

research snapshot

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A public health perspective on addressing gambling harm from bingo

What this research is about

Australian bingo is traditionally offered in low-key community venues. People who play bingo value its modest prizes and the opportunity to socialize. But bingo is being changed by recent regulatory, commercial, and technological factors. These changes make people who play bingo at greater risk for gambling-related harm. For example, instead of playing using paper, bingo can be played using personal electronic tablets (PETs). This study identified different measures that can help address gambling harm related to bingo. The aim was to extend existing public health approaches to better include bingo.

What the researchers did

The researchers conducted a case study of three populations in Victoria, Australia. They focused on communities where bingo is popular and where disadvantage and discrimination are high. The communities were: Indigenous people in Gippsland and East Gippsland, Pacific people in Mildura, and older people with low or fixed incomes in Melbourne.

The researchers interviewed 53 bingo players. Players were interviewed either individually, in pairs, or in a group. Most participants were women (81%). Also, all participants interviewed in Melbourne (26 total) were 65 years or older. The researchers also interviewed 13 stakeholders. Stakeholders included gambling harm treatment staff, government representatives, regulatory experts, and bingo operators. The researchers also observed 12 bingo sessions.

The researchers recruited participants using snowball sampling. They asked participants to refer others to be interviewed. The researchers also recruited some

What you need to know

Bingo is being changed by recent regulatory, commercial, and technological factors. These changes make people who play bingo at greater risk for gambling-related harm. This study identified different measures that can help address gambling harm to people who play bingo. The researchers conducted a case study of three populations in Victoria, Australia. They interviewed 53 bingo players and 13 stakeholders. Five drivers of and influences on harm were identified: (1) changes that reduce bingo's protective factors; (2) bingo being used to promote other forms of gambling; (3) government reluctance to increase regulation of bingo; (4) not recognizing different experiences of communities; and (4) external influences of harm, including racialized poverty. The study outlined five measures to reduce gambling harm from bingo: (1) safeguard bingo's protective features; (2) delink bingo from other forms of gambling; (3) address political protection of the gambling industry; (4) tailor strategies for different populations; and (5) address external influencers of harm.

participants and chose observation sites that met certain criteria. For example, having an observation site in a regional area and interview participants were bingo players at the site, or including stakeholders with expertise in bingo or gambling regulation.

During the interviews, the researchers asked participants about their experiences of and observations about bingo playing. Participants were also asked if any changes should be made.

What the researchers found

Most participants said they enjoy bingo because it is a low-risk form of gambling. They also talked about how bingo has protective factors built into it (e.g., group-based nature of the game, set price, and time limits).

The researchers identified five drivers of and influences on harm to people who play bingo:

- 1) Technological, regulatory, and commercial changes that could reduce bingo's protective factors (e.g., proximity to electronic gaming machines [EGMs], introduction of PETs, and increases in game costs, prizes, crowd sizes).
- 2) Bingo is used to promote other forms of gambling. It can be used as bait to get people to enter the venue and play higher risk forms of gambling (e.g., bingo games are held near EGMs or casino tables).
- 3) Government reluctance to increase regulation of bingo. Participants did not believe governments would limit gambling operators' power or profits.
- 4) Not recognizing experiences of different communities. For example, bingo is used to fundraise in Pacific communities. Strong community ties also mean people would seek help from their families and communities, rather than from gambling help services.
- 5) External influences on gambling harm (e.g., racialized poverty and historical trauma experienced by Indigenous and Pacific people).

Participants suggested some measures that could help reduce harm to those who play bingo:

- Safeguard bingo's protective features (e.g., through limiting prices and prizes, or constraining new technologies).
- Delink bingo from other forms of gambling (e.g., stop bingo from being offered at venues that host forms of gambling with higher risk).
- Address factors external to gambling (e.g., responding to poverty and mental health concerns.)
- Building on the participants' suggestions, the researchers recommended two additional public health measures for bingo: Tailor

strategies for subpopulations (e.g., Indigenous, Pacific, and older populations).

- Address political protection of gambling operators.

How you can use this research

Policy makers can use this research to strengthen public health measures to reduce harm from bingo.

About the researchers

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Citation

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