of awareness
- Addiction to the behaviour
- Peer pressure from family & friends to continue
- Individual denial
- Boredom and loneliness

Limitations of studies and best practices

In many Indigenous communities, mental wellness is viewed as stemming from having a sense of hope, belonging, meaning, and purpose with many of these concepts being tied to relationships with others and the community.⁹ For example, an individual can develop a sense of belonging through developing connections to their community, family, and culture.⁹ However, the majority of research surrounding Indigenous gambling has focused on individual level factors as explanations for the higher prevalence of problem gambling. This practice largely ignores and is contrary to an interconnected view of wellness. Therefore, an exploration of community level factors, and the effect they have on gambling (e.g. access to recreational activities, cultural resources, community financial status, etc.) could provide a greater understanding of why Indigenous groups are at an increased risk for problem gambling, as well as how to best address high risk or problem gambling.

Indigenous communities in Canada are diverse. These communities display differences in many areas important to gambling and other mental health concerns including:

- Culture (e.g. beliefs and/or ceremonies/rituals)
- History of residential school
- Levels of access to resources
- Capacity to respond to mental health concerns
- Community funding and employment opportunities
- Recreational opportunities

These differences make it difficult to obtain an accurate idea of how gambling affects Indigenous people across communities and who might be at an increased risk. Differences in gambling behaviours between communities and types of populations have been seen but it is difficult to determine if these differences are real or

due to the way that research is conducted. However, examining urban and on-reserve or rural communities of Indigenous peoples, using the same methods across populations, might help to clarify if differences in gambling experiences are tied to specific geographical regions, community level factors, and/or to the level of urbanization of the sample.

Balance is an important concept to wellness in many Indigenous communities in Canada, with overall wellness stemming from a balance between emotional, spiritual, physical, and mental aspects of oneself.⁹ Yet, Indigenous gambling research in Canada has primarily focused on risk factors and the pathological aspects of gambling, neglecting this concept of balance. There is very little research about protective factors or the positive influences that gambling may have for communities. For example, engaging in gambling activities could provide a form of fundraising for a community, or it may be an important way of maintaining community relationships. Being able to identify some of these experiences that Indigenous communities may have in relation to gambling requires remaining open to concepts or explanations such as these.

Mixed method studies – that incorporate both quantitative and qualitative methods - may provide insight into where Indigenous experiences of gambling intersect with non-Indigenous concepts. Research in Australian Indigenous gambling has demonstrated that a more balanced and flexible understanding of gambling in Indigenous communities can be developed by using qualitative methods.^{12,1} Qualitative methods that are community directed demonstrate a respect for the experience and knowledge of community members. Community based participation research is an example of such a method. In this method, community members are incorporated throughout the research process, including design and implementation, ensuring that the resulting information is an accurate reflection of the community experience. Relying on community based participation research may help identify some of these positive aspects of gambling as well as specific treatment targets for Indigenous communities.

Research surrounding gambling in Indigenous communities in Canada is just starting to untangle some of the intricacies of gambling behaviour. More research that incorporates Indigenous models of wellness

is necessary to accurately inform policies that provide services in these communities. Future policies and interventions need to be based in community needs and concepts in order to be implemented and adopted by those they are intended to serve.

About the author:

Kristy Kowatch is currently completing her doctorate in clinical psychology at Lakehead University in Thunder Bay, Ontario. Ms. Kowatch's research aims to clarify mental health needs for Indigenous youth, providing a foundation for the development of culturally appropriate treatments. Ms. Kowatch plans to develop such a treatment throughout her PhD, beginning in the fall of 2017. Ms. Kowatch previously worked at the University of Calgary as a laboratory and research coordinator in the Addictive Behaviours Laboratory, providing a wealth of experience and knowledge about gambling patterns, experiences, and interventions. Ms. Kowatch is also involved with projects through the Substance Use Research Group and Centre for Rural and Northern Health Research in Thunder Bay. These projects are examining treatment for, and recovery from, substance use, addiction, and mental health in Indigenous

References

1. Gill, K.J., Heath, L.M., Derevensky, J., & Torrie, J. (2016). The social and psychological impacts of gambling in the Cree communities of Northern Québec. *Journal of Gambling Studies*, 32, 441-457. doi: 10.1007/s10899-015-9553-y
2. Muckle, G., Chevalier, S., Boucher, O., Laflamme, D., & Rochette, L. (2007). Alcohol, drug use and gambling among the Inuit of Nunavik: epidemiological profile. Institut national de santé publique du Québec & Régie régionale de la santé et des services sociaux Nunavik.
3. Belanger, Y.D., Williams, R.J., & Prusak, S.Y. (2016). Tracking the westernization of urban Aboriginal gambling in Canada's Prairie Provinces. *International Gambling Studies*, DOI: 10.1080/14459795.2016.1244698
4. Breen, H. & Gainsbury, S. (2013). Aboriginal gambling and problem gambling: A review. *International Journal of Mental Health and Addiction*, 11, 75-96. doi: 10.1007/s11469-012-9400-7
5. Williams, R.J., Belanger, Y.D., & Prusak, S.Y. (2016). Gambling and problem gambling among Canadian urban Aboriginals. *The Canadian Journal of Psychiatry*, 61(11), 724-731. doi: 10.1177/0706743716661990
6. Wardman, D., el-Guebaly, N., & Hodgins, D. (2001). Problem and pathological gambling in North American Aboriginal populations: A review of the empirical literature. *Journal of Gambling Studies*, 17(2),81-100. doi:10.1023/A:1016699628402
7. Papineau, E. (2009). *Gambling Problems in First Nations and Inuit Communities of Québec: A Brief Status Report*. Québec City: Institut national de santé publique du Québec (INSPQ).
8. Botorff, J.L., Carey, J., Mowatt, R, Varcoe, C., Johnson, J.L., Hutchison, P.,... Wardman, D. (2009). Bingo halls and smoking: Perspectives of First Nations women. *Health & Place*, 15, 1014-1021. doi:10.1016/j.healthplace.2009.04.005
9. Health Canada. (2015). *First Nations Mental Wellness Continuum Framework* (Health Canada Publication No. 140358). Retrieved from http://www.hc-sc.gc.ca/fniah-spnia/pubs/promotion/_mental/2014-sum-rpt-continuum/index-eng.php
10. Dion, J., Cantinotti, M., Ross, A., & Collin-Vézina (2015). Sexual abuse, residential school and probable pathological gambling among Indigenous Peoples. *Child Abuse & Neglect*, 44, 56-65. doi: 10.1016/j.

chiabu.2015.03.004

11. Currie, C., Wild, C., Schopflocher, D.P., Laing, L., Veugelers, P., & Parlee, B. (2012). Racial discrimination, post traumatic stress, and gambling problems among urban Aboriginal adults in Canada. *Journal of Gambling Studies*, 29(3), 393-415. doi: 0.1007/s10899-012-9323-z
12. Breen, H.M., Hing, N., & Gordon, A. (2011). Indigenous gambling motivations, behaviour, and consequences in Northern New South Wales, Australia. *International Journal of Mental Health and Addiction*, 9, 723-739. doi: 10.1007/s11469-010-9293-2
13. Oakes, J., Currie, C., & Courtney, D. (2004). *Gambling and problem gambling in First Nations communities*. Toronto, ON: Ontario Problem Gambling Research Centre.
14. Breen, H.M. (2012). Risk and protective factors associated with gambling consequences for Indigenous Australians in North Queensland. *International Journal of Mental Health and Addiction*, 10, 258-272. doi: 10.1007/s11469-011-9315-8