

Phase 1 Evaluation of The “My-Play” System: 2010 Regular VL Players Benchmark Survey

Highlight Report

TO MONITOR AND REPORT UPON THE IMPACT OF
CHANGES TO THE VIDEO LOTTERY PROGRAM FOR
GAMBLING RISK AND HARM IN NOVA SCOTIA

In 2010 the province of Nova Scotia introduced a new card-based player tracking system for video lottery terminals called “My-Play” that permits players to use a player card to access various features to manage and monitor their VL gambling. The Nova Scotia Gaming Foundation (NSGF) a not-for-profit, arms-length government organization provided funding to Focal Research to design and conduct the first stage of a multi-phased independent study evaluating the impact of the new “My-Play” responsible gaming system for high-risk and problem gamblers in Nova Scotia. From November 2009 to March 2010 Focal generated a research panel gathering names and contact information for over 1000 regular VL players throughout the province. Players were then re-contacted, screened and 500 in-depth telephone surveys were completed with eligible regular VL players from May 26 to June 30, 2010. The purpose of the Phase I survey was to gather detailed baseline information for player behaviours, attitudes, and opinions before the new system was introduced (pre-trial benchmarks). During Phase 2 follow-up surveys will be conducted with these same players and compared to the baseline measures to identify and evaluate any changes associated with feature use and the “My-Play” system.

The following summary report highlights key findings for the Phase 1 Benchmark Survey including player profiles by risk for gambling problems as well as response towards the “My-Play” concept. Refer to the Technical Report for detailed project findings.

“MY-PLAY” FEATURES:

“MY-PLAY” CURRENTLY HAS FIVE PLAYER INFORMATION TOOLS THAT CAN BE ACTIVATED ON VLTS WHEN USING A PLAYER CARD:

(SOURCE: NSGC JANUARY 2010):

- ACCESS TO HISTORICAL INFORMATION ON THE TOTAL MONEY SPENT AND TIME PLAYED FOR A PERIOD OF A DAY, WEEK, MONTH, AND YEAR.
- ACCESS TO IN-PROGRESS PLAY ACTIVITY INFORMATION, INCLUDING THE AMOUNT OF MONEY PUT IN AND THE AMOUNT CASHED OUT IN THE CURRENT PLAY SESSION.
- ABILITY TO SET A SPENDING LIMIT FOR A DAY, WEEK, MONTH OR YEAR.
- ABILITY TO SET A TIME LIMIT FOR PLAY FROM A SET AMOUNT OF HOURS PER DAY, WEEK, MONTH OR YEAR.
- ABILITY TO STOP PLAY IMMEDIATELY FOR 24, 48, OR 72 HOURS.

The Nova Scotia Gaming Foundation is committed to sharing study findings to inform public debate and assist Foundation stakeholders in addressing gambling risk and harm for video lottery in Nova Scotia.

ETHICS & PEER REVIEW: *The study underwent an independent ethics review, and was conducted in compliance with national research codes of conduct (MRIA), Canadian Tri-Council Ethics and provincial privacy requirements. The Technical & Highlight Reports were subject to independent peer review.*

LIMITATIONS: *The sample consists of a large panel representative of regular VL players in Nova Scotia. This panel is suitable for tracking and comparing within-subject changes over time (longitudinal study) but it is not a true random sample and caution should be exercised in generalizing results to the overall regular player base. Benchmark measures are based on specially designed self-reported player survey data.*

APPRECIATION: *Focal wishes to acknowledge and thank the VL retailers and players taking part in the study who were not paid or otherwise compensated. Their voluntarily participation was critical to success of the project.*

Introduction & Background

In 2010 the province of Nova Scotia initiated a new province-wide card-based player tracking system for video lottery terminals. “My-Play”, formerly called the Informed Player Choice System (IPCS), was developed by Techlink Entertainment and allows video lottery players to use a player card to access various responsible gaming (RG) features to manage and monitor their video lottery gambling including: account summary information detailing the amounts spent per day, per month, per year; live action summarizing wins losses for the current play session; options to set time and money limits; and, the ability to self-exclude or limit access to play. During the first year of the provincial trial (≈Aug 2010 to Aug 2011), use of the player card is voluntary; players can choose to use a card in order to access the RG features or continue to play normally without a card, thus, bypassing the system. Following a pilot of the program in Sydney Nova Scotia in late 2009 (July-October, 2009) the Nova Scotia Gaming Corporation (NSGC; the ‘Corporation’) in cooperation with other industry stakeholders in the province completed installation of the system on all machines in the province by August 2010. The ‘Corporation’ has commissioned evaluative research of the system through the Responsible Gaming Council. The Nova Scotia Gaming Foundation (NSGF; the ‘Foundation’), a not-for-profit, arms-length government organization encourages and supports independent response to problem gambling in Nova Scotia. This is accomplished, in part, through funding to community groups and researchers to help address problem gambling. In addition to providing funding, the Foundation is also committed to developing resources and commissioning research to assist community stakeholders in addressing problem gambling at a primary, secondary, and tertiary level. Therefore the ‘Foundation’ funded Focal Research to conduct the current independent study examining the impact of the new “My-Play” responsible gaming system for high risk and problem gamblers in Nova Scotia.

How the “MY-Play” System Works

- Player information is only stored on the system when the player uses a card.
- The player must insert an ID card into the VLT before starting to play then the “My-Play” system records and stores the play activity for the session also giving players the option to use the various RG features;
- If the card is not used then activity for that play session (e.g., amount spent) is not recorded nor can the player use any of the RG features.

Research Design

To determine the impact of the “My-Play” system for high risk and problem VL gamblers in the non-treatment population, a two-phase approach was proposed:

- I. **Benchmark Phase: Gather baseline measures before launch of “My-Play” system (Pre-Trial) ;**
 - 1) *Generation of a research panel of regular VL players; and,*
 - 2) *Execution of a baseline survey prior to the introduction of the “My-Play” system in Nova Scotia.*
- II. **Follow-up Phase: Ongoing measurement for comparison to baseline following launch of “My-Play” system (Post-Trial)**
 - 1) *Follow-up Survey ≈12 months following launch of “My-Play”;*
 - 2) *Follow-up Survey ≈24 months following launch of My-Play”.*

There were a number of issues identified impacting the research design for the study. First, high risk and problem VL gamblers are a rare population (1%-2% of adults) making it difficult and expensive to obtain a large random sample. Moreover, regular VL players in general have been found to move in and out of problems depending upon other dispositional and situational factors and, thus, individual player risk status could change over the course of the study unrelated or related to system use/impacts. Regular VL players in Nova Scotia have consistently been found to account for 90%+ of VL revenues, with about one in every four self-reporting problems in managing their VL play at some time, and about 42% scoring at some level of risk using the Canadian Problem Gambling Index (PGSI Score 1+) making this a key target group for assessment of system impacts (Schrans, Schellinck & MacDonald, 2008; Schellinck & Schrans, 2007; Schellinck & Schrans 2004c; Schellinck & Schrans, 2002b; NSDOH & Focal Research, 1998). Therefore, the Benchmark Survey was conducted with Regular VL Players (playing 1+ per month) which allows the investigators to compare impacts for lower and higher risk players as well as track changes in risk over time. Given how the “My-Play” system is being implemented it is not possible to use the player tracking system to obtain pre-trial benchmark data; use of the system is voluntary during the first year of the trial period so not all play behaviour will be captured by the system and the system will not be collecting baseline information for players before the RG features are activated. Therefore, the current study relied on specially designed self-reported survey data for generating reliable pre trial benchmark measures for post-trial comparison. *Refer to the Technical Report for Study for detailed methodology.*

Regular Player Panel

- From November 2009 to March 2010, contact information was gathered for 1,039 of regular VL Players throughout Nova Scotia
- The panel was generated in a non-random manner and constitutes a convenience sample although controls were instituted to ensure representation throughout the province and appropriate gender and urban/rural splits.
- There were two primary sources used for panel recruitment and referral; Focal’s proprietary in-house player database (n=413) and on-site recruitment at 100 VL retail locations throughout Nova Scotia (n=626).

Benchmark Survey

- The Benchmark Survey was conducted with the research panel members from May 26 to June 30 to coincide with pre-launch of the “My-Play” system (completed August 2010).
- At follow-up, 10% of the panel numbers were non-working, 6% (n=59) refused or withdrew participation and 21.5% (n=224) could not be reached (7+ attempts to complete).
- 638 panel members were successfully screened (overall panel response rate=61.5%) with 22% (n=138) disqualified (e.g., non-regular play (124), non-permanent resident (14)).
- A total of 500 in-depth benchmark surveys were completed with eligible regular VL players identified; 220 (44%) originating from Focal’s database and 280 (56%) originating from on-site recruitment; average survey length 26 minutes.

Participants were not offered payment for taking part, the study was not advertised, and those in treatment for a gambling related issue were excluded.

Background for Video Lottery in NS

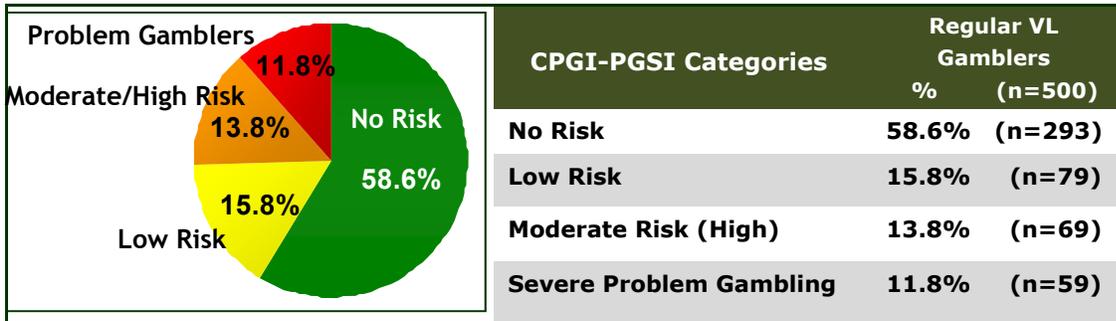
Nova Scotia Video Lottery Provincial Stats

- There are 2,234 government VLTs in 354 liquor-licensed retail locations throughout Nova Scotia including 216 private sites, 41 community clubs and 97 Royal Canadian Legions,² with an additional ≈584 VLTs located in First Nation gaming sites.³
- In 2009/10 approximately \$688.5 million dollars was wagered on government VLTs in Nova Scotia, almost half (48%) of all money wagered on any government operated gaming in the province. Amount wagered refers to the total amount of money put in to video lottery machines during a specific time period (e.g., fiscal 2009/10).⁴
- Video Lottery has one of the highest pay-out rates of all forms of gambling in Nova Scotia; on average, 93% to 95% of the amounts bet by players are paid back to players as ‘winnings’. However, since many VL gamblers use winnings to keep playing, especially small wins (NSDOH & Focal, 1998), only 79% of the total money bet on VLTs in 2009/10 was actually cashed out of the machines by players as winnings (e.g., \$543,399 Total Prizes (i.e. coin-out) divided by \$688,477 Total Wagers (i.e. coin-in)).⁴
- According to the most recent 2007 NS Gambling Prevalence Study only 3% to 4% of adults 19 years or older (≈26,000) play VLTs on a regular basis each month and these regular VL players were found to account for most (90%-95%) of the revenues for video lottery.⁶
- Total losses for VL players in 2009/10 were \$145 million or, on average, approximately \$5,000 per regular player. Total losses refer to the total amounts wagered less the total amounts cashed out in prizes; this is usually referred to as “coin-in minus coin-out” or, in this case, \$688,477 (total wagered) - \$543,399 (total prizes) = \$145,078 (Gross Revenue or Total Lost).⁴
- After expenses were paid, VLTs generated \$99.5 million in net profit for the government last year, \$22.6 million for commercial retail operators and \$5.7 million in charitable revenues for total net profits of approximately \$128.8 million.⁴
- Losses from VL players continued to account for the majority (61%) of net revenues from all forms of gambling in the province in 2010.⁴
- VL retailers give 1% of their VL commissions to fund the Nova Scotia Gaming Foundation (2009/10: \$315,473). This amount is then matched by the Gaming Corporation (NSGC) for total funding of \$630,946 to the ‘Foundation’ last year to support its work in addressing problem gambling and gambling impacts for individuals, families and communities. This represents half of 1% (.5%) of total net profits for VL gambling in NS.⁷
- Since 2005 there have been a number of initiatives undertaken by the Government to try to address risk associated with VLTs including reducing hours of operation (e.g., eliminating play after midnight), slowing the speed of the games by 30%, disabling the “stop” button feature and removing 1,000 VLTs from retail locations across the province.¹⁴
- About 1 in every 4 to 5 regular VL players in NS self-report having experienced problems with their VL gambling at some time and 42%-45% scoring at some level of risk.
- Less than 1% of adults are identified as problem VL gamblers yet this group has been found to account from one-third to one-half of total VLT losses^{6 8}

Two measures were used in the current study to determine player risk among regular VL gamblers taking part in the study; the Problem Gambling Severity Index (PGSI) of the Canadian Problem Gambling Index (CPGI) that assigns players to one of 4 levels of severity for gambling problems (Ferris and Wynne, 2001); and, the Focal Adult Gambling Screen (FLAGS), a new instrument that identifies problem gambling as well as four levels of pre-harm risk, that is risk before the gambler has experienced negative consequences or problems. FLAGS is designed to identify no-risk, early risk, intermediate risk, advanced risk and problem gambling specifically among gambling machine players producing outcomes suitable for prevention applications and public health surveillance (Schellinck, Schrans Bliemel & Schellinck, in press). In the current study the new FLAGS measure will be used for assessing changes over time; it is designed to be more sensitive in detecting differences yielding actionable information for evaluation purposes. At this time provincial stakeholders are more familiar with the CPGI-PGSI which has been used for previous gambling studies in Nova Scotia. Therefore, to facilitate comparisons the CPGI is the primary risk segmentation used for reporting the findings of the Phase 1 Benchmark Survey.

Please note that for the purpose of current study those scoring at moderate risk (CPGI Score=3-7) are referred to as high risk players and those scoring as severe problem VL gamblers (CPGI Score=8+) are referred to as problem VL gamblers.

Problem Gambling Severity Index Profile (CPGI-PGSI)



- The CPGI risk profile for panel players was highly similar to results from other research for regular VL players in Nova Scotia and in other Canadian jurisdictions.^{5,9,10,11}
- According to the Problem Gambling Severity Index (CPGI-PGSI), 42% of regular players taking part in the survey were at some level of risk for problem gambling (CPGI score=1+); 16% were identified as low risk (CPGI score=1-2), 14% were at moderate risk (CPGI score=3-7), and 12% were classified as severe problem gamblers (CPGI score=8+).
- These findings were almost identical to results for a random sample of regular VL players obtained in the 2007 NS Gambling Prevalence Study suggesting the research panel is representative of regular VL players in the region (e.g., 17% at low risk, 12% at moderate risk and 17% scoring as severe problem gamblers).
- When only considering those at higher-risk for gambling problems, 26% or about 1 in every 4 respondents was at high risk or already experiencing problems (CPGI score 3+).
- Using the new FLAGS instrument the percent of players identified as problem VL gamblers was identical to the CPGI (12%) with an additional 9% identified as being at early risk, 5% at intermediate risk and 10% found to be at advanced risk for developing problems.

FLAGS® Key Tracking Indicators

FLAGS is the next generation of measurement for gambling risk and harm specifically designed for public health surveillance as defined by the World Health Organization; *An ongoing, systematic collection, analysis and interpretation of health-related data essential to the planning, implementation, and evaluation of public health practice* (WHO, March 2010). Most gambling screens such as the CPGI-PGSI are comprised of a brief set of statements (≈8-10) designed to identify problem gamblers. In contrast, **FLAGS** is comprised of a comprehensive set of 10 multi-item indicators that are sequentially related to escalating risk and harm. Collectively the instrument is used to identify player risk assigning respondents to one of five risk and problem gambling categories based on summing their responses to each of the indicators. However, each of the 10 components also represents a distinct area of risk or harm for players ranging from early risk indicators (e.g., risky beliefs and motivations) through to advanced risk indicators (e.g., preoccupation, impaired control, risky practices) and finally indicators of problem gambling (e.g., persistence, negative consequences). Therefore, **FLAGS** can also be used to assess impacts at a component level to determine how specific strategies and interventions impact the various factors contributing to risk and the development of problem gambling. This functionality means that **FLAGS** moves beyond traditional identification of problem gambling prevalence by providing information for use in informing, monitoring and evaluating gambling related prevention, harm reduction, social and public health policy. In summary, **FLAGS** not only enables users to identify ‘who’ is at risk but, more importantly, ‘why’.

In the current study the new **FLAGS** measure used the 10 key indicators (e.g., constructs) described below to generate pre-measures for tracking the impact of the “My-Play” system on these specific components associated with risk and harm for machine gambling; it allows users to assess ‘what’ elements of risk and harm are being targeted by the RG tools and links evaluation to relevant player behaviours and practices (e.g., value of setting limits for those with impaired control). **FLAGS** breaks gambling risks and harms into 10 critical components found to be sequentially and most strongly related to escalating risk and harm for machine gambling

FLAGS Indicators	Description
Persistence:	<i>Over an extended period, continues to gamble in a risky manner that leads to harms.</i>
Negative Consequences	<i>Negative impacts in at least 3 of 14 different areas of life including financial, personal, family, work, health, social.</i>
Preoccupation: Obsession	<i>Excessive preoccupation, constantly thinking about VL gambling or finding ways to gamble on VLTs.</i>
Impaired Control: Begin	<i>Inability to resist or stop oneself from going to play VLTs.</i>
Risky Practices: Later	<i>More extreme or harmful types of risky practices (e.g. using credit to finance play).</i>
Impaired Control: Continue	<i>Inability to stop playing VLTS once started.</i>
Risky Practices: Earlier	<i>Less extreme types of risky practices that usually proceed more harmful practices (e.g. using bank card to get more money to play).</i>
Risky Cognitions: Motives	<i>Risky reasons for gambling (e.g., to pay off bills, to escape problems, for self-esteem or status).</i>
Preoccupation: Desire	<i>Strong drive to play the machines as much as possible.</i>
Risky Cognitions: Beliefs	<i>Irrational or inaccurate beliefs about VL gambling.</i>

Findings for Key Tracking Indicators

There have been questions raised about the value of player management tools for high risk and problem VL gamblers. Specifically, gaming operators have tended to be cautious in promoting systems like “My-Play” for higher risk gamblers and instead have positioned the product primarily as a preventative tool intended for those in the lower risk groups. As a result, most responsible gaming (RG) evaluation tends to focus on the impact of the system for non-problem gamblers. There are a number of reasons this approach has been adopted largely related to speculation that certain high risk player characteristics may serve to interfere with or over-ride the effectiveness of the system tools such as those offered by “My-Play” system (e.g., preoccupation with VL gambling (e.g., obsession or strong urges to play), inappropriate motivations for playing (e.g., to pay bills or escape problems) or impaired control (e.g., an inability to resist going to play the machines or to stop once you are playing). Most problem VL gamblers have many of these characteristics which means that the “My-Play” system may be less helpful for them if such factors are found to impede successful use of the system. However, to-date there is no evidence or research specifically examining the interaction between any of these characteristics and the effectiveness of RG features and tools in assisting players in managing their play. High risk gamblers have some of these characteristics as well but may be better able to take advantage of the ‘My-Play” features to reduce risky practices and, ultimately, their risk of experiencing ongoing negative consequences. Therefore, an important outcome of the current tracking study will be to determine how use of the “My-Play” system impacts the key factors associated with gambling risk and harm for VLTS and whether or not there are benefits for those most likely to be negatively impacted by VL gambling (e.g., high risk & problem VL gamblers). The new *FLAGS* measure developed by Focal Research provides a means of assessing and tracking these impacts.

Regular VL Players falling in each of the categories measured by the Canadian Problem Gambling Index (CPGI-PGSI) were profiled on the FLAGS indicators to determine benchmark measures for each of the key factors associated with VLT risk and harm.

Percent of Players in each CPGI Risk Category Triggering on FLAGS Indicators	Total (n=500)	No Risk 58.6%	Low Risk 15.8%	High Risk 13.8%	Problem 11.8%
Persistence:	13.8%	0.7%	1.3%	15.9%	93.2%
Negative Consequences	14.4%	0.3%	2.5%	21.7%	91.5%
Preoccupation: Obsession	7.2%	0.0%	2.5%	1.4%	55.9%
Impaired Control: Begin Play	15.2%	0.3%	1.3%	26.1%	94.9%
Risky Practices: Later	16.8%	1.7%	7.6%	30.4%	88.1%
Impaired Control: Continue Play	21.0%	2.0%	11.4%	52.2%	91.5%
Risky Practices: Earlier	17.6%	1.0%	3.8%	42.0%	89.8%
Risky Cognitions: Motives	16.2%	1.0%	7.6%	31.9%	84.7%
Preoccupation: Desire	11.8%	1.7%	5.1%	24.6%	55.9%
Risky Cognitions: Beliefs	19.8%	9.2%	15.2%	40.6%	54.2%

Panel Characteristics

Using the CPGI Problem Gambling Severity Index it was found that 42% of regular VLT gamblers on the panel scored at some level of risk (1+) and about 26% scored at high risk or problem levels (3+). Using the *FLAGS* at least 1 in 5 players scored for impaired control with 21% unable to stop playing once started and 15% unable to resist going to play; 18% were engaging in risky gambling practices, 14% continued to play despite suffering negative consequences (i.e., persistence), 20% had risky beliefs and 16% had high risk motivations for play. Problem and high risk VL gamblers were consistently more likely to have these characteristics than lower-risk players along with a high desire to play the games that would likely further erode efforts to control play. There were few demographic differences observed suggesting that once someone has taken up regular VL play they are similarly likely to develop problems. While problems with VLTs can occur for regular players in any segment it seems that risk is associated with length of play history, although it is unclear if those with problems are more inclined to keep on playing due to ‘impaired’ control or whether continued play over time leads to problems or perhaps a combination of both. As those at lower risk tended to have shorter play history there may be opportunities for early prevention especially among newer players.

Demographic Profile

Few demographic differences were observed with the exception that those at intermediate risk tended to be younger and better educated than high risk or problem VL gamblers.

- The player panel is evenly divided among males (48%) and females (52%) as well as those living in urban (53%) or rural (47%) areas of the province.
- The average age was 55 years with most falling from 45-64 years (63%) and the remainder divided between those under 45 years (17%) or 65 years and older (20%).
- Most were married or living in a common-law relationship (63%), and about 20% reported children under 19 years of age living in the same household (19%).
- Players were split between having high school or less (54%) and post-secondary education (46%) primarily vocational/college (29%) with 17% attending university.
- Most (60%) were employed primarily on a full time basis (51%) with 27% retired. Almost half (47%) reported household incomes under \$50,000, 30% between \$50-\$90,000, and 12% over \$90,000 with 11% refusing.

Play History

- Over half of panel members reported playing on a regular basis each week (58%) especially problem (90%) and high risk VL players (≈77%).
- There was no difference in slot machine play among any player risk groups with about 1 in 5 having played the machines at a casino during the three months prior to the survey.
- On average, regular players on the panel have been playing the machines for 10 years with only 11% having started playing within the last three years.
- Problem VL gamblers had been playing for longer periods (15 years versus 9 years) with a larger proportion having played for 10+ years (76%) compared to players in any other risk category (no risk: 49%; low risk: 58%; high risk players: 61%).

To determine if players change their VL gambling patterns either in response to feature use or to avoid the “My-Play” system it was necessary to profile current play habits and practices among the players in each risk category. Detailed play behaviour was gathered including accessibility to play, number of regular play locations, planned versus spontaneous play, distance travelled, play frequency, time and money spent. Understanding the play history of regular VL gamblers and the association of such patterns with risk for gambling problems has additional value for stakeholders in informing public health policy to reduce or minimize harm. For example, proximity and ease of access may facilitate planned play by higher-risk players. Given that most regular players live within a few kilometers of a favourite VL location they don’t have far to travel to access the machines. It was also found that planned not impulse play distinguishes problem from non-problem players; problem VL gamblers were twice as likely to be in a location with VLTs each month and most times they were there specifically to play the machines (64%). This suggests potential to incorporate play management into the planning process assisting players in developing or setting strategies in advance of play in order to control and/or limit exposure.

Locations

- Most regular players in all risk groups have 1 to 2 different regular locations where they play the machines (70%).
- Higher-risk players were about twice as likely to have 3 or more regular locations compared to those at lower-risk (≈25% versus ≈11%).
- The average distance between home and regular play locations is ≈6.5 km, with half living within 3 kilometers making it easy to go and play on a regular basis.
- Bars, pubs, lounges and licensed restaurants are the most common VLT sites and, not surprisingly, appear to be the most popular locations among all participating regular VL players (51%), with 26% of most recent play sessions taking place at legions and community centers, 15% occurring at sport bars and 5% at First Nation sites.
- There was some evidence younger players and those at intermediate risk prefer sports type locales but otherwise there were few differences observed among risk groups.

Exposure to VLTs

- Problem VL gamblers reported higher exposure to VLTs each month; on average, they were in a location with VLTs twice as often as no risk players (14 versus 7 times).
- In most instances they were going to the site specifically to play the games at a rate three times that reported by no risk players (9 versus 3 times) suggesting it is more about planned rather than impulsive play for the problem gamblers.
- This meant that in the three months before they took part in the survey 64% of the times problem VL gamblers were in a site with VLTS was to specifically play the machines as compared to 40%-43% of the times for lower risk gamblers.
- Rates of impulse play were similar among all regular players; when in a location with VLTs for another reasons about 40% of the time a regular player will end up playing regardless of risk for gambling problems.

Time and Money Spent

The survey examined issues and strategies related to expenditure and self control. While access and frequency of play are key factors that can contribute to problems over time, it is ‘what’ players do each time they gamble that determines whether ongoing play is likely to result in gambling risk or harm. Dr. Mark Dickerson has argued control issues (i.e., impaired control) are not exclusive to problem gamblers (Dickerson 2003). Over-spending and/or losing track of time or money occurs for the majority of regular players ; 70% or more report they sometimes lose track of the amount spent while gambling and on occasion spend more time or money gambling on the machines than intended (McDonnell-Phillips 2006; Schellinck & Schrans 2002b, 2004c; NSDOH & Focal Research, 1998, 2000). Regardless of risk, a significant proportion of players (44%) report “irresistible urges” to continue gambling once they are involved in play (O’Connor & Dickerson, 2003). The evidence suggests loss of control while playing is not an unusual experience. However, the frequency with which someone plays and suffers impaired control does significantly distinguish between those who develop gambling problems and harm and those who do not.

Money & Time Spent

- Problem VL gamblers spent more money and time on VLTs than those in any other player group, on average, spending \$140 each time they played, a rate three times that of no risk gamblers (\$45) and over twice the amount spent by those at low risk (\$61).
- High risk players also outspent the lower risk segments each time (\$89) but still fall well below the amounts reported by problem VL gamblers.
- Similarly, problem VL gamblers, on average, spent about 2.5 hours on the machine each play session compared to 1 –1.5 hours for lower risk players.
- Half of problem VL gamblers were playing for more than two hours each time they played VLTS and this dropped down to 20% among the high risk players with less than 5% of no risk players typically spending more than two hours on the machine during a single play session.

Budgeting

- The ability to set and keep to a budget is one of the key distinguishing features between those who play the machine without problems and those who experience problems..
- Most players in all segments set a budget for their gambling before they arrive at the location especially the no risk players (96%) as compared to 71% of problem VL gamblers and 85% to 88% of those at any other level of risk.
- Budgets tend to be set on a per session basis as players typically find it difficult to accurately keep track of VL expenditure over time.
- Among those who usually set a budget for play, high risk (\$73) and problem VL gamblers (>\$110) set their limits at least two times higher than lower-risk players (\$44 to \$58) and were more likely to exceed their budget during play. (e.g., over the last 10 sessions played, 64% of problem VL gamblers reported exceeding their budget more than half the times they played as compared to only 1% of no risk players).

Setting and keeping a budget is one of the key distinctions between higher and lower-risk. When setting a budget 60% of no risk players reported they had never exceeded their desired spending limit the last 10 times they played. In contrast, only 30% of low risk players never exceeded their budget and this dropped dramatically among the high risk (16%) and problem VL gamblers (10%). For most regular players, in particular those at highest risk, help in setting and, more importantly, sticking to a spending limit should have value. Many regular VL players find it difficult to keep track of their play over time and this is even more pronounced among the higher risk gamblers who play more often, spending more time and money. Access to play histories or player account statements has relevance for most players. Evidence from the Windsor Trial suggested simply having the ability to monitor expenditure was often sufficient in assisting some players to stay on track (Focal Research & NSGC, 2007). Most players try to manage their gambling on a per session basis. While players use many play management strategies these methods are typically only considered effective by the lower-risk gamblers who by definition exert greater self-control over their VL gambling. While higher risk VL gamblers also use these same strategies they are less successful suggesting this group should derive benefit from tools which assist them in supporting or enforcing personal play decisions.

Keeping Track of Play

- Most players find it relatively easy to keep track of wins and losses during a specific play session especially lower risk players (91%-95%) who tend to spend less time and money each time they play. But, for 1 in every 4 problem VL gamblers, who typically play longer and spend more, keeping track of session expenditures is sometimes difficult.
- In contrast, keeping track of expenditure over time was less easy for all players especially those scoring for high risk (61%) and problem VL gamblers (81%).
- Only half of no risk players found it easy to keep track of their annual VLT expenditures with the majority of all those scoring at any level of risk having problems keeping track of how much they are spending on VLTs each year suggesting access to play histories is relevant for a significant proportion of regular players, especially those at higher risk.

Control Strategies

- Given difficulty in keeping track of play over time most players reported using numerous strategies to control their gambling on a per play session basis, primarily setting a budget before they arrived at the site (88%), only bringing limited amounts of money to the location to prevent overspending (62%), and stopping once they have reached a set loss limit (58%).
- Among those setting a budget most lower risk players (90%-96%) felt this was a helpful strategy as compared to 30% of problem VL gamblers. This was also true for success in stopping once limits were hit with the 85%-91% of lower-risk players finding this strategy helpful as compared to 26% of problem VL gamblers.
- At-risk players more often tried to control their gambling by limiting the amount of money brought to the location (≈70% versus no risk: 52%) yet again lower-risk players derived greater benefit from this practice than problem players (≈90% versus 39%).

High Risk & Problem Gambler Profile

At any given time problem VL gamblers have been found to comprise a minority of regular players (≈12-16%) and typically only represent 1-2% of adults in the population at large. Yet, because of how they play, this group collectively accounts for a disproportionate amount of gaming revenues ranging from low estimates of 30% to 40% (Williams & Wood, 2007b, 2004; Schrans & Schellinck 2003, 2008; Productivity Commission 1999) to highs of 40% to 50% (NSHPP & Focal Research, 1998). In 2009/10, VLTs continued to account for 61% of all net profits from gambling in the province of Nova Scotia.⁴ This means that the play activity of problem VL gamblers and those at higher-risk continues to have significant implications for gaming revenues in the province much of which can be expected to reflect player difficulty in sticking to desired play levels once they have become engaged in play. Therefore, despite the efforts by the majority of higher risk VL gamblers to set budgets and regulate their play, a disproportionate amount of VL profit comes at the expense of those who are repeatedly spending beyond their desired limits. Features that help players keep track of their spending and assist them in playing within affordable spend limits should be of specific relevance to those at higher-risk and most likely to be experiencing such loss of control.

Play Behaviours

Current Play Behaviours (last 10 times played)	No Risk	Low Risk	High Risk	Problem
Lost track of time while playing	10%	34%	42%	71%
Lost track of money while playing	2%	15%	38%	59%
Spent more time playing than intended	13%	43%	49%	86%
Spent more money playing than intended	21%	51%	78%	93%
Tried to win back losses (Chased losses)	9%	24%	62%	81%
Spent all money brought to location	36%	66%	75%	92%
Used bank or credit cards to keep gambling	13%	41%	58%	75%
Won big and put it all back into the machine	8%	32%	41%	53%
Borrowed money from others to keep playing	1%	5%	12%	20%

- During the last 10 times played most problem VL gamblers lost track of time and money, spent more time and money playing VLTs than intended, spent all the money they brought to the location, chased losses, used a bank card to get more money to keep playing, put winnings back into the machines and one in five ended up borrowing from others so they could keep playing. These are behaviours that contribute to chronic over-spending, risk, and problems.
- In contrast, those at no risk rarely lost track of how much money they were spending, almost never borrowed from others, didn't reinvest winnings or chase losses often. However, 10% lost track of time, 21% spent more money than intended and 36% spent all the money they brought to the location, a control strategy that only no risk players found to be helpful in moderating VL expenditures.
- Use of formal treatment and support services was low; only 3% had sought out professional help at some time in the past. Yet, in the three months before the survey, 32% of problem VL gamblers reported that friends or family members had expressed concern about their gambling, and 10% had enlisted the aid of friends or relatives in helping them control their VL play.

Problem VL gamblers not only account for a disproportionate amount of gambling revenues but also continue to account for the majority of negative gambling impacts and social costs experienced at a family and community level with about 1 in every 5 adults in the province citing personal exposure to problem VL gambling through someone they know and care about (NSHPP & Focal Research, 2007). VL gamblers continue to comprise the majority (80%+) ¹² of those seeking help from Addiction Services across the province as well as those calling the Problem Gambling Help Line even though a minority of players experiencing difficulties will ever actually seek out or contact any formal sources for assistance. ⁵ VL gamblers are significantly more likely to try to manage their play on their own or with the assistance of friends/family suggesting that player management tools are likely highly relevant for those looking for self-help solutions. Moreover, such tools may offer potential to treatment providers & prevention specialists looking to assist players (e.g., helping players to help themselves in reducing and/or avoiding harm).

Efforts to Reduce or Eliminate Play

- During the three months prior to taking part in the survey the vast majority of high risk and problem VL gamblers made attempts to self modulate their VL gambling:

–80% OF PROBLEM GAMBLERS HAD TRIED TO CUT BACK HOW OFTEN THEY GAMBLED;
 –64% HAD TRIED TO CUT BACK THE AMOUNT THEY SPENT;
 –44% HAD TRIED TO AVOID PLAYING ON CERTAIN DAYS;
 –56% HAD TRIED TO TAKE SHORT BREAKS IN PLAY OR TRIED STOPPING FOR A FEW DAYS;
 –32% HAD TRIED TO TAKE LONGER BREAKS FROM VL PLAY;
 –31% HAD TRIED TO ELIMINATE THEIR VL PLAY ALTOGETHER (I.E., STOP PLAYING).

- Although high risk and problem VL gamblers were more likely to have tried to reduce or eliminate their VL play it was notable some lower-risk players had also done so suggesting that all players can benefit from features that assist them in controlling their play although not to the extent as that noted for higher risk players.
- For example, 13%-32% of lower risk players, who comprise the majority of regular VL players, were interested in being able to take short breaks in play. “My-Play” offers this short-term exclusion option (e.g. ability to stop play for 24, 48, or 72 hours).
- In contrast, almost no one in the lower risk player segments is looking to stop playing VLTs altogether as compared to 13%-31% of higher risk players. Thus, long-term self-exclusion options are only likely to be used by those in the higher risk, higher need categories. As a result, only a small percent of regular VL players would be expected to use such a feature yet these players represent those at highest risk and most likely to benefit from a long term self-exclusion feature. Currently, “My-Play” does not offer this feature.

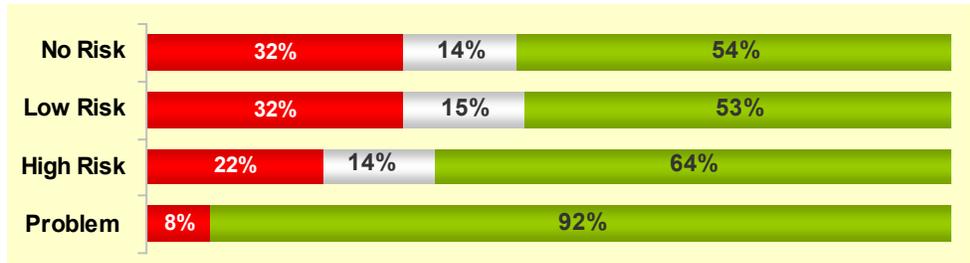


Player Attitudes & Opinions

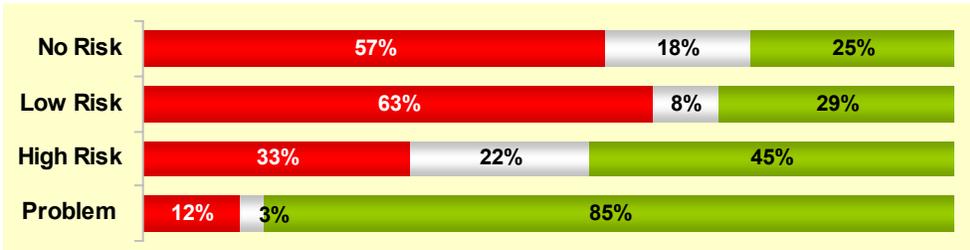
Most people in Nova Scotia have limited direct experience with VLTs; only about one-third have ever tried the machines, less than 20% will have played a VLT in the past year, and <5% play each month.⁵ Given their level of involvement Regular VL players were expected to have a vested interest in any policy and program changes for video lottery and to have more informed opinions surrounding the topic. Participating players were asked a series of questions regarding VLT availability, safety and accessibility prior to the introduction of “My-Play” in order to determine impacts on attitudes following experience with the new system. Most players in all segments supported reduced access for VLTs and believe it is a risky form of gambling. The majority in all risk groups felt that VLTs should be restricted to only a few locations especially among problem (85%) and high risk players (64%). Players were more divided regarding a total provincial ban. Again, most problem VL gamblers (85%) want the machines removed; lower risk players (57%-63%) were more inclined to oppose a ban; high risk players were split on the issue. The majority in all risk groups did not feel video lottery was a safe form of gambling especially among those scoring at any level of risk for gambling problems; problem VL gamblers (90%) high risk (77%) and low risk gamblers (66%). Even among no risk players few felt VLTs were safe suggesting players generally recognize VLTs are a risky form of gambling requiring additional oversight and control.



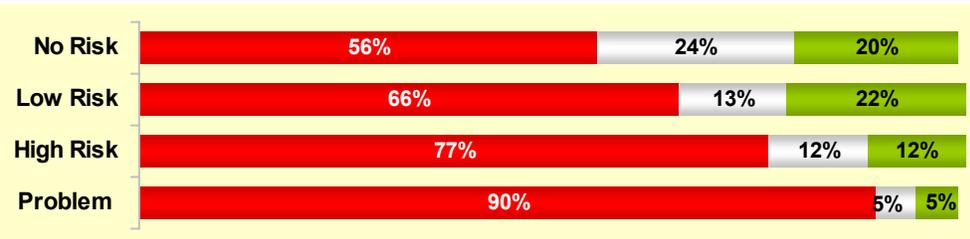
VLTs Should be Restricted to Few Locations



VLTs Should be Banned in NS



Gambling on VLTs is a Safe Form of Gambling



All those taking part in the Benchmark Survey were asked a series of questions to assess player response to the “My-Play” concept and player management tools in general including awareness of the program, current support for various features and options, likelihood of use, potential barriers and potential impact for play behaviours as well as support for mandatory versus voluntary use of the features. Despite low awareness of specific program content and features 21% of players are planning to get a player card and 8% are already registered with almost 1 in every 2 problem VL gamblers (47%) indicating that they are willing to sign up for the program. Communicating the relevance of the card for non-problem players will be important for supporting uptake for preventative purposes as will promoting the benefit of tracking expenditures and using the tools for budgeting and player management. Player privacy could be enhanced by providing players with private access to the RG tools and player information online at home or in consultation with treatment or healthcare professionals. This permits players to experiment with the features in private and examine their play activity without fear of others seeing personal information. Additional reassurance may be required to ensure player confidentiality and personal information is protected as well as addressing issues of ‘how’ play data will be stored and used including who will be responsible for or have access to the data.

“My-Play” Concept & Features

Awareness and Support for “My-Play”

- At the time of the survey 40% of players were aware that changes were being made to the VL program in NS but only 5% were able to recall the specific program (“My-Play”).
- 38% had already played at least once on one of the new or modified machines and there was no difference in trial rates between any of the risk groups.
- Overall, 29% reported that they were either planning to get a player card once it was available (21%) or already had one (8%). Problem VL gamblers taking part in the survey had the highest intention rate with 47% expecting to sign up for a card, followed by 32% of high risk players (32%). Even among no (25%) and low risk players (29%) there was some level of interest in getting a VL player card.
- Primary barriers to use center on perceived lack of need for the service, especially among lower risk players; lack of understanding about how the program and system works especially among higher risk players; and privacy concerns which were mentioned by a similar portion of players in all risk groups (26% to 32%).
- Over half of no risk players (53%) feel they do not need the card as compared to only 20% of high risk players and 3% of Problem gamblers.
- Those scoring at any level of risk were more inclined to feel they didn’t know enough about the system in order to make a commitment at this time. It may be that this lack of information will be addressed through an ambassador program during the launch.
- Education promoting the benefits of the program and features as well as addressing ways to improve player privacy (e.g., online access to account histories) including assurances about ‘who’ has access to the information, should serve to offset preliminary player concerns.
- Overall, half (51%) of regular VL players indicated that they were in favour of the “My-Play” system with only one-third (31%) opposed. Although opposition to the program was low in all player groups problem VL gamblers were most likely to be in favour of “My-Play” (68%) as compared to no risk (48%) or low risk (41%) gamblers.

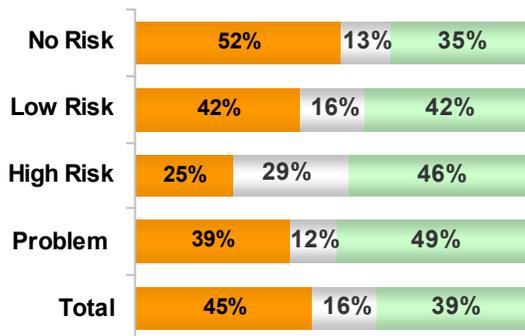
Appeal of RG Features

To determine how receptive players were to specific player management tools all respondents were asked to rate each feature using a 5 point desirability scale ranging from 1 (not at all desirable) to 5 (very desirable to have on the machines). The majority of higher risk players were either supportive or undecided for each. More than half of problem VL gamblers wanted options on the machines to track losses during play (58%), set money limits (55%) and self-exclude for short (54%) or long-term periods (56%), while most high risk players supported options to track expenditures during play (61%), set money limits (60%) and exclude for specific days or periods (52%). Interest in access to player accounts (i.e., monitoring amounts spent over time) was considered desirable by a similar proportion of all at-risk players (42% to 49%) with 35% of no-Risk players also wanting this feature available.

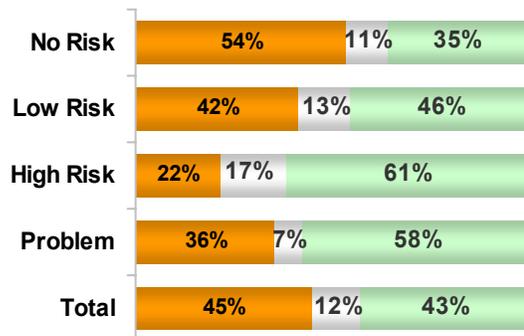
■ Not Desirable (Rating 1-2)
 ■ Neutral (Rating 3/DK)
 ■ Desirable (Rating 4-5)

Feature Desirability

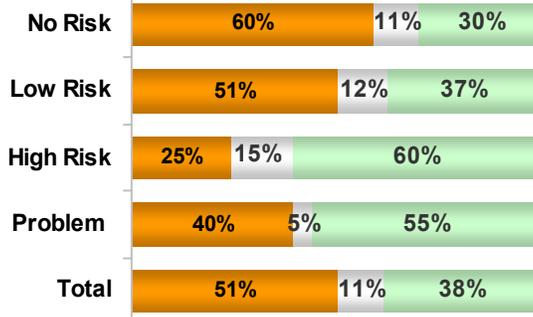
**See/Track Amount of Spending over Time



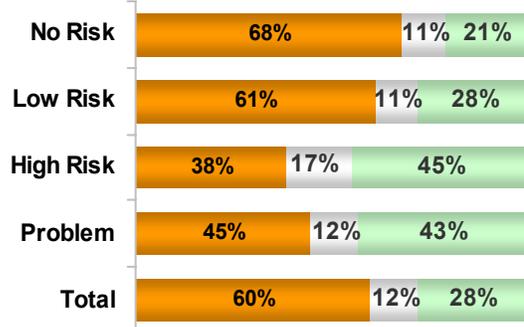
**See/Track Wins/Losses During Play Session



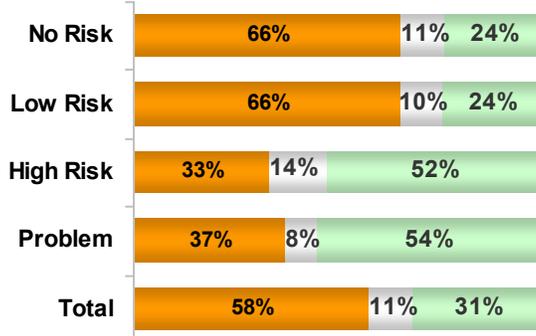
**Set Money Limits for Play Session/Day/Month



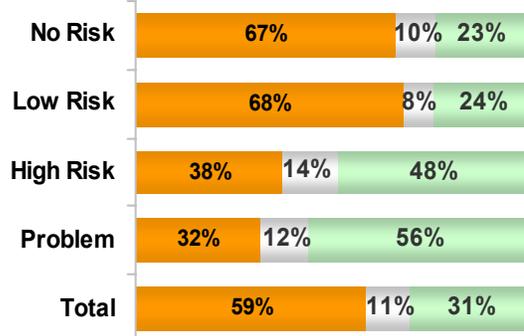
**Set Time Limits for Play Session/Day/Month



**Self-exclude for Days/Weeks/Specific Dates



**Self-exclude for Longer Periods of Time



The majority of high risk (59%) and problem VL gamblers (68%) were in favor of “My-Play” and the introduction of player management tools for VLTs. Opposition is low in any player group although the perceived effectiveness of the program is split. Those at higher risk were more likely to believe that the availability of such features would enhance their ability to ‘play responsibly’ although the majority in all groups thought it would be at least somewhat effective (60% to 75%). If use of the “My-Play” system was made mandatory most high risk (61%) and problem VL gamblers (66%) felt they would decrease their VL play whereas lower risk players (»62%-66%) were more inclined to think their play would remain unchanged although for the remaining third there were expectations of declines. In general players felt use of the specific RG features should be voluntary and occur at the discretion of the player. This is consistent with previous research suggesting not all players are in need of specific features in order to manage their play.¹ However, to ensure players are able to access the RG features ‘when and if’ they choose means that use of a player card or universal player id device must be mandatory in order to make sure the system is capturing and storing the necessary player data to support discretionary use of the RG features (e.g., players cannot reference accurate records of expenditure if all play sessions are not included in the data; incomplete information could be misleading significantly under-representing actual play activity and end up misinforming players.)

Interest in the Features and Potential Impact

- The ability to track amounts spent either ‘per time’ (during the play session) or ‘over time’ (per month or year) was of interest to players in all segments, in particular problem VL gamblers (56%) and especially those at high risk (71%).
- High risk players (72%) were also more likely to report they would take advantage of setting money limits although most low risk (59%) and problem VL gamblers (62%) also intend to try this feature as well.
- Overall, higher risk players were most likely to report any interest in using the other control features such as setting time limits (53% to 55%), blocking themselves from play for short specific periods of time (59% to 60%) with 56% to 63% expressing interest in self-excluding for longer periods.
- Problem VL gamblers were the players most likely to consider using the system for long-term self-exclusion (63%) with 36% reporting *strong* likelihood of using this feature. This is in sharp contrast to lower risk players (6%). Even among high risk players 20% indicated they are very likely to initiate long-term self-exclusion if it was available.
- 42% to 43% of no risk gamblers think they would be at least somewhat likely to use the information features (e.g., account summaries) to check on how much they are spending over time or during a specific play session.
- Most players felt the use of the features should be voluntary; players should be able to choose ‘if and when’ they want to use a particular feature. However, many problem VL gamblers endorsed mandatory use suggesting under certain circumstances some players may be receptive to mandatory use to support play commitments made personally or in treatment situations.

% OF PROBLEM GAMBLERS SUPPORTING MANDATORY USE OF EACH FEATURE:

- MONITORING AMOUNTS SPENT (46%)
- TRACKING OF SESSION WIN/LOSSES (41%)
- SETTING MONEY LIMITS (41%)
- SETTING TIME LIMITS (38%)
- SHORT TERM SELF-EXCLUSION (38%)
- LONG TERM SELF-EXCLUSION (36%)

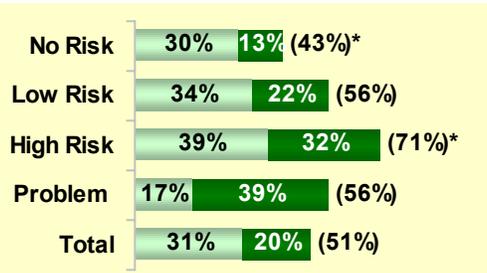
Likelihood of RG Feature Use

In contrast to other forms of gambling, problems with gambling machines tend to develop quickly (Breen & Zimmerman, 2002). In NS, half of those experiencing problems with VLTs reported developing problems within six months of taking up regular play (NSHPP & Focal, 2000; Schellinck & Schrans, 2004a). In longitudinal studies investigators have found that players tended to move in and out of problems while gambling (UK Prevalence Study Follow-up, 2009; Kerr et al, 2009; Haworth, 2005; Wiebe et al, 2003; NSDOH & Focal, 2000). While the general pattern of gambling risk in the population tends to be stable, as noted in the 2005 Longitudinal Gambling Study in Queensland “there is a high degree of change in the gambling status of individuals”(p.135). In the case of machine gambling this consumer churn is evident with approximately 25% of the regular player base typically stopping or starting play at any given time often in attempts to control spending or recoup losses (NSDOH & Focal, 1998, 2000). This means that those identified as lower risk VL players could migrate to higher risk levels and vice versa suggesting features that assist gamblers in tracking and managing play have value and relevance for regular players in general as reflected in players’ intent to use such features below. Higher risk VL gamblers consistently reported greater likelihood of use for all of the features presented with most reporting they are at least somewhat likely to access expenditure information or set limits. *(Those “not at all likely” to use the feature were not included in the graphs below)*

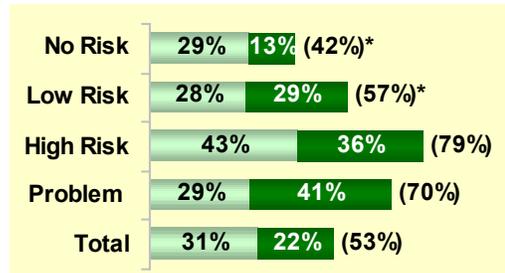
■ Somewhat Likely ■ Very Likely

The Likelihood of Feature Use by Risk Category

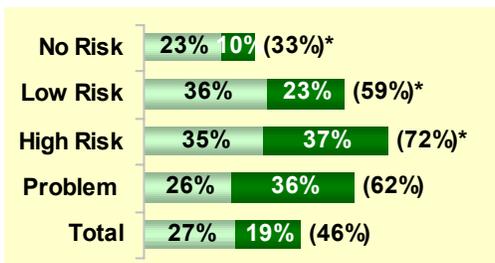
** Expenditure Tracking Over Time



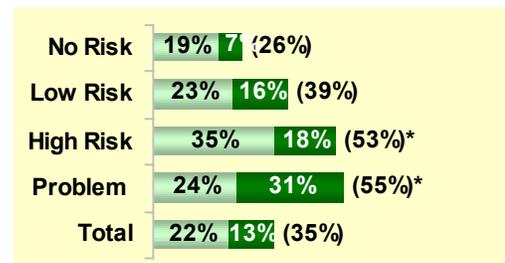
** Expenditure Tracking During Play Sessions



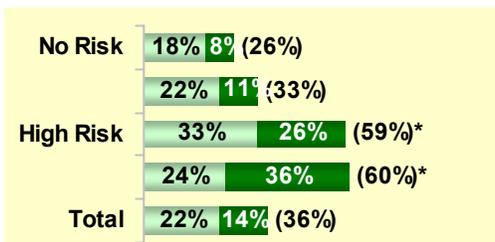
** Set Money Limits for Session/Day/Month



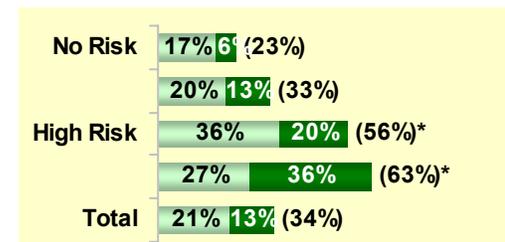
** Set Time Limits for Play Session/Day/Month



**Self-exclude for Days/Weeks/Specific Dates



**Self-exclude for Longer Periods of Time



Generally, the majority of high risk and problem VL gamblers taking part in the survey responded positively to the “My-Play” concept and features tested. The system potentially has value for higher risk players many of whom are characterized as having impaired control, chronically spending beyond desired play limits with significant negative consequences. There was also evidence that these players have used various strategies to try to manage their play with little success. Therefore, any system which assists them in implementing and enforcing play decisions is seen to have potential benefit. However, one area of contention surrounding the value of the system for those at highest risk is the issue of mandatory versus voluntary card use. Most players are in agreement that use of any specific RG feature should be voluntary (e.g., setting limits, referencing account summaries, self-excluding) so players can make customized choices that meet their individual needs and circumstances with privacy and security. Yet, without implementation of a universal player identification device (e.g., mandatory card use) there is limited value to players in taking advantage of the optional features on an as-needed basis; higher risk players must continue to rely on willpower or other unsuccessful strategies when they reach preset limits if they can simply continue to play without the card. Since information is only gathered when players use an id device (e.g., card) optional use will also produce incomplete and potentially misleading information in the case of account summaries tracking expenditure over time making it unreliable as a management tool. Evidence suggests that cards or other player tracking devices will eventually need to be mandatory to optimize system benefits for players especially those at high risk or experiencing problems.

Discussion: Mandatory Card Use versus Voluntary Card Use

When given an option most players endorse voluntary use of a tracking device as well as the RG features primarily due to concerns surrounding privacy and data security, inconvenience and the perceived irrelevance of the features and options for personal use; “I don’t need these type of features” (McDonnell-Phillips Pty, 2006, Bernard Lucas & Jang, 2006; Omnifacts Stage 1, 2005, Office of Regulatory Policy, Queensland, 2009).

These findings are not particularly surprising since players responses are not based on actual experience with the system but rather on expectations of inconvenience or pre-existing perceptions of how the system works and ‘who’ they think it is intended to assist (e.g., the system is there to help Problem Gamblers; since I am not a problem gambler I don’t need to use it). There is little incentive for players to support change especially involving unfamiliar technology (Nisbet 2005b, 2006). Consequently, there have been questions raised as to how much weight player pre-trial preference should be given in influencing the introduction and use of product safety features (Parke et al, 2008).

In general, the reception of players and adults to options for assisting players in keeping track of gambling expenditures is positive suggesting that how the prospect of player tracking is framed will influence the level of support generated (e.g., communicating player advantages and normalizing use by supporting the value of features and options for all players rather than being exclusive to those experiencing problems).

This is consistent with other mounting evidence supporting the practicality of general or universal use of player registration (ID) and tracking (RGC, 2009; Parke et al, 2008; Livingston and Woolley, 2008; Schellinck & Schrans, 2007; IGA 2005; Hing 2003). For example, individual player information is only gathered and stored when an id device, such as a player card, is used; without an unique id the machine can’t tell the difference between players or the choices they want to make. In order to take advantage of any of the safety features from the most simple (e.g., checking on how much you have spent in the last month) to the

Mandatory versus Voluntary

most complex (e.g., self-excluding for 6 months), means that players must be using their 'card' every-time they play so the information is there when they need it or choose to use it. Otherwise player information will only be tracked when someone voluntarily uses their card. It is difficult for players to anticipate when they might need such information and the benefits of card use may not be initially obvious to a players. This means that if they don't use the card to record their play then the information is not there when they need it.

In their comprehensive literature review of cashless and card-based technologies for the UK Gambling Commission Jonathan Parke and his colleagues (2008) observed that "the ability to pre-set spending limits and avoid irrational spending decisions when in an aroused state will be redundant if the player can simply remove their card and thereby reverse any previous decisions taken to set limits" (p.65). Given the mitigating role of willpower, or lack thereof, in supporting personal spending limits, a player management system without accurate spend information and enforcement of personal play decisions is likely to have minimal value to those depending on such a system to help them gamble at desired levels.

In Stage 1 of the Windsor Trial in Nova Scotia in 2004 there was little to no voluntary use of the player card. Even among participating panel members who agreed to use the card during the trial, 44% of those who set any limits continued to play without the card after reaching their pre-set budget. This finding was underscored by low voluntary up-take in the trials conducted in New South Wales Australia in 2001 (1%-3.5% of members).

The rate of use was higher during the most recent 2008 player card trials in Queensland; voluntary use was supported by active recruitment using on-site ambassadors and through staff referrals as well as player incentives for getting and/or using the card (e.g., weekly draws, rewards and \$20 value in member points). This led to 13%-17% of members applying for a card. While this rate of use exceeded previous benchmarks the vast majority of players were still by-passing the system. This low level of use suggests the voluntary cashless pre-commitment approach tested in Queensland did not provide enough value to players to warrant up-take and low participation rates compromised the benefit of reduced operating costs that are supposed to accompany a cashless functionality and make it more appealing to gaming operators (Schottler Consulting 2009a, 2009b). Despite high interest expressed by players in checking on how much they were spending, no participants asked for a copy of their account summary when it was only available through a formal request to on-site staff versus 68% when players were able to access this info on their own (see below).

In contrast, during Stage III of the Windsor Trial in Nova Scotia when card use was mandatory and feature use was optional, most regular players (71%) tried at least one of the features, especially the account summary (68%) and session summary features (Live Action: 59%). Moreover, once a player had tried a feature most (65%) continued to keep using it after trial. Half (48%) of all regular players in the test area took up regular use of the information features (i.e., account summaries) indicating that it had ongoing value for a substantive proportion of all players once they had actually tried it (Schellinck & Schrans, 2007). The difference between only 2% to 17% of regular players reporting any use of a management features when the system was voluntary as compared to almost half taking up regular use when card use was mandatory suggests a significant opportunity gap of about 30% to 40% in terms of the proportion of players deriving benefit from the system. Thus, mandatory use of a player card meant that more players were exposed to the potential benefits of the various management features offered resulting in higher feature use and more players deriving ongoing benefit and value from the system.

This will be explored in greater detail during the Phase 2: Follow-up Survey.

The Phase 1: 2010 Regular VL Players Benchmark Survey establishes detailed pre-trial measures of play behaviours, attitudes and perceptions for comparison once players are exposed to the new “My-Play” system. While the primary purpose of the study is to assess system impacts for high risk and problem VL gamblers there was also valuable information gathered that can be used by various stakeholders in supporting other harm and risk reduction for video lottery in Nova Scotia. The findings are promising ; player management tools appear to have strong relevance and potential among high-risk and problem VL players although mandatory card use may be required to optimize player benefits. This will continued to be assessed and confirmed during Phase 2 of the study.

- 42% of regular VL players taking part in the survey scored at some level of risk (CPGI 1+) with 26% scoring at higher risk levels (CPGI 3+);
- 20%-21% were found to have impaired control, 18% were engaging in risky gambling practices, and 14% were continuing to play despite suffering negative consequences (i.e., persistence);
- Higher risk players have been playing longer, play more often at multiple regular locations and on multiple machines, spending more time and money than those at lower risk;
- Use of strategies to manage expenditure were widespread among players; most set a budget, limit amounts they bring to the location, cash-out frequently while playing, and plan to stop if they have lost a certain amount of money;
- The key difference between players success in using personal play strategies was found to be related to willpower; lower risk players were better able to set and enforce play limits whereas those who were at high risk or having problems were not;
- Most regular VL players report spending beyond desired limits upon occasion but for those at higher risk overspending happens most times they play;
- Many lower risk and most high risk players find it difficult to keep track of gambling expenditures over time;
- A minority of problem VL players (3%) have ever sought out formal assistance in dealing with their VL gambling with most preferring to pursue self-help options;
- The majority especially problem VL gamblers, do not believe VLTs are a safe form of gambling and support greater restrictions for VLT accessibility with 85% of problem VL players in support of a total VLT ban in the province;
- A slight majority were in favour of the “My-Play” RG features being available, especially among problem VL gamblers with 47% expressing interest in getting a player card versus 29% for lower risk players;
- Despite interest in using a player card the majority of all high risk players reported they were at least somewhat likely to try any one of the “My-Play” features offered;
- Primary barriers to use centered on lack of relevance (Don’t need it), privacy concerns, and lack of understanding about how the card/feature works and potential benefits of use with some evidence players may link card use with having a gambling problem;
- Most players felt use of the specific RG features should be voluntary, although evidence indicates use of a player card or other ID device will have to be mandatory thereby normalizing use of the card for all players as well as ensuring the system is capturing complete and accurate information consistently supporting player decisions over time and over different play locations.

Summary of Key Findings

References

Endnotes

1. There were three research studies assessing various components of the original player card system tested during the Nova Scotia Windsor Trial: Bernard, Lucas & Jang, 2006; Omnifacts Research, 2007; Schellinck, Schrans, & Focal Research, 2007) <http://www.nsgc.ca/reDevice.php>.
 2. Nova Scotia Gaming Corporation Stats & Facts. Retrieved at <http://www.nsgc.ca/vltStats.php> on September 9, 2010.
 3. Nova Scotia Office of Aboriginal Affairs-First Nation Gaming. Retrieved at <http://www.gov.ns.ca/abor/resources/firstnationsgaming> on September 20, 2010.
 4. Nova Scotia Annual Gaming Reports 2009-2010. Nova Scotia Environment and Labour, Alcohol and Gaming Authority, Provincial Gaming Activity. Retrieved at <http://www.gov.ns.ca/lwd/agd/pubs.asp> on September 9, 2010.
 5. Nova Scotia Department of Health, & Focal Research Consultants Limited. (2007). 2007 Adult Gambling Prevalence Study. Halifax, Nova Scotia: Nova Scotia Department of Health. http://www.gov.ns.ca/hpp/publications/Adult_Gambling_Report.pdf.
 6. Regular VLT gamblers consistently are found to account for 90% to 95% of NS annual gaming machine revenues (Schellinck and Schrans, 2007, 2002b, NSDOH & Focal 1998) similar to findings for overall gambling in both the 2003 and 2007 NS Gambling Prevalence Studies (2007 Adult Gambling Prevalence Study, p. 68-69).
 7. Communication with the Executive Director of the Nova Scotia Gaming Foundation (C. Gotell), September 15, 2010.
 8. Problem gamblers typically represent ≈1-2% of adults in the population at large. Because of how they play this group collectively accounts for a disproportionate amount of gaming revenues ranging from low estimates of 30% to 40% (Williams & Wood, 2007, 2004; Schrans & Schellinck 2003, 2007; Productivity Commission 1999) to highs of 40% to 50% found in the 1998 Nova Scotia Regular Video Lottery Players Study.
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Nova Scotia Gaming Foundation

The Nova Scotia Gaming Foundation (NSGF) is a not-for-profit, arms-length government organization. The Foundation operates through a volunteer Board of Directors that is appointed by, and accountable to, the Minister of the Department of Health Promotion and Protection.

The Nova Scotia Gaming Foundation is guided by three strategic priorities:

- ✓ Building Capacity to Make a Difference
- ✓ Informing Balanced Dialogue on Gambling Problems
- ✓ Mitigating or Reducing the Undesirable Effects of Gambling

NSGF encourages and supports independent response to problem gambling in Nova Scotia. This is accomplished, in part, through funding to community groups and researchers to help address problem gambling. Eligible projects are those developed to support problem gambling prevention, education, treatment, remedial intervention, and research across the province. In addition to providing funding, NSGF is also committed to developing resources and commissioning research to assist community and other related stakeholders in addressing problem gambling at a primary, secondary, and tertiary level.



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