This article argues for the need to replace responsible gambling (RG) programs with public health programs. RG programs are regularly used to help people control their gambling behaviour to reduce gambling harms. Gambling harms can include money problems, relationship issues, and mental health stress. People with problem gambling (PG) often suffer serious harms. PG is repetitive gambling behaviour when people cannot control how much they gamble. However, harms can also occur to people gambling at a lower risk level.

The gambling industry first came up with the idea of RG programs when evidence showed that people were suffering harms as gambling became more widely available. However, the authors argue that RG programs have qualities that make them useless at helping people with their gambling problems. RG programs suggest that people are responsible for their own gambling behaviour. RG programs are not designed to prevent people from developing PG. Instead, they focus on people who already have PG.

By focusing on individual people who gamble, RG programs often do not consider the social, environmental, and commercial characteristics that make gambling games unsafe. There is also a lack of evidence to support that current RG programs are effective. The authors suggest that the gambling industry uses RG programs to make it look like changes are being made while still maintaining business as usual.

In this article, the authors suggest that the idea of RG is not useful and that policy makers should stop using such an approach. They argue that a public health approach is better at protecting people from gambling harms and should replace the current focus on RG.
considers how social environments, characteristics of gambling games, marketing, and advertising may make people more likely to gamble.

The authors suggest that policy makers develop gambling programs using evidence from public health activities and gambling policy research with a public health focus. For example, the UK recently reduced the maximum bet on fixed odds betting terminals (FOBTs) from £100 to £2 in 2019. The authors suggest learning from the experiences of alcohol policy and tobacco control on developing effective public health responses. They also suggest that policy makers ban the gambling industry from funding gambling research. This ban would ensure that the gambling industry has no control over research results.

Gambling venues may use a variety of strategies in their RG programs. For example, they may put up signs to encourage people to gamble safely and remove ATMs from gambling venues. Venues may have staff monitor people for signs of gambling problems. They may also have self-exclusion programs that allow people to voluntarily ban themselves from gambling venues. There is little evidence to suggest that current RG strategies are effective at preventing and reducing gambling harms. Few studies have evaluated the effectiveness of RG programs.

The authors argue that RG programs do not prevent people from suffering gambling harm. RG programs rely on people to keep their gambling under control. They do not consider how addictive gambling games are. It is argued that most people gamble without experiencing problem gambling (PG). For example, the peak body of electronic gaming machines in the Australian state of New South Wales, ClubsNSW, measures its RG success by keeping the prevalence of PG at below 1% of the population. This still represents more than 58,000 people. Further, people in poorer communities are usually harmed most by gambling.

RG programs identify people with uncontrollable gambling as being a “problem gambler”. Labels like this may make people with PG feel shame and prevent them from getting help. The researchers suggest that RG programs are more about maintaining business as usual rather than making real changes.

Who is it intended for?
This article is intended for policy makers, public health, researchers, prevention service providers, and other people who are concerned with gambling related issues.

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About Gambling Research Exchange (GREO)
Gambling Research Exchange (GREO) has partnered with the Knowledge Mobilization Unit at York University to produce Research Snapshots. GREO is an independent knowledge translation and exchange organization that aims to eliminate harm from gambling. Our goal is to support evidence-informed decision making in safer gambling policies, standards, and practices. The work we do is intended for researchers, policy makers, gambling regulators and operators, and treatment and prevention service providers.

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