FACT SHEET 1

BACKGROUND AND METHODOLOGY

Problem gambling is an important health and well-being issue for the Victorian community and the Victorian Government is committed to reducing the harm caused by problem gambling.

A study of gambling in Victoria - problem gambling from a public health perspective – is Victoria's largest gambling study, with 15,000 participants in total. Findings from the study identify a diverse range of interesting insights about the prevalence, distribution and determinants of problem gambling in Victoria.

METHOD

The study adopts an epidemiological methodology by seeking information about the estimated prevalence and distribution of problem gambling in the Victorian community. It also examines possible determinants of problem gambling. These include a range of personal, social, economic and environmental factors that may be associated with problem gambling behaviour (eg. health status, poor psychological well-being, substance use and abuse, low community connectedness and demographics).

SAMPLING

The sampling for this study was stratified to reflect the adult population of each of the eight Government regions across Victoria (see report for details). Local government areas were classified into high, medium or low electronic gaming machine (EGM) expenditure bands. The high EGM expenditure areas were over- sampled to ensure likely problem gamblers were captured, with 70 per cent of the sample coming from high expenditure areas, 20 per cent from medium expenditure areas and the remaining 10 per cent from low expenditure areas. Randomly generated telephone numbers were then pooled into EGM expenditure bands and numbers randomly selected.

WEIGHTING

Data in the epidemiological study were weighted to ensure that the sample was as closely aligned to the Victorian adult population as possible. This included weighting adjustments to reflect the method of sampling, the number of adults and telephone lines per household and other general Victorian population characteristics (eg. age, gender, location).

KEY MEASURES

The Problem Gambling Severity Index (PGSI) (a nine-item screen from the Canadian Problem Gambling Index (CPGI)) was administered to all gamblers in the study. The PGSI divides gamblers into problem, moderate risk, low risk and non-problem gambler risk segments.

The NODS-CLiP2 was also administered to estimate lifetime prevalence of both problem and pathological gambling. Lifetime prevalence refers to the number of adults known to have experienced problem gambling for at least a part of their lives.

Validated measurement scales and screening tools used in population health settings were used in this study to assess psychological health, smoking, drug and alcohol consumption.

DEFINITION OF GAMBLING

Gambling was defined as spending any money on any of the following activities in the past twelve months:

- Informal private betting for money – like playing cards at home
- Playing the pokies or Electronic Gaming Machines
- Betting on table games such as blackjack, roulette and poker
- Betting on horse or harness racing or greyhounds – excluding sweeps
- Betting on sports and event results – such as football or TV show results
- Keno
- Lotto, Powerball or the Pools
- Scratch tickets
- Bingo
- Competitions where you pay money to enter by telephone or leave an SMS
- Buying tickets in raffles, sweeps and other competitions
- Speculative stock investments such as day trading (without a long term strategy)
- Other gambling activities as mentioned by study participants