Assessing the techniques and needs for responsible gambling professional training and education

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ABSTRACT

Responsible gambling programs continue to grow in size and scope, as does the required depth of knowledge for professionals that are accountable for the design of responsible gambling (RG) policies and systems. Despite the growing complexity of responsible gambling, and the related connections to other public health programs, business operations, and regulatory processes, there are no dedicated education programs focused on providing knowledge workers in RG (RG professionals) with a foundation of knowledge to effectively execute programs in this increasingly complicated system. This report is a training needs assessment study, intended to provide direction for future responsible gambling professional education programs.

Through an environment scan of training programs, a literature review, and a survey of experts, we identify several broad areas of study that appear to be important to the work of responsible gambling professionals. We additionally find that our sample of experts have managed to acquire most of the skills that they need, through accessing a variety of informational sources on *gambling and problem gambling (PG) information, RG corporate policies, how to educate players, RG guiding principles, how to assist players in need, self-exclusion programs, organizational benefits of RG, advertising and marketing guidelines, and venue design and environmental features*. But we also find that a few areas of study remain an ongoing need, including *game design and structural characteristics, gambling evaluation measures, and organizational barriers to implementing RG policies*.

We conclude that future educational programs should have a broad scope of content for new knowledge workers in the field, while established workers would benefit from more targeted content related to emerging areas of research and ongoing challenges that leaders may face once established in their roles.

Keywords: responsible gambling, training, education, needs assessment

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1 INTRODUCTION

The field of responsible gambling (RG) is relatively new. For example, perhaps the oldest and certainly one of the most basic foundational responsible gambling tools, self-exclusion (also known as self-barring), was developed less than 30 years ago (Responsible Gambling Council, 2016a), and other tactics like the first North American Problem Gambling Awareness Week and the first on-property RG information center, did not occur until the early 2000s.

Today, RG programs continue to grow in size and scope, and the required depth of understanding for professionals in RG policies and systems compounds as new technologies emerge (e.g. Ladouceur, Blaszczynski, & Lalande, 2012), as researchers produce better understanding of risks from player vulnerabilities (Hodgins, Stea, & Grant, 2011), as gaming product designs evolve (Parke, Parke, & Blaszczynski, 2017), and as local environments change (Shaffer & Korn, 2002).

Despite the growing complexity of RG systems and their connections to other public health programs, business operations, and regulatory processes, there are no dedicated education programs or curricula focused on providing RG professionals with a foundation of knowledge to effectively execute RG programs in this increasingly complicated system. Today, RG training programs are primarily geared towards educating frontline service delivery employees in how to respond to customers (e.g. National Council on Problem Gambling, 2016). While those training programs are important components of an effective system, there remains an absence of understanding around the appropriate curriculum for regulators, operators, manufacturers, and other industry members that have responsibility and/or accountability over organizational RG strategies. As large domestic and foreign organizations continue to invest in internal RG programs (e.g. Simmons, 2017; Velotta, 2017; Davy, 2017), there is a growing need to provide established and emerging leaders in the field with the education required to be effective knowledge workers.

1.1 OVERVIEW OF STUDY

This report is a training needs assessment intended to provide direction for future responsible gambling professional education programs. In the next section, results from an environmental scan of RG training are provided, along with a wider research literature review, to establish a baseline of understanding of current practices and potential areas of future development.

The findings from the environmental scan and the literature review were used to develop a survey tool, which was then administered to a sample of practicing RG experts, to further understand industry needs. The survey methodology and summary results are provided in Section 3. Discussion of the results and next steps for the field are provided in Section 4.

2 LITERATURE

For the purpose of this study, we conducted an environmental scan of RG staff training available in the peer-reviewed and grey literature. Subsequently, we

conducted a literature search of studies and evaluations of RG staff training programs. The search was completed with the help of keywords searches for "responsible gambling", "staff training", "employee training", and "gambling professionals" on Google Scholar, ProQuest, JSTOR, and other online databases. Documents were screened for content via abstracts and executive summaries, and those relevant to the topic of this research were fully reviewed.

In this section of the report, we discuss existing RG employee training programs and assess evidence of their effectiveness. We then examine the common challenges associated with the delivery and implementation of RG training programs. Finally, we reflect on the process of creating a RG training program for regulators, operators, and manufacturers that will address their needs. This includes the RG topic areas that are unique and relevant to RG professionals.

2.1 OVERVIEW OF RG TRAINING PROGRAMS

RG training programs tend to focus on frontline employees who have direct service delivery tasks or other interactions with customers. Training materials for frontline gambling staff often provide information on general RG principles, including the notions of chance and randomness, and seek to enable employees to respond to players with gambling problems in the venues (e.g. Ladouceur et al., 2004; Giroux, Boutin, Ladouceur, Lachance, & Dufour, 2008). In some cases, staff training programs also equip employees with the basic knowledge of problem gambling resources, and encourage staff to facilitate help-seeking

behaviors in people with gambling problems (e.g. Dufour, Ladouceur, & Giroux, 2010; LaPlante, Gray, LaBrie, Kleschinsky, & Shaffer, 2012).

The research provides sufficient evidence on overall effectiveness of such programs, with an increase in RG knowledge, a positive change in attitudes towards RG initiatives, and enhanced overall job satisfaction as outcomes (Giroux et al. 2008; LaPlante et al., 2012; Lee, Song, Lee, Lee, & Bernhard, 2013). There are a number of challenges associated with the implementation of staff training programs including the need for staff to regularly refresh training, address role ambiguity of staff with RG training (e.g. conflicts in RG and other business goals), and tailoring the program to meet the needs of employees with different levels of RG expertise (Giroux et al., 2008; Hing & Nuske, 2012; Gray, Tom, LaPlante, & Shaffer, 2015). Additionally, the growing research and innovations in the area of RG make it essential to update the content of such programs to bring them in line with the most recent research findings (Wong & Poon, 2011). Although some training programs for venue employees provide a desired depth of knowledge and cover the most important areas of expertise associated with problem gambling, adapting such programs for use with RG professionals will require modifications to program content and delivery processes.

2.2 BY JURISDICTION

RG training requirements and programs vary in different jurisdictions. In this section, we present a brief overview of these programs in various countries and jurisdictions. We note that our review was done of publicly reported sources in the

English language, and therefore may exclude materials from countries where content is not produced in English, or where training is guarded as either a trade secret or otherwise not publicly distributed.

Australia has one of the most developed RG training policies with all courses following a nationally specified competency unit (Australian Government, 2013). This competency unit outlines basic RG training requirements for certified venue staff, which include knowledge of RG initiatives, problem gambling awareness, identification of the signs of problem gambling, and interventions and resources to help people with gambling problems. The gambling authorities in most Australian states have developed RG training courses for venue staff that follow these national requirements (e.g. ACT Gambling and Racing Commission, 2015; New South Wales Liquor and Gaming, 2012; Victorian Responsible Gambling Foundation, 2016). In New Zealand, Clubs New Zealand provides the *Being a Responsible Gambling Host Training Course* for gambling venue employees. This online self-paced course provides information on problem gambling, RG strategies, and harm minimization in the gambling venues (Clubs New Zealand Inc., 2018).

RG training programs for frontline staff are established in most Canadian provinces. Such programs usually provide frontline employees with information on RG strategies, problem gambling, and teach employees to identify and assist people with gambling problems in the venue. While some provinces have many specialized programs for different categories of gambling employees, others implement more generalized training courses. Overall,

the vast majority of RG programs in Canada target frontline venue employees or venue management who deal with customers on a regular basis.

In Alberta, video lottery terminal (VLT) staff are required to complete *Reel Facts* training within 30 days of hire, which provides information on what responsible gambling is and how they can encourage it, the signs of problem gambling, how to avoid reinforcing gambling myths, and support services. Albertan bingo workers are required to undergo *A Good Call* course that raises awareness about RG and problem gambling and helps them to develop knowledge and skills to assist the customers. Furthermore, there is a two-phase *Deal Us In* course designed to educate casino employees about RG and provide information on where the player may seek help. Importantly, phase two of *Deal Us In* is concerned with the education of management and security employees to whom it provides communication and intervention skills (Alberta Gaming & Liquor Commission, 2018).

Ontario has RG training programs for gaming, lottery, and bingo retailers. Frontline employees of the gaming venues are required to participate in mandatory training that consists of a one-hour training session and focuses on recognizing problem gambling signs, responding to these signs, and reporting the incident in a customer service database. Additionally, advanced training for senior management and supervisors is offered by the Ontario Lottery and Gaming Corporation (OLG). This advanced course includes a three-hour in-depth classroom training and provides management employees with thorough gambling education and

customized techniques for dealing with customers in distress. OLG also provides a training course for corporate employees that promotes awareness of RG practices, highlights potential warning signs of problem gambling, and dispels myths that are commonly associated with gambling (OLG, 2010). Although this course encourages adoption of RG practices, it does not provide employees with an in-depth understanding of how to incorporate RG practices into the development of RG policies, regulatory frameworks, and codes of conduct. Gambling, Gaming and Technology Use (formerly known as Problem Gambling Institute of Ontario) has also developed a training course for problem gambling prevention and referral specialists (PGIO, 2017). This course focuses on the methods of problem gambling prevention, counselling, and communication with people with gambling problems. It emphasizes RG strategies targeted at problem gambling prevention and intervention, but is more relevant to the needs of counselors and professionals who assist people with gambling problems than to regulators, operators, and policymakers.

Lottery retailers in Atlantic Canada are required to complete the *Retailer Responsible Gambling Training Program*, which educates staff about responsible gambling, how to encourage informed decisions, and how and when to provide support to players (Atlantic Lottery Corporation, 2017). Loto-Québec requires retailers to complete the *Taking Risks is No Game* training and also offers a recognition program for retailers who are particularly committed to responsible gambling (Société des Établissements de Jeux du Québec Inc., 2016). The Liquor and

Gaming Authority of Manitoba recently launched a *Smart Choices* course for employees working in the hospitality industry (2018). Although the course is predominantly focused on regulations surrounding the responsible use of alcohol, it also includes components to increase RG and problem gambling awareness. In Saskatchewan, retailers complete the *Responsible Gaming for VLT Site Operators Saskatchewan* training that teaches staff to distinguish responsible from problem gambling, discusses gambling myths, and shows how to provide information to those seeking help (Saskatchewan Tourism Education Council, 2016). British Columbia Lottery Corporation provides venue staff with *GameSense Appropriate Response Training* which is targeted at learning about RG, signs and impacts of problem gambling, gaining knowledge of resources available to people with gambling problems and their families, and gaining practical experience in communicating with people with gambling problems (BCLC, 2018). Corporate employees also receive general information on gambling in British Columbia and responsible gambling, through a program entitled, *Where's your GameSense*.

In the US, the development of RG training programs for corporate professionals is supported by the American Gaming Association's Code of Conduct (2017). The Code highlights the importance of educating new and existing employees on RG strategies and regularly providing them with information updates on RG, related company policies, and help resources for problem gambling. The National Centre on Responsible Gambling in the US, a non-

profit predominantly supported through industry donations with an independent scientific advisory board, developed an *Executive, Management, & Employee Responsible Gaming Education* (EMERGE) program which includes a web-based course aiming to raise problem gambling awareness among gaming employees of all levels (2016). The EMERGE program covers such topics as gambling addiction, factors underlying gambling disorder development, gambling and public health, and responsible gaming programs. It is noteworthy that although the program contains a section on RG, the information provided in this section is very general and not too extensive. The EMERGE program was developed to train gaming employees at all levels and therefore, the contents of the program are not tailored to the specific needs of RG professionals. More focus on specific RG strategies and their incorporation in companies' codes and regulations might be required in order to address the specific needs of RG professionals.

Some US states such as New York have staff training programs that teach venue employees to recognize the signs of problem gambling (American Gaming Association, 2008). Oregon began the online *Responsible Gambling & You* retailer training program in June 2016, which teaches lottery staff how to provide information on the odds of winning and how the games work, recognize problem gambling, and provide information on support resources (Shaw & Robinson, 2017. Ohio is also in the process of establishing VLT retailer training (Ohio Lottery Commission, 2016).

The development of RG training is also supported by specific US commercial gaming industry operators. Las Vegas Sands, headquartered in Nevada, has established the *Play Responsibly* program for its employees that educates team members about RG support services and ways to assist guests with potential gambling problems (LVSC, 2015). Caesars also has RG training for their employees called *Operation Bet Smart,* which promotes employee awareness about RG strategies, helps them understand the company's position on the issue, and supplies them with information necessary to help others (Caesars, 2018). MGM implements the *GameSense* program for its employees, including four different levels of training, depending on role (Feldman, 2017).

In Europe, the British Association of Bookmakers (ABB) requires retailers to complete training and regular refreshers on the signs of problem gambling and how to communicate with those who may need support (Griffiths, 2014). The ABB also requires each locale to have a dedicated responsible gambling coordinator, who is nominated by staff and receives additional training for engaging in complex interactions with players. In Switzerland, employees are required to complete training and refreshers on problem gambling and its consequences, and how to approach and provide information to players seeking help (Nunweiler, Tomei, & Zumwald, 2014).

In Singapore, local operators provide RG training programs to raise awareness about RG strategies and to equip employees to assist people with gambling problems (National Council on Problem Gambling,

2009; Winslow, Cheok, & Subramaniam, 2015). Sands China in Macau provides RG Team Training for its employees. Additionally, the Gaming Inspection and Coordination Bureau in Macau conducts RG training for gambling employees as a part of its RG campaigns (Responsible Gambling Organizing Committee, 2013).

2.3 EVALUATIONS AND RESEARCH OF RG TRAINING PROGRAMS

This section reviews evidence from studies evaluating the impact of employee training programs on a range of RG-related outcomes. The research evidence on RG employee training programs has expanded over the past decade, but evidence of effectiveness generally remains limited. For example, no studies have investigated the effects of RG training programs on problem gambling rates in venues and additional evidence for the impact of RG training program on people with gambling problems is needed (Robinson, Quilty, & Lobo, 2016). Despite these limitations, most studies investigating the outcomes of employee training programs show an improvement in RG knowledge among employees, more positive attitudes towards RG initiatives and people with gambling problems, and overall increases in job satisfaction and organizational trust (Dufour et al., 2010; Lee et al., 2013; Giroux et al. 2008; LaPlante et al., 2012; Quilty, Robinson, & Blaszczynski, 2015).

Most evaluations of employee training programs find training interventions useful. For example, an evaluation of the VLT retailer staff training program in Manitoba that included over 1,500 employees found that 98% of participants found this training helpful (Smitheringale, 2001). Employees reported developing knowledge of how

gambling works, how problem gambling develops, the signs of problem gambling, and available problem gambling resources. Some knowledge improvements were seen in the ability to recognize the signs of problem gambling, knowing when to provide help, and seeing the value in providing help. An evaluation of *As luck would have it* - an awareness program for VLT retailers in Quebec - included 707 participants who attended a two-hour awareness workshop that covered such topics as chance and randomness, fallacies and misconceptions about gambling, recognizing symptoms of problem gambling, and what retailers can do if they decide to intervene (Ladouceur et al., 2004). Immediately following the workshop, participants had increased knowledge about attributes of problem gambling, ways of approaching people with gambling problems, and felt more capable of doing so. Six months later, compared to a control group of new retailers, workshop attendees reported approaching excessive gamblers significantly more often and were more likely to discuss the resources available to people with gambling problems seeking help.

The *People Making Difference* workshop was developed in Quebec to teach casino employees about problem gambling and ways to assist gamblers in crisis (Giroux et al., 2008). More than 2,400 employees across three casinos were enrolled in a three-hour training workshop that explained how gambling problems develop, how to identify and assist people with gambling problems, and the importance of employees' role in assisting distressed gamblers. The majority of participants reported that they were satisfied with the

training session and that it was relevant and useful to their job. At the end of the session, participants had a better understanding of problem gambling, its signs, and interventions. They were also more confident in their ability to distinguish a gambler in crisis, and more convinced about the value of helping people with gambling problems and the importance of their role in identifying the gamblers in crisis. Participants also demonstrated improved knowledge of self-exclusion programs and were more convinced that such programs are helpful to people with gambling problems. However, not all of this knowledge was retained at six-month follow-up. Participants were less certain in their ability to identify people with gambling problems and gamblers in crisis, less sure of when to intervene, and failed to remember some procedures necessary to help gamblers in crisis.

A similar training program for VLT employees in Quebec *(Taking risks is no game - 2)* was designed to inform employees about problem gambling, community resources, and treatment available to people with gambling problems (Dufour et al., 2010). The workshop was mandatory for all VLT employees in Quebec, and more than 800 employees took part in it. At the end of the workshop, the majority of participants reported that they were satisfied with the training, had a better understanding of problem gambling, felt better equipped to detect people with gambling problems, and were more capable and eager to help people with gambling problems. Most of the changes in employees' knowledge and attitudes were retained at an eight-month follow-up, although some knowledge gains were lost.

The study also investigated the impact of the workshop on employees' behaviors by using a help-seeking pseudo-patron. This behavioral assessment revealed that employees in experimental venues gave the information pamphlet to pseudo-patron significantly more often during the post-test than during the pre-test but much less so during the follow-up. These outcomes further support the idea that regular training sessions should be offered to maintain knowledge gains.

The evaluation of a training program in two Asian casinos demonstrated similar results (Wong & Poon, 2011). In this study, training was delivered to 83 casino employees. The training materials and session had a similar structure to that described by Giroux et al. (2008) and Dufour et al. (2010). Most participants were satisfied with the training and reported that the workshop helped them to develop empathy for people with gambling problems and feel more confident in their ability to assist these players. Additionally, there were significant improvements in participants' knowledge of chance and randomness and signs of problem gambling. These knowledge gains were maintained at 12-month follow-up. Interestingly, the majority of participants expressed a need for a refresher course during the follow-up assessments. Most senior executives of the establishments participating in the study also sought advice on how to further improve the existing RG strategies.

LaPlante et al. (2012) examined the processes and procedures designed to prepare casino employees for complex situations involving people with gambling problems. Employees taking part in a multimedia-based RG training program

(Play Responsibly) were surveyed before and one month after completing the program. The results indicate that participants provided more educated responses on questions about luck, kinds of gambling, and emotional harms of problem gambling after completing the program. The training program raised participants' awareness of situations when gambling becomes a problem and considerably improved their understanding of self-exclusion programs, gambling regulations, and problem gambling. Authors noted that despite the improvements, the program was more successful in teaching participants new information than correcting erroneous beliefs. Therefore, it is important that developers of RG programs understand existing misconceptions related to gambling and devote more resources to addressing these faulty beliefs.

In Switzerland, Nunweiler and colleagues (2014) evaluated an awareness training program for VLT retailers which included a two-and-a-half-hour annual workshop consisting of educational videos, discussions, and roleplay. The results of their evaluation demonstrated that the majority of participants perceived the program as helpful, and were more confident in their ability to identify and approach people with gambling problems at the end of the program. However, many participants noted that they did not feel that they should intervene with people with gambling problems, mostly due to privacy and conflict of interest concerns.

The impact of RG programs is not limited to an overall increase in gambling-related knowledge. A notable change in organizational attitudes following the implementation of RG programs was also observed in several studies. Lee et al. (2013) found that RG initiatives voluntarily implemented by a casino, such as self-exclusion, were positively related to employees' organizational trust. In contrast, RG programs mandated by the government (e.g. mandatory closing hours, regulations regarding who can play in the casino, etc.) were negatively related to organizational trust. An online survey administered to 130 casino employees in Ontario (Quilty, Robinson, & Blaszczynski, 2015) reported that the predominant majority (93.8%) of participants received at least some form of RG instruction. Most participants reported that RG training improved their ability to identify problem gambling signs and respond to them. Most employees had a positive attitude toward RG training and endorsed more such training being related to the identification of and response to problem gambling. Another important finding in this study was that exposure to signs of problem gambling and difficulties in responding to these signs were both associated with decreased job satisfaction. One of the possible explanations for this finding is that employees who are exposed to signs of problem gambling and are limited in their ability to respond to them might experience increased emotional labour along with helplessness, which leads to stress that ultimately results in decreased job satisfaction. Therefore, RG training programs helping employees to identify and respond to people with gambling problems may not only be useful for increasing employees' knowledge of RG but may also lead to enhanced job satisfaction among gaming venue staff.

There are several important limitations to the studies discussed above. First and foremost, all research studies presented were focused on RG training programs for frontline staff. Regulators, manufacturers, and corporate employees at operators have significantly less (if any) interaction with people with gambling problems. Moreover, their tasks may be unique, including the development of RG regulations in specific venues, implementing RG programs, and evaluating the effectiveness of such programs. The needs of knowledge workers in RG (RG professionals) are quite different from those of frontline staff. Rather than emphasizing the identification of and intervention with people with gambling problems, RG training programs for professionals should be focused on learning about specific RG strategies, evaluating the evidence of effectiveness of strategies, and incorporating RG into the policies and regulations of specific organizations. Discussion of how to balance RG with existing privacy and confidentiality regulations and how to avoid a conflict of interest when implementing RG programs should also be provided as a part of professional RG training. Explaining the value of mandated RG programs and addressing misconceptions about RG would allow the RG professionals to appreciate the need for RG programs. Last, as most RG professionals hold managerial positions, it would be helpful to discuss the positive impact of RG programs on employee attitudes such as job satisfaction and organizational trust.

In addition to thematic constraints, it is also worth keeping in mind that all studies relied on employees' self-reports of their knowledge of RG and problem gambling. Only one study (Dufour et al., 2010) actually used a behavioral measure (pseudo-patron) to evaluate helping behaviors in VLT retailers. One potential problem with self-reports in this line of research is social desirability bias, as employees who underwent RG training might be more likely to report that the training improved their knowledge and understanding of RG because they deem such responses more desirable. Additionally, as most follow-up surveys were voluntary, self-selection bias might have taken place, and employees who remembered training materials better or were generally more interested in RG decided to participate in the surveys. The cross-sectional nature of some studies also precludes us from drawing generalized conclusions regarding the programs' effectiveness. Finally, all of the studies used employees' perceptions of program effectiveness as the key program outcome. Outcomes such as players' experiences with excessive gambling in the venue, attempts to seek help from staff members, satisfaction with the help they received, and access to resources can also be measured in future research of RG training.

2.4 TRAINING CONTENT FOR RG PROFESSIONALS

As discussed above, the content of RG training programs for frontline staff usually includes learning modules on chance and randomness, game types, common misconceptions about gambling, problem gambling awareness, and identification of problem gambling signs along with interventions and community resources for people with gambling problems. This choice of curricula is predominantly

motivated by the tasks fulfilled by frontline staff and interactions between frontline staff and players. Most RG regulators, operators, and policymakers work in substantially different environments and are typically responsible for program and policy design, implementation, and analysis. Training programs for these stakeholders should cover a broader scope of RG-related information that is more pertinent to management responsibilities. To inform a training needs assessment survey, this section of the review examines the potential subject list for RG professional training programs, providing a rationale for including specific topics into the program curriculum. At the end of each section, we provide a summary of recommended educational material to be covered on each topic.

2.4.1 RESPONSIBLE GAMBLING CORPORATE POLICIES

Gambling-related policies vary in scope, intensity, and sophistication depending on the jurisdiction in which they are implemented. Cultural, social, and political processes in particular regions often dictate the nature of gambling and the regulatory framework. The content of RG professional training programs should provide an overview of gambling-related policies and regulations in the RG professionals' jurisdictions, as understanding these subtleties is important to interpreting more general training. These regulations vary by jurisdiction, but the most common include exclusion of minors, requirements for gaming operators to obtain a license, and prohibition of advertisement of unlicensed gaming venues. There are also fundamental

principles that guide the majority of RG initiatives and regulations.

One of the most well-known frameworks underlying policy development in the area of RG is the Reno Model (Blaszczynski, Ladouceur, & Shaffer, 2004). The Reno model is a science-based model that provides a strategic framework for RG initiatives and outlines key groups and concepts related to RG, stakeholders, and guiding principles of RG developments. The concept of informed choice represents one of the key tenets of the Reno Model. It holds that the responsibility to provide sufficient information on gambling-related processes and consequences lies with the industry and government regulators, while the decision whether or not to gamble resides with consumers themselves. The key stakeholders outlined in the Reno Model include consumers, industry, healthcare providers, and governments. The key principles of the Reno Model include the commitment to the reduction of problem gambling incidence, collaboration between stakeholders targeted at informing and evaluating public policy, identifying short- and long-term priorities, and using scientific research to guide the development of policies aiming to reduce the incidence of problem gambling.

The Reno Model puts a special emphasis on scientific research and rigorous investigation of the effectiveness of RG programs and using scientific evidence in policymaking. The principles of the Reno Model can be instrumental in making decisions regarding potential RG policies (National Center for Responsible Gambling, 2017). We note that the Reno model is not without criticism (e.g. Hancock & Smith, 2017), as it reflects many

underlying values that may not translate across cultures or institutions. For example, through its emphasis of informed decision making, the model necessarily prioritizes personal sovereignty over collective harms. While this is perhaps well-suited to most western cultures, it may not translate to all jurisdictions. However, given the widespread adoption of the Reno model by many major industry stakeholders, it is RG professionals' training should include learning and applying the principles of the Reno Model to the development and implementation of RG practices, along with related critiques. Based on the discussion in this section, we recommend including the following topics in a RG Professional Training module on RG corporate policies:

- Most widespread RG policies

- Best practices in RG policies

- Science-based models for gambling policy

- Roles of industry actors (regulators, operators, researchers, etc.)

- Emerging RG policies

- RG policies in the participants' local jurisdiction

2.4.2 How to Assist Players in Need

Helping players with gambling problems is a part of most RG programs. It is commonly achieved through identifying people with gambling problems (this may be self-identification) and referring them to help resources. Resources may include a gambling helpline, support groups, counseling, or self-help resources. Identifying players with gambling problems is part of the process of assisting players in need. It may be accomplished through

training venue staff to detect problem gambling signs and intervening with these players. Alternatively, the use of technology and self-identification can detect players with gambling problems and refer them to available resources. RG professionals should be knowledgeable of the various ways of providing assistance to players in need. Particularly, RG program developers should be aware of different methods of identifying people with gambling problems, their relative strengths and limitations, as well as circumstances in which each method would be most effective. RG professionals should be able to determine whether it is feasible to pursue the identification of people with gambling problems in their circumstances, and if so, how vigorously the identification should be pursued.

Staff observations of player behaviors are the most commonly used method for identifying people with gambling problems in land-based venues, but with the rise of online gambling and ongoing technological developments, other ways to detect problem gambling have been introduced. Behavioral tracking of betting patterns can be used to reliably identify people with gambling problems online (Ladouceur, Shaffer, Blaszczynski, & Shaffer, 2017). For example, a machine learning algorithm based on neural networks (TREPAN) was used to predict potentially harmful gambling (Percy et al., 2016). The knowledge extraction algorithm trained on real-life gambling data produced compact and comprehensible logic rules that helped identify players who have a high chance of using self-exclusion programs. In particular, the variability of bets and gambling intensity were the most important

risk factors distinguishing potential self-excluders identified by TREPAN. The development of new quantitative metrics to identify players who are likely to have gambling problems, as well as continuous improvement of existing statistical algorithms and data analytic-based designs, are key to the advancement of data mining in the field of RG. Thus, RG professionals should be informed of these new developments and provided with information on the decision-making criteria they should use if they want to apply machine learning to their practices.

Several studies e.g. (Braverman, LaPlante, Nelson, & Shaffer, 2013; Gray, LaPlante, & Shaffer, 2012; Philander, 2014) monitored players' activity on online gambling sites and identified behavioral patterns that differentiate the players who trigger RG gaming alert systems from those who do not. The findings showed that intensity of gambling activities (number of bets, active betting days, gambling session duration) and financial variables (total bet size and net losses) could be used to accurately identify people with potential gambling problems (Gray et al., 2012). Braverman et al. (2013) used online gambling data to determine behavioral patterns that identified players who were previously enrolled in an RG program. They found that those who engaged in more than two types of gambling during their first month of site membership and placed highly variable bets on casino games or live action sports were more likely to benefit from future RG programs. Furthermore, some evidence suggests that loyalty card systems and software packages developed for EGMs can aid staff in monitoring gambling behaviors and identifying people with

gambling problems in land-based venues (Delfabbro, King, & Griffiths, 2012). The use of technology and behavioral strategies to identify people with gambling problems, or at future risk of developing problems with gambling, is a promising area of RG and hence, RG professionals should be informed of these developments and possible ways to incorporate them into practice.

As outlined above, we recommend covering the following topics when discussing how to assist players in need:

- Assistance as part of the customer service model model

- Using communication techniques to reduce player resistance

- Identifying players using in-person behavioral markers

- Digital behavioral tracking and identification

- In-venue resources (i.e. printed materials, on-site resource centers, self-exclusion)

- Processes for referring to external resources

2.4.3 How to Educate Players (Informed Decision Making)

Informed decision-making is a key tenet of RG initiatives, as framed in the Reno Model (Blaszczynski et al., 2004). Research on positive play suggests that beliefs about gambling are a fundamental component of responsible gambling by players (Wood & Griffiths, 2015; Wood, Wohl, Tabri, & Philander, 2017). The *what* and *how* of providing players with educational information on gambling, notions of chance and randomness, problem gambling signs,

and possible harms associated with problem gambling should be at the forefront of RG program development. There are a number of ways in which this educational information can be provided to the players. Social media campaigns, RG advertisements, in-game warning messages, and RG information kiosks can all be used to deliver gambling-related information to players and help them make informed decisions regarding their gambling.

Players often differ from each other in the intensity of their gambling involvement and their knowledge and attitudes about gambling. Hence, the educational information provided to players should be tailored to their unique characteristics, such as previous gambling experience (or lack of thereof) and gambling frequency (Gainsbury, Abarbanel, Philander, Butler, 2017). The Responsible Gambling Council (RGC) has developed an informed decision-making framework that emphasizes targeting the content and delivery of information to specific types of players. Casual, frequent, and intensive players should receive different educational materials on gambling safeguards, risks, and help availability that are most relevant to their specific needs and delivered using channels that are most suited to their level of play (RGC, 2010).

Information on how to incorporate the notions of informed decision making and harm minimization in gambling regulations should be considered by regulators. The issue of facilitating awareness about problem gambling was discussed by Blaszczynski, Parke, Parke, and Rigbye (2014) in their report on operator-based approaches to harm minimization in

gambling. The authors note that although information on risks and probability of gambling might raise awareness, the evidence as to whether this raised awareness translates into behavioral change is still vague. The research also suggests that to initiate behavior change, information provided to the player should be personally-relevant (e.g. behavioral feedback) and should outline alternative actions the player should consider instead of gambling. It is also useful to frame the information in a way that encourages people to engage in self-awareness leading actions. Such presented information is more likely to cause change, as people are more likely to attend to personally relevant information and less likely to dismiss such information.

Several studies show that presenting information in a way that interrupts gambling activities may be useful for drawing players' attention and disrupting the dissociative state that is frequently experienced during gambling sessions (Bailey, Konstan, & Carlis, 2001; McCrickard, Catrambone, Chewar, & Stasko, 2003). RG strategies must also consider avoiding interference with recreational gambling by interrupting play too frequently or for too long. Presently, the evidence on best mode of delivery for gambling-related information is limited. Studies suggest that the traditional ways of raising awareness about problem gambling are only mildly effective, when not paired with additional RG strategies (Wohl, Gainsbury, Stewart, & Sztainert, 2013; Hing, 2004; Monaghan & Blaszczynski, 2010). Effective training programs should consider the appropriate ways to frame and deliver gambling-related information along

with the importance of informed decision making.

Incorporating cultural competency in RG practices and awareness messages is another essential part of ensuring that all players can make informed decisions about gambling. A training program for RG professionals should enable development of culturally diverse gambling initiatives that are not limited to translating RG materials into different languages and distributing those materials to communities and cultural organizations. Acquiring cultural competency would allow professionals to recognize that attitudes towards gambling can vary in different cultures and successfully develop materials that engage with the realities of different cultures (Fogarty, 2017).

In summary, when considering how to educate players about RG and problem gambling, the following topics should be discussed:

- Value of informed decision making

- How to provide information (i.e. social marketing, in-game messaging, information kiosks)

- What information to provide (i.e. randomness, signs of problem gambling, behavioral feedback)

- Tailoring information (i.e. gambling frequency, cultural background)

- Balancing information on risky and positive play

2.4.4 SELF-EXCLUSION PROGRAMS

Self-exclusion programs provide people with gamblers with an option to ban themselves from gambling venues for a predetermined or indefinite duration of time. Self-exclusion is one of the most researched RG practices, with multiple studies in different jurisdictions indicating that the introduction of self-exclusion programs led to reductions in problem gambling accompanied by improvements in well-being, control over gambling, and social and familial functioning (McCormick, Cohen, & Davies, 2018; Hayer & Meyer, 2011; Nelson, Kleschinsky, LaBrie, Kaplan, & Shaffer, 2010; Ladouceur, Sylvain, & Gosselin, 2007; Tremblay, Boutin, & Ladouceur, 2008). Self-exclusion programs are shown to be a useful tool in designing and promoting RG-oriented policies. RG professionals should thus be provided with information that is relevant to the incorporation of self-exclusion programs into a RG policy framework.

Some self-exclusion programs draw on an abstinence-based approach to problem gambling prevention and include completely banning the player from the gambling venue. However, recently, more flexible approaches to self-exclusion exist, with some venues offering self-exclusion that is only limited to a particular time frame or a particular form of gambling. Some operators allow third parties to enact exclusion agreements, and some provide excluders with access to problem gambling counseling services (Blaszczynski et al., 2014). The evidence on the effectiveness of each form of self-exclusion program delivery is quite limited. Nevertheless, it is important to provide RG professionals with an overview of the available modalities of self-exclusion and encourage them to seek empirical evidence for the effectiveness of each particular delivery form before incorporating it into RG programs and regulations.

Multi-operator self-exclusion schemes (MOSES) require special attention in the discussion of the self-exclusion initiatives. The most common criticism of single-venue self-exclusion is that patrons can continue gambling at other venues after self-excluding themselves from a particular website or casino (Parke & Rigbye, 2014). MOSES require sharing of data and resources among the venues in such a way that the players who choose to exclude from one venue instantly lose access to any other venue within a certain jurisdiction. MOSES require information sharing between different venues and providers that asks for novel regulations in terms of privacy, confidentiality, and information management. Therefore, it is important to include the discussion of MOSES as a part of RG jurisdiction-wide training program for regulators, operators, and policymakers.

Finally, the providers offering self-exclusion programs face multiple obstacles that RG professionals should be aware of. For example, self-exclusion programs are frequently criticized for inconvenient and inaccessible enactment procedures. Many providers require players to visit the venue to enroll in a program. This requirement leads to unnecessary exposure of people with gambling problems to gambling products, thereby increasing chances of gambling-related harms. Another issue with the self-exclusion programs is the enforcement of programs and preventing breaches which impede the effectiveness of self-exclusion programs. RG professionals' training should discuss the ways to provide players with more accessible ways to enroll in self-exclusion

along with more effective enforcement of self-exclusion agreements.

As such the discussion of self-exclusion programs should include:

- Local regulatory requirements
- Enactment procedures
- Duration
- Third-party exclusion
- Single venue vs. multi-operator programs
- Enforcement
- Impact/effectiveness of self-exclusion
- Responding to breaches of exclusion
- Withholding of winnings from banned players
- Reinstatement procedure

2.4.5 Advertising and Marketing Guidelines

As RG professionals regularly face a need to develop gambling-related advertising and marketing materials, it is essential to familiarize them with the RG standards for such items. The potential concerns with gambling advertisements mostly involve advertisements specifically targeted at vulnerable populations (e.g. youth), normalization and positive framing of gambling, underestimation of gambling-related harms, and use of disproportionate incentives in marketing campaigns. The use of empirical evidence to guide the development of advertising and marketing guidelines should be highlighted when educating RG professionals.

To ensure that gambling advertising and marketing campaigns are in line with the most progressive RG standards, gambling regulators and operators need to develop evaluation tools and guidelines to assess these campaigns. A RG professional training program should highlight the key principles in evaluating gambling advertisements. One example of an evaluation framework for gambling marketing and advertisement campaigns can be demonstrated through the *RG Check* program developed by the RGC. The *RG Check* evaluation criteria for gambling advertising and promotion include development of advertising policies, screening processes, advertising safeguards, and best practices in developing loyalty programs for gambling establishments. All these criteria are essential to determine the degree to which certain gambling advertisements align with RG standards. For example, the existence of corporate advertising and marketing policies promotes social responsibility and ensures that advertising does not deceive or specifically target vulnerable populations. The developed RG screening process assures that all advertisement and marketing activities satisfy corporate policies and RG standards. In such a way, RG regulators and operators should be informed of how they can develop advertising policies and screening processes in their organizations.

As for specific safeguards, the prohibition of misleading advertisements that overestimate the odds of winning or underestimate the gambling-associated harms is an essential RG standard that promotes informed decision-making. Advertising plays a prominent role in establishing gambling as a social norm, and gambling advertisements often enhance the positive aspects of gambling (e.g. entertainment, fun, chance to win, socializing) and downplay the risks associated with it (Parke, Harris, Parke, & Rigbye, 2014; McMullan & Miller, 2008; Monaghan, Derevensky, & Sklar, 2008). Such portrayals often lead to a distorted depiction of gambling activities. Thus, providing consumers with adequate information on different forms of gambling, how they work, probability and randomness, risks associated with gambling, as well as help resources available to people with gambling problems should be a priority for those who design gambling advertisement guidelines.

Another important RG standard is concerned with targeting. gambling advertisements to people with gambling problems and underage gamblers. Research shows that these populations are particularly susceptible to the impacts of advertisement and marketing campaigns (Griffiths, 2016; Hanss, Mentzoni, Griffiths, & Pallesen, 2015; Planzer & Wardle, 2011; Binde, 2009). Thus, it is important to ensure that gambling advertisements do not exploit these vulnerable populations by using youth-targeting images or overestimating the winning odds.

The impact of promotional marketing incentives, social media marketing, and loyalty programs should be considered when evaluating advertising strategies. Narayanan and Manchanda (2012) found that people with gambling problems were much more vulnerable to the effects of marketing incentives in gambling venues. Such incentives prompted them to play longer and gamble more than people

without gambling problems offered the same incentives. Current codes of practices limit the offer of marketing incentives that might promote excessive gambling (Blaszczynski et al., 2014). Encouraging socially irresponsible gambling is also discouraged by most regulations and codes of practice. Yet, there is currently a lack of transparency regarding monitoring and enforcing these regulations. With the development of online gambling and the advance of social media marketing tools, there are even more implications for policy development in gambling advertisements. Hence, the discussion of RG practices in gambling marketing and advertising should be part of an RG professionals' training course.

Finally, the discussion of facilitating RG through marketing and advertising should be incorporated in RG professional training. Social marketing campaigns are a common way to raise awareness about RG practices. The purpose of such campaigns may include educating communities about gambling and the specific harms and risk associated with it, providing information about resources available to people with gambling problems or concerned others, and decreasing stigma associated with the problem gambling. Evaluations of campaigns usually demonstrate that they are successful at raising awareness and educating the public about problem gambling and risks, and encouraging actions that reduce the risks of problem gambling (e.g. RGC, 2017b; RGC, 2016; RGC, 2009). It is worth noting that vulnerable populations, such as high-risk gamblers and young players, should be specifically targeted by RG campaigns in

order to decrease negative impacts of gambling on these populations.

Based on our review of research on advertising and marketing guidelines, an RG professional training program should cover the following topics on advertising:

- Local regulatory requirements
- Impact on high-risk populations (e.g. youth, problem gamblers)
- Content restrictions
- Evaluating gaming marketing/ads
- Effectively promoting RG through social marketing/ads

2.4.6 GAME DESIGN AND MACHINE STRUCTURAL CHARACTERISTICS

The overall structure and individual features of the games can affect gambling outcomes, and some features may increase the harms associated with gambling. Sounds, lights, the fast pace of the game, and losses disguised as wins may contribute to the state of dissociation from the outside environment and thereby result in excessive gambling (Wood, Griffiths, Chappell, & Davieste, 2004; Templeton, Dixon, Harrigan, & Fugelsang, 2014). Pre-commitment tools represent a way of reducing gambling-associated harms through limiting the amount of time and money the player spends on gambling activities. Review of pertinent RG regulations and RG features for game design along with the implementation of pre-commitment programs in land-based and online gambling venues should be a part of RG professional training.

Games vary in their design and structure: speed, odds of winning, stakes, rule complexity, and the amount of social

interaction required are different among different games. Certain game features can lead to more harmful outcomes than others (McCormack & Griffiths, 2013). For example, some evidence suggests that games that are fast-paced and provide immediate outcomes can cause players to engage in more games and underestimate the frequency of their gambling (Ladouceur & Sevegny, 2006). Games that require a degree of social isolation (i.e. EGMs and VLTs) often draw on the state of dissociation from the outside environment that can lead to the loss of control. Additionally, lights and sounds associated with many VLT games often facilitate this dissociative state in which individuals can easily lose track of time and money spent gambling (RGC, 2017a). Losses disguised as wins is another game feature that promotes excessive gambling. Losses disguised as wins is a common feature of many VLT games that involve multiple bets. It can be observed when only one bet wins and the overall gain is less than the total of money wagered, yet the machine produces "winning" sounds and provides positive feedback. Losses disguised as wins are especially problematic because they provide players with false feedback encouraging more gambling and precluding players from making informed decisions.

While some features of casino games can encourage excessive gambling, it is possible to modify the game design in such a way to promote more responsible gambling practices. The use of RG messages during the game has already been discussed, but it is noteworthy that to produce the most impact, such RG messages should provide personalized

feedback on one's gambling and interfere with the dissociative state created by the game. Cash and time displays providing feedback on money and time spent gambling are also frequently discussed as built-in RG strategies, and there is some evidence for the effectiveness of these features (Ladouceur & Sevigny, 2006; Blaszczynski et al., 2014).

Finally, pre-commitment is an RG instrument that is used to predetermine the amount of time or money the player intends to spend gambling. Pre-commitment can be mandatory or voluntary, depending on the operator or jurisdictional rules. However, the limited research evidence supports voluntary pre-commitment and shows that setting the financial limits for one's gambling leads to more reduction in problem gambling than setting time limits (Auer & Griffiths, 2013). As such, the discussion of different types of pre-commitment tools, use of these tools in online and offline venues, as well as evidence for their effectiveness should be incorporated in RG professional training.

Based on our review, the essential topics in the discussion of game design and characteristics include:

- Sounds, lights, speed of play
- Losses disguised as wins (false wins) and near misses
- Money and time spent display
- Pre-commitment tools
- In-game messaging

2.4.7 Venue Design and Other Environmental Features

The environment in which gambling activities take place has a prominent

impact on the gambling outcomes. Some gambling environments are more conducive to RG initiatives than others. In particular, the accessibility of the venue, its opening hours, forms of gambling offered, access to cash, access to alcohol and other drugs, and availability of help resources (e.g. onsite experts, RG leaflets, helpline number, etc.) all play a role in establishing RG practices in the venue. Therefore, it is important to provide gambling professionals with information on the environmental features that can promote or impede RG activities.

The location of gaming venues, their opening hours, and the ease with which one can access the venues might contribute to the level of problem gambling among patrons. For example, Pearce, Mason, Hiscock, and Day (2008) found that individuals who had the greatest access to gaming venues were at greater risk of developing gambling problems than those with less access to the venues. At the same time, limiting venue accessibility might decrease interest among recreational gamblers, who often comprise the greatest part of venues' clientele.

In the discussion of location and accessibility of gambling opportunities, particular attention should be paid to the effects of *exposure* and *adaptation*. Shaffer, LaBrie, and LaPlante (2004) viewed gambling as a public health toxin and applied the exposure and adaption theories to analyze the events that take place within communities following the introduction of gambling opportunities. Similar to chemical and biological toxins, the introduction of new gambling opportunities in the community is conceived to trigger the rates of problem

gambling to rise at first, as most vulnerable players develop gambling problems, followed by less vulnerable players. These vulnerable players include those with greatest exposure to gambling opportunities (e.g. venue staff, people living in proximity of gambling venues), people afflicted by other psychological disorders, youth, and individuals with low socio-economic status (Jacques & Ladouceur, 2006; Petry, Stinson, & Grant, 2005; Shaffer, Hall, & Vanderbilt, 1999; National Council on Responsible Gambling, 2017). However, after the initial rise in prevalence rates of problem gambling, people begin to adapt to the changed environment, moderate their gambling behavior, develop new prevention and intervention resources, and thereby the rates of problem gambling plateau or decline. It is important to note that exposure and adaptation effects are not uniform across all settings, and social environments frequently play a role in shaping the interaction between population's exposure and adaptation to gambling (LaPlante & Shaffer, 2007). Therefore, familiarizing RG professionals with exposure and adaptation hypothesis, and discussing the effects of venue location and accessibility on different groups of players, should be a part of professional RG training. Additionally, providing RG professionals with the information on populations that are at high-risk of developing gambling problems is important, as it can be used in planning of RG programs and venue design.

Chasing losses is a sign of gambling disorder that is experienced when, despite meaningful financial losses, the person continues to gamble in order to make up for

these losses. Chasing losses is often reinforced through easy access to cash and opportunity to withdraw additional funds, which often results from a ready availability of ATMs on the gambling floors, venues, and kiosks. Self-reports from gamblers imply that easy access to cash triggers impulsive decision making (White, Kraus, & Swartzwelder, 2006), and people with gambling problems are more likely to withdraw money, make larger withdrawals, and have a higher probability of gambling with the withdrawn funds (McMillen, Marshall, & Murphy, 2004). However, limiting access to ATMs may inconvenience recreational players or, in cases when gambling opportunities are offered in non-casino environments (e.g. bars, clubs, lottery kiosks), it might also inconvenience those visitors of the establishment who do not engage in gambling. Limiting access to ATMs in gaming venues might also prompt people with gambling problems to bring more cash to the venue. Thus, all the advantages and limitations of restricting ATM access, reducing the number of machines, or limiting the withdrawal amount should be addressed in training for RG professionals, to enable them to make appropriate considerations around access policies.

The use of alcohol and other drugs during the gambling session can decrease decision making abilities and increase impulsive risk-taking (George, Rogers, & Duka, 2005). There is also evidence that the use of recreational drugs concurrently with gambling activities leads to more negative gambling outcomes (Cronce, Bittinger, Di Lodovico, & Liu, 2017). Therefore, it is important to discuss the development of regulations pertaining to

the limited provision of alcohol on gambling premises as well as the monitoring and care of intoxicated customers. Additionally, developing regulations related to monitoring the use of other substances during the gambling session is an important part of RG programming and customer protection.

Problem gambling services and RG information centers are increasingly becoming an essential part of modern gambling venues. Research shows that the use of these resources is mostly motivated by their accessibility (Blaszczynski et al., 2014). For example, Mobile Access to Responsible Gambling Information (MARGI) kiosks are used in several Canadian provinces to improve players' understanding of gambling harms, house advantage, and responsible gambling. RG Information and Resource Centers can be similarly used to offer information about RG and resources available to those who have concerns about their gambling patterns. Such centers can be found inside the gaming venues and are available to patrons seeking help or information. Establishing information centers where players can obtain advice and RG information in the venue is another important part of ensuring that all players can make informed decisions regarding their gambling activities, engage in positive play behaviors, and receive assistance when in need.

In summary, RG professional training on venue design and other environmental features should cover:

- Venue accessibility (i.e. venue location, opening hours, high risk populations)

- Gambling exposure and adaptation

- Number of machines and game types

- Access to cash

- Access to alcohol and substance use

- On-site RG information centers

2.4.8 Gambling Evaluation Measures

Making decisions about RG policies, programs, and guidelines is an important part of the responsibilities of RG professionals. Ideally, such decisions should be grounded in empirical research on the effectiveness and specific outcomes of the RG program in question. As such, regulators and operators need to be able to evaluate the efficiency of RG initiatives and critically assess empirical evidence related to RG programs. Enabling these professionals with knowledge of evaluation tools and measures will be beneficial to their decision-making capacities.

Several skills are particularly important to professionals' knowledge needs in program evaluation. These areas include critical thinking and evidence assessment, basic knowledge of program evaluation and research methods, knowledge of assessment tools in RG, and interpreting program evaluation outcomes. Using critical thinking skills for evidence assessment can include reading the scientific literature on new RG developments and evaluating the strength of the evidence presented by specific studies. These skills are useful for making decisions about introducing new RG programs or modifying existing ones. Basic knowledge of program evaluation and research methods can be practical for operators who have already implemented a RG program and want to learn whether it was effective. Understanding of assessment tools used in RG research and evaluation will contribute to professionals' ability to interpret the outcomes of program evaluations and learn more about specific programs' mechanisms of change. Finally, RG professionals need to be able to recognize how programs and their features contribute to specific outcomes and whether program performance meets established criteria (Oehler et al., 2017). Such knowledge can guide professionals' decision-making regarding continuation and changes to RG programs and regulations.

One of the evaluation tools that is particularly notable in the field of RG is the Positive Play Scale (PPS) – an instrument designed to measure responsible gambling behaviors (Wood et al., 2017). It assesses players' behaviors on such parameters as honesty and control, personal responsibility, and gambling literacy. Additionally, it can be divided into two unique components: players' positive beliefs about gambling and players' responsible gambling behaviors. RG regulators and operators should be informed about the PPS because it can be an essential tool in measuring the effectiveness of RG programs and their elements, and making informed decisions about future program design and development. Moreover, the PPS can aid RG professionals in creating more segmented RG strategies that are specifically tailored to the needs of certain categories of gamblers (e.g. youth, Indigenous players, bingo players). Finally, the PPS promotes a more positive

approach to behavior change in gambling, appeals to low- and moderate-risk as well as to high-risk gamblers, and thus can potentially lessen the stigma surrounding RG strategies. Hence, RG professionals should be given information on how to use the PPS for RG program evaluation in such a way as to maximize the benefits of this tool.

Summarizing the preceding review, the following topics are worth including in RG professional on gambling evaluation measures:

- Critical thinking for evidence assessment

- Program evaluation and research methods

- Knowledge of assessment tools (i.e. positive play scale, problem gambling severity index)

- Interpreting evaluation outcomes

2.4.9 Problem Gambling & Treatment Programs

As problem gambling impacts approximately 1% to 3% of the North American population (Ladouceur, 1996; Weibe, Mun, & Kauffman, 2006), it is important to inform professionals working in the area of RG about gambling disorder and treatment programs available. The treatment methods for problem gambling include motivational interviewing (MI), cognitive-behavioral therapy (CBT), brief intervention, and even pharmacological treatments. Adjuncts to treatment like 12-step programs and peer support are also available. Evaluating treatment programs for problem gambling and assessing evidence for their effectiveness is a significant part of providing help to people

with gambling problems and their families. Hence, learning about the types of interventions for problem gambling and their relative strengths and limitations should be a significant part of RG professionals' training.

The growing reliance on evidence-based interventions for problem gambling is one of the major trends in treatment development. Most empirical work so far has been done on cognitive and behavioral treatments and motivational interviewing interventions for problem gambling. Numerous trials demonstrate that CBT-based treatment produces significant symptom improvements in problem and pathological gamblers (McIntosh, Crino, & O'Neill, 2015; Smith, Battersby, Harvey, Pols, & Ladouceur, 2015; Toneatto, Pillai, & Courtice, 2014). Moreover, several studies demonstrate that adding a mindfulness component to traditional CBT-treatment might produce improved outcomes for people with gambling problems (McIntosh et al., 2015; Toneatto et al., 2014). When CBT-based treatment was compared to MI, no significant differences between the two treatments were observed, although both treatments produced outcomes superior to those of no-treatment group (Carlbring, Jonsson, Josephson, & Forsberg, 2010). Additionally, a combined CBT and MI treatment decreased problem gambling symptoms in clients who attended individual or group sessions when compared to waitlist controls (Oei, Raylu, & Casey, 2010). There is substantial empirical support for the effectiveness of CBT and MI in the treatment of problem and pathological gambling. Thus, it is essential to provide RG professionals with

training on CBT and MI interventions for problem gambling.

Less research support is currently available for 12-step interventions (i.e. Gamblers Anonymous) and pharmacological treatments for problem gambling. However, some research suggests that it might be beneficial to combine 12-step interventions with CBT (Petry et al., 2006). Moreover, some preliminary research shows promise in using opioid receptor antagonists (e.g. naltrexone and nalmefene) for ameliorating gambling cravings in people with gambling problems (Kim, Grant, Adson, & Shin, 2001). Therefore, informing RG professionals on these interventions would also be a useful addition to a RG professional training course.

Lastly, brief interventions, such self-help workbooks, gambling helplines, and brief MI are frequently used to address problem gambling (Hodgins, Stea, & Grant, 2011). The research findings show that telephone-based MI combined with a self-help book delivered through mail led to improvements over 12-month and 24-month follow-up periods (Hodgins, Currie, Currie, & Fick, 2009). A study of a self-help toolkit, *Your First Step to Change: Gambling,* has shown some promise, as significantly more toolkit recipients demonstrated reduction in problem gambling compared to the control group (LaBrie et al., 2012). Online interventions incorporating CBT and MI elements were shown to be effective in reduction of problem gambling symptoms (Carlbring & Smit, 2008). Venue-based treatment referral and support services could also be considered brief interventions as they provide an initial help to players experiencing problems with their gambling. As brief interventions are the easiest form

of gambling treatment to implement, it is important to educate RG professionals about the available brief interventions, and ways to incorporate them in RG practices.

This review suggests that problem gambling and treatment programs training should cover the following areas:

- Family therapy
- Motivational interviewing
- Cognitive-behavioral therapy
- Brief interventions
- Mindfulness
- Pharmacological interventions
- Evaluating program effectiveness
- Adjuncts to treatment: e.g. 12-step programs and peer support

2.4.10 COMMUNITY PREVENTION PROGRAMS

While clinical programs and therapies for problem gambling mostly focus on the treatment of already existing problems, community prevention programs often take a more proactive role and aim to prevent the problem from occurring in the first place. Community prevention efforts often involve raising awareness around the issue of problem gambling, reducing risk factors, conducting screening and early interventions, and providing targeted services to vulnerable populations (NCRG, 2017).

Community efforts to raise awareness around the issue of problem gambling often include social advertising and marketing campaigns. Such campaigns may be targeted at general public education about RG and problem gambling, or they might also attempt to educate and change

behaviors of specific groups, such as youth, veterans, or Indigenous people. As discussed above, research shows that social marketing is effective for raising awareness and about problem gambling and gambling harms, reducing stigma, and inducing more responsible gambling behaviors (RGC, 2017b; RGC, 2016; RGC, 2009).

The risk factors commonly associated with problem gambling include comorbid mental health conditions, a history of trauma, increased levels of stress, low socioeconomic status, and a lack of access to healthcare (NCRG, 2017). To reduce the risk factors associated with problem gambling, regulators, operators, and policymakers could be educated to partner with community health professionals in determining the risk factors that are particularly prominent in a specific community. Further, specific actions can be taken to ameliorate the risk factors. For example, conducting a brief problem gambling screening as a part of clinical interviews for other psychological disorders may lead to early detection and promote subsequent interventions. Workplace prevention programs for problem gambling might increase access to help resources among individuals who would not otherwise reach out for help due to increased stress levels (Rafi, Ivanova, Rozental, & Carlbring, 2017). Finally, targeted community interventions typically focus on specific populations, such as youth, Indigenous people, older adults, or veterans, and thereby address specific risk factors experienced by these populations. Implementing such interventions usually requires establishing partnerships with other organizations in the community.

Early interventions have proven to be successful in treating a broad range of mental health conditions. The most common form of early intervention for problem gambling is the provision of a helpline, however, other resources, such as self-directed workbooks, websites, and smartphone apps are also available. The important advantage of self-directed help resources is that they can be used by those who normally would not seek formal help. At the same time, early interventions can be helpful for connecting individuals in crisis with mental health services providers and informing such individuals of other help resources available in the community (Weinstock et al., 2011).

Community prevention programs vary in their scope, reach, and method of implementation. Informing RG professionals about the available modes of prevention program delivery and the evidence for their effectiveness may help to ensure the success of the future prevention initiatives.

In general, an overview of community prevention programs for problem gambling should incorporate the following topics:

- Help lines

- Websites/apps

- Online support groups/forums

- Social marketing campaigns

- Financial education

- Brief problem gambling screening

- Community interventions for high-risk populations

- Work and school programs

- Evaluating program effectiveness

2.5 Summary of Content Areas

The above subsections outline the most important content areas to be included in a RG professional training program. Since the program's target audience is RG professionals responsible for program development and decision-making, they should be familiar with gambling-related regulations in their jurisdictions along with the most common RG policy frameworks. Informed decision making is at the core of RG and positive play initiatives and thus, professional training should cover providing players with information to make educated decisions about their gambling. Furthermore, the ways to identify and support people with gambling problems should be discussed in professional RG training. Self-exclusion programs are one of the most popular problem gambling interventions available in many gambling venues and their implementation requires special consideration from RG professionals. As some professionals also take part in establishing regulations around gambling promotion, it is also worth discussing the development of RG advertising and marketing guidelines. Some environmental and game features are associated with increased risks for problem gambling; hence, RG professionals should be informed of how to design individual games and gaming venues to decrease gambling-associated harms. Additionally, RG professionals should be able to make informed judgements regarding the success of specific RG programs so basic training in program evaluation and research will be suitable to their needs. Finally, knowledge of treatment programs for problems gambling and community prevention programs is essential to the needs of RG professionals who might be involved in implementation of, or referral to, such programs.

2.6 Challenges in RG Training

When considering gambling training for regulators, operators, and manufacturers, it is useful to consider the challenges that arise in the process of developing and implementing RG training. Furthermore, it is important to understand the factors that limit the effectiveness of training programs. Insight on training challenges comes from the literature on training programs developed for frontline employees.

Role conflict was one of the most prominent challenges associated with RG training programs. One qualitative study explored challenges experienced by gaming employees in Queensland, Australia (Hing & Nuske, 2012). Concerns reported by staff related to invading clients' privacy, losing clients to competitors, and getting in trouble with the venue managers. Overall, role conflict was apparent in employees' responses. In such a way, the issues of privacy, confidentiality, and potential conflicts of interests should be emphasized when discussing the development of RG regulations with RG professionals. It is important to keep in mind that regulators and operators can also experience role conflict associated with incorporating RG initiatives in their companies' practices and regulations, as many might see such initiatives as discrepant with companies' goals to make profits. Thus, it is essential to stress the fact that RG strategies are not designed to interfere with recreational gambling and they promote corporate social

responsibility that will benefit their business in the long-term.

Another potential challenge for RG training programs is the ability of participants to apply the material they learned in the program to solving real-life problems. Several studies noted the difficulty in identifying people with gambling problems that venue employees experienced even after undergoing RG training. Delfabbro, Borgas, and King (2012) investigated the extent to which venue staff could identify people with gambling problems in Australian casinos and electronic gambling machines (EGMs) venues. Their results demonstrated an extensive disparity between staff perceptions and gamblers' actual problem gambling scores. Another study (Hing, Nuske, & Holdsworth, 2013) also revealed a discrepancy between behaviors that venue staff considered indicative of problem gambling and those behaviors that were identified as such in the RG industry kit. For example, staff members largely failed to appreciate the relationship between problem gambling and alcohol and drug use, faulty cognitions, depressive thoughts, suicidal ideations, and being involved in multiple gambling activities. Importantly, many employees expressed reluctance to initiate any interventions when patrons exhibited signs of problem gambling. These findings show that an important limitation to the effectiveness of RG training programs is employee difficulty applying the knowledge learned in the course. An RG training program for professionals should incorporate discussions of the ways in which the course content can be applied to tasks they have to solve on a daily basis.

Differences in pre-existing knowledge of RG should also be considered during the program design. All gambling employees are not identical in terms of their knowledge and awareness of RG programs and problem gambling. Gray et al. (2015) assessed casino employees on gambling-related knowledge and used cluster analysis to group them by opinion and knowledge differences. The results demonstrated the existence of distinct knowledge groups and supported the need to classify employees into instructional tiers. These outcomes can be directly applied to the development of an RG professional training program, as different professionals likely vary in their knowledge of RG. Pre-testing participants' knowledge and classifying them into instructional tiers would ensure that all course participants are appropriately challenged and learn new information relevant to their needs.

Finally, the environment of the venue and work conditions have also been shown to contribute to employees' and patrons' problem gambling, substance use, and other health problems (Hu, Luk, Leong, U, & Van, 2013; Tiyce, Hing, Cairncross, & Breen, 2013). RG training programs should address staff problem gambling along with patron problem gambling, as well as provide RG professionals with information on making the environment of the venue safe and conducive to RG initiatives.

2.7 SUMMARY

This review explored the research and evaluation literature on RG training programs existing to date. Although most such publications are concerned with the training of frontline staff, there are still valuable lessons that can be taken from these programs for the design of RG

professional training. Potential content areas for RG professional training were also reviewed and along with the current state of research in each of these areas. To summarize, most RG training programs reviewed proved to be beneficial for the employees who participated in them and frequently led to increased awareness of problem gambling and a better understanding of RG. The development of training for RG professionals needs to cover a broad scope of topics – including RG policies, assisting and educating players, self-exclusion, advertising and marketing guidelines, venue and game characteristics, evaluation measures, and treatment and prevention programs – to enable them to design and implement effective RG policies, regulations, and public programs.

3 EXPERT SURVEY

3.1 METHODOLOGY

Following the literature review, the next phase of the study was a needs assessment (Barbazette, 2006) expert survey tool. The survey is designed to assess RG training needs and interests among all levels of expert employees at gaming regulators, operators, manufacturers, and consultancies, along with preferences around delivery of training. The study protocol was found to be exempt from review by the Institutional Review Board at Washington State University.

After development of a draft survey by this report's authors, the survey was adapted based on feedback from four practicing experts in the field. Final categories of

inquiry for RG subject matter areas included:

- Responsible gambling guiding principles
- Organizational benefits of responsible gambling
- Organizational barriers to implementing responsible gambling policies
- Responsible gambling corporate policies
- How to assist players in need
- How to educate players (informed decision making)
- Self-exclusion programs
- Advertising and marketing guidelines
- Game design and machine structural characteristics
- Venue design and other environmental features
- Gambling evaluation measures
- Treatment programs
- Community prevention programs

Each respondent was asked about their interest in these subject matter areas, and was then asked about related sub-topics if the subject was not rated as *Unimportant*.

Due to the nature of the population of study (practicing RG professionals), a purposeful sampling technique was used. Each of the study authors subjectively, but broadly, identified professional contacts for whom *some* (or more) of their, or their employees', roles are related to RG, who were provided with anonymous survey links that could be forwarded to other contacts fitting the study aims and scope. Social media posts were also made to the first author's social media pages (Twitter and LinkedIn), as well as the remaining

authors' organizational social media pages (Twitter and LinkedIn). Informed consent was acquired during the recruitment process.

In total, 98 individuals responded to the survey, 23 responses were removed due to incompletion, and 9 more responses were removed due to failing one or two attention check questions. Participation was voluntary, and respondents received no compensation for their responses. In addition to the curriculum and service delivery questions, respondents were asked about other characteristics of their role and organization.

3.2 RESULTS

In this subsection, we provide the results of the expert survey, primarily through frequencies and mean averages. In section 3.2.1, we describe the final survey sample. In section 3.2.2, we outline the RG content areas that respondents feel are most important to their organization. Finally, in section 3.2.3, we identify the areas where respondents have the greatest need for RG educational content and how they would prefer to receive this training. As this study focused on assessing the general perspectives of a small but knowledgeable group of experts, our analysis is generally limited to descriptive rather than inferential statistics.

3.2.1 SAMPLE DESCRIPTION

In this section, we describe the composition of the study sample.[1] Overall, 92 people

accessed, and 69 people completed, the survey. Nine respondents were removed for failing one or two attention checks. The sample of 60 respondents included in the final analysis cut across broad categories of interest.

As shown in Table 1, nearly one third had roles entirely devoted to RG, while 97% had "some" or more.

TABLE 1: SHARE OF ROLE RELATED TO RG

Reported Share	No.	%
All	19	32
Most	15	25
Some	24	40
Not much	2	3
Total	60	100

In Table 2 we observe that the sample includes a diverse set of roles, including over 20% of the sample from Senior Leadership (22%), Management (37%), and Non-Management Employees (23%).

TABLE 2: ORGANIZATIONAL ROLE

Primary Role Type	No.	%
Senior leader (Exec/Board)	13	22
Management	22	37
Non-management employee	14	23
Researcher/academic	1	2
Consultant	6	10
Other	4	7
Total	60	100

Table 3 suggests that the sample is disproportionally operators, at nearly half

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[1] Some figures may not sum to 100% due to rounding.

the sample. This is not unexpected, as operators are typically larger organizations, resulting in more RG-related employees.

TABLE 3: ORGANIZATION TYPE

Organization Category	No.	%
Operator or service provider	29	48
Government regulator	9	15
Consulting	8	13
Other	14	23
Total	60	100

Respondents were asked which forms of gambling they operated, regulated, or to which their role focused. The responses to this question are provided in Table 4, which suggests a broad coverage of games, with casino-related EGMs, table games, and lottery products forming the top three categories.

TABLE 4: GAMBLING FORMATS RELATED TO ROLE

Gambling Formats	No.	%
Table games (casino)	47	68
Slots/EGMs (casino)	49	71
VLTs/EGMs (non-casino)	24	35
Lottery products	35	51
Charitable gaming	22	32
Online gaming	34	49
Sports betting	32	46
Race betting	20	29
Other	6	9

As shown in Table 5, respondents represent a range of organization sizes, with small, medium and large organizations all over 22% of the sample.

TABLE 5: ORGANIZATION SIZE

Number of Employees	No.	%
1-49	13	22.8
50-499	15	26.3
500-2,499	14	24.6
2,500 or more	15	26.3
Total	57	100

In Table 6, we describe the countries where respondents are located. While there is diverse representation from four continents, Canada and the U.S. form a large part of the sample, likely due to the sampling approach. We note that those North American responses do reflect multiple gaming jurisdictions within both Canada and the U.S.

TABLE 6: PLACE OF WORK

Country	No.	%
Australia	3	5.3
Canada	32	56.1
Japan	1	1.8
Singapore	3	5.3
Sweden	1	1.8
United Kingdom	4	7
United States of America	13	22.8
Total	57	100

3.2.2 CONTENT AREAS

In this section, we outline the overall categories of RG that respondents find the most important to their organizations Overall, the results shown in Table 7. substantiate the findings of the literature review, as the mean (Avg) score of all categories was above 3.0, which equates to a 'moderately important' score, while eight categories scored at or above 4.0, equating to an 'important' score.

The top three categories, *Gambling and PG information, RG corporate policies,* and *How to educate players*, were selected as important or very important (Top-2 Box %) by at least 80% of the study sample. Among operators/service providers only,

this figure increased to 97% (Top-2 Box % Oper.). These appear to be foundational components of RG training across nearly all organizations and jurisdictions.

While treatment programs were the lowest rated category on average, we note that it was rated in the top-two boxes (Important or Very Important), by 70% of the sample. The low average score appears to be driven by low ratings from many operators, who only had a 38% top-two box score and may only have a tangential need for knowledge related to treatment programs.

TABLE 7: IMPORTANCE OF RG TRAINING CATEGORIES

Category	Avg	Top-2 Box %	Top-2 Box % Oper.
Gambling and PG information	4.5	88	100
RG corporate policies	4.2	80	97
How to educate players	4.2	83	97
RG guiding principles	4.1	77	86
How to assist players in need	4.1	75	90
Self-exclusion programs	4.0	77	90
Organizational benefits of RG	4.0	73	93
Game design and structural characteristics	4.0	70	76
Gambling evaluation measures	3.9	25	72
Organizational barriers to implementing RG policies	3.9	66	79
Advertising and marketing guidelines	3.8	67	79
Venue design and environmental features	3.5	58	69

Category	Avg	Top-2 Box %	Top-2 Box % Oper.
Community prevention programs	3.4	42	45
Treatment programs	3.2	70	38
Other	3.2	46	100

Note: Response categories include 1-Not Important; 2-Slightly Important; 3-Moderately Important; 4-Important; 5-Very Important

In subsequent tables, we examine subcategories for each topic area. The subcategory tables are presented in order from highest average ranked importance to lowest.

Gambling and problem gambling information was identified as the most important category of information, but as shown in Table 8, none of the subcategories were rated as highly as the overall category itself. This may suggest that while respondent felt like a broad understanding of gambling and problem gambling was important, more specific topics or refined understanding was not as essential.

TABLE 8: GAMBLING AND PG INFORMATION

Subcategory	Avg
Signs of problem gambling	4.36
Problem gambling risk-factors and impacts	4.27
Description and prevalence of problem gambling and gambling harms	4.08
How to set and stick to limits	3.97
Cultural factors related to sub-groups of people who gamble	3.97
Randomness, independence of events, gambling myths	3.95
Odds of winning	3.78

Note: Response categories include 1-Not Important; 2-Slightly Important; 3-Moderately Important; 4-Important; 5-Very Important

In Table 9, we observe that all subcategories of policies appear to be important to RG experts. This likely reflects what is a heavily legislated and regulated practice.

TABLE 9: RG CORPORATE POLICIES

Subcategory	Avg
Innovative responsible gambling policies	4.34
Best practices in responsible gambling policies	4.32
Responsible gambling legislation and policies in the participants' local jurisdiction	4.29

Note: Response categories include 1-Not Important; 2-Slightly Important; 3-Moderately Important; 4-Important; 5-Very Important

Table 10 outlines responses on educating players. There appears to be a greater importance placed on what information to provide to players, rather than how to provide the information.

TABLE 10: HOW TO EDUCATE PLAYERS (INFORMED DECISION MAKING)

Subcategory	Avg
What information to provide	4.20
Value of informed decision making	4.07
Tailoring information	4.03
How to provide information	3.90
Balancing information on risky and positive play	3.88

Note: Response categories include 1-Not Important; 2-Slightly Important; 3-Moderately Important; 4-Important; 5-Very Important

Compared to RG corporate policies specifically (Table 9), there is somewhat slightly less interest in the underlying frameworks that might drive those decisions (Table 11).

TABLE 11: RG GUIDING PRINCIPLES

Subcategory	Avg
Science-based frameworks	3.88
Corporate social responsibility	3.88
Gambling as a public health issue	3.83
Duty of care	3.66

Note: Response categories include 1-Not Important; 2-Slightly Important; 3-Moderately Important; 4-Important; 5-Very Important

Table 12 describes responses to subtopics on assisting players in need. Despite narratives that suggest digital tracking and algorithmic based risk identification will be future areas of development in RG programs, this was the lowest rated subcategory. Respondents were more interested in subcategories related to core aspects of RG programs, including integrating RG into the customer service model and referring customers to external resources.

TABLE 12: HOW TO ASSIST PLAYERS IN NEED

Subcategory	Avg
Assistance as part of customer service model	4.21
Processes for referring to external resources	4.19
Communication techniques to increase confidence in approaching players	4.09
In-venue resources	3.89
Identifying players using in-person behavioral markers	3.88
Digital behavioral tracking and identification	3.55

Note: Response categories include 1-Not Important; 2-Slightly Important; 3-Moderately Important; 4-Important; 5-Very Important

In Table 13, we see a similar trend. The most recent innovations in self-exclusion programs: reinstatement, multi-operator systems, winning withholding, and third-party exclusion, are all the lowest rated, while more core program components are highly rated.

TABLE 13: SELF-EXCLUSION PROGRAMS

Subcategories	Avg
Local regulatory requirements	4.07
Enactment procedures, dealing with distressed customers	4.07
Impact/effectiveness of self-exclusion, role of counselor support	3.98
Enforcement	3.96
Duration	3.82
Reinstatement	3.60
Single venue vs. multi-operator programs	3.30
Withholding of winnings	3.12
Third-party exclusion	3.02

Note: Response categories include 1-Not Important; 2-Slightly Important; 3-Moderately Important; 4-Important; 5-Very Important

In Table 14 we observe that there is slightly more interest in knowledge around the organizational benefits of RG as it relates to external forces (e.g. public perception and regulatory risk) as opposed to internal forces (e.g. employee trust and job satisfaction).

TABLE 14: ORGANIZATIONAL BENEFITS OF RG

Subcategory	Avg
Public perception of organization	4.07
Player sustainability	3.97
Regulatory risk	3.97
Employee organizational trust	3.66
Employee job satisfaction	3.55

Note: Response categories include 1-Not Important; 2-Slightly Important; 3-Moderately Important; 4-Important; 5-Very Important

While game structural characteristics and tools like limit setting are topics receiving significant research at the moment, as shown in Table 15, there is only moderate interest in seeing that knowledge translated into educational programming.

TABLE 15: GAME DESIGN AND STRUCTURAL CHARACTERISTICS

Subcategory	Avg
Losses disguised as wins and near misses	3.71
Money and time spend display	3.69
Pre-commitment tools	3.53
In-game messaging	3.52
Speed of play	3.47
Game sound & lights	2.90

Note: Response categories include 1-Not Important; 2-Slightly Important; 3-Moderately Important; 4-Important; 5-Very Important

As will be shown in Table 22, gambling evaluation measures are the most sought area of educational programming, but as shown in Table 16, its relative importance to other subtopics is not high.

TABLE 16: GAMBLING EVALUATION MEASURES

Subcategory	Avg
Measurement tools	3.89
Where to find results from other evaluations	3.75
How to weigh evidence	3.74
Research methods	3.74

Note: Response categories include 1-Not Important; 2-Slightly Important; 3-Moderately Important; 4-Important; 5-Very Important

Table 17 outlines subcategories related to organizational barriers. Training and knowledge, management support, and employee commitment all rate relatively high.

TABLE 17: ORGANIZATIONAL BARRIERS TO IMPLEMENTING RG POLICIES

Subcategory	Avg
Training and knowledge	4.28
Management support and employee commitment	4.25
Organizational culture	4.05
Public education	3.86

Reluctance/ambivalence	3.62
Role conflict	3.61

Note: Response categories include 1-Not Important; 2-Slightly Important; 3-Moderately Important; 4-Important; 5-Very Important

Advertising and marketing guidelines are often subject to regulatory controls, and this appears to be the most important subtopic on advertising and marketing to our respondents, as shown in Table 18.

TABLE 18: ADVERTISING AND MARKETING GUIDELINES

Subcategory	Avg
Local regulatory requirements	3.84
Impact on high-risk populations	3.74
Content restrictions	3.65
Effectively promoting RG through marketing/ads	3.65
Evaluating gaming marketing/ads	3.44

Note: Response categories include 1-Not Important; 2-Slightly Important; 3-Moderately Important; 4-Important; 5-Very Important

Despite their close ties to operations, subcategories related to venue design and other environmental features were generally not rated highly, as shown in Table 19. This includes accessibility and machine counts, which are frequent subjects of policy debate, but may be less relevant in day-to-day tasks of RG experts.

TABLE 19: VENUE DESIGN AND ENVIRONMENTAL FEATURES

Subcategory	Avg
On-site responsible gambling information centers	3.65
Access to alcohol	3.33
Access to cash	3.31
Gambling exposure and adaptation	3.15
Substance use	3.09
Venue accessibility	3.00
Number of machines and game types	2.76

Note: Response categories include 1-Not Important; 2-Slightly Important; 3-Moderately Important; 4-Important; 5-Very Important

In Table 20, we observe that there is limited need for education around community prevention programs, with the possible exception of help lines. Help lines are often used as part of operator-related referral programs, in addition to in the community, which may explain the increased reported importance.

TABLE 20: COMMUNITY PREVENTION PROGRAMS

Subcategory	Avg
Help lines	3.82
Websites/apps	3.57
Evaluation of program effectiveness	3.44
Social marketing campaigns	3.39
Financial education	3.34
Online support groups/forums	3.18
Brief problem gambling screening	3.05
Community interventions for high-risk populations	2.96
Work and school programs	2.73

Note: Response categories include 1-Not Important; 2-Slightly Important; 3-Moderately Important; 4-Important; 5-Very Important

Consistent with the broader category scoring, the subcategory importance scores for treatment programs shown in Table 21 suggest that there is limited interest in related knowledge among our respondents who are predominantly in industry or regulatory roles.

TABLE 21: TREATMENT PROGRAMS

Subcategory	Avg
In-person counselling	3.35
Evaluating treatment program effectiveness	3.15
Online/technology assisted treatments	3.06
Peer and group support	2.77

Pharmacological interventions	2.24

Note: Response categories include 1-Not Important; 2-Slightly Important; 3-Moderately Important; 4-Important; 5-Very Important

3.2.3 Needs & delivery

After outlining the areas of content that are most important to their organizations, respondents were then asked which of the broad categorized content areas where they perceived that they had an unmet need. This was measured on a five-point Likert scale from strongly disagree to strongly agree.

As shown in Table 22, with the exception of treatment programs, which may be seen as tangential to the role of operators, the lower ranked content areas from Table 7 are generally the higher ranked topics in terms of need. Perhaps unsurprisingly, this suggests that respondents and their organizations focus on their highest need areas. Future training programs could consider consolidating information across jurisdictions and/or organizations, or consider whether existing content is comprehensive.

Only three subcategories have an average rating above 3.0, which is indicative of average agreement, *gambling evaluation measures, organization barriers to RG policies,* and *game design and structural characteristics*, suggesting training for most RG professionals should address these topics*. However, all but two categories scored in the top two boxes (Agree or Strongly Agree) for at least 20% of the sample. With a sizeable minority of respondents expressing need in these areas, there may be an opportunity to develop customizable educational programs across most of these categories,

for a reasonably size group of organizations.

TABLE 22: UNMET NEED FOR INFORMATION

Category	Avg	Top-2 Box %	Top-2 Box % Oper.
Gambling evaluation measures	3.4	52	17
Organizational barriers to implementing RG policies	3.2	54	54
Game design and machine structural characteristics	3.2	45	41
Venue design and environmental features	3.0	39	63
Organizational benefits of RG	2.8	35	38
Advertising and marketing guidelines	2.8	37	24
Community prevention programs	2.8	30	7
RG corporate policies	2.7	32	24
How to assist players in need	2.7	25	17
How to educate players	2.6	28	21
Treatment programs	2.6	23	21
RG guiding principles	2.5	22	14
Gambling and PG information	2.4	17	14
Self-exclusion programs	2.3	17	10

Note: Response categories include 1-Not Important; 2-Slightly Important; 3-Moderately Important; 4-Important; 5-Very Important

As shown in Table 23, Table 24, and Table 25, there does not appear to be a strongly preferred mechanism for delivering course content, though most respondents seem to prefer a half day in-person training session. After reviewing these figures and

qualitative feedback, it appears that preferences are driven by the subject matter and the role of the person receiving the training. For example, when asked about their specific work/jurisdiction, one respondent wrote, "…we have frontline staff in our venues who are trained to deal with players but also RG management responsible for corporate policies, internal advisory services, public education, research funding, and development and evaluation," demonstrating a consideration of the different needs and responsibilities across roles at their organization.

It also appears that our sample of experts have been able to meet most of their educational needs, through reading research, attending conferences or external training, and other sources. Alternatives to those sources would need to add additional value or efficiencies to warrant a chance in behavior.

TABLE 23: CURRENT SOURCES FOR RG INFORMATION

Source	Share
Research	83%
Networking	82%
Internal documents	73%
External/offsite training	73%
News sources	72%
Internal/onsite training	45%

Note: Multiple responses allowed

TABLE 24: PREFERRED MODE OF RG TRAINING

Modality	Share
Online modules	40%
In-person training session	57%
Online module with an in-person supplement	42%

Note: Multiple responses allowed

TABLE 25: PREFERRED TRAINING INTENSITY

Time period	Share
One-hour session	13%
Half-day session	38%
Full-day session	12%
Multiple-day course	23%
Other	13%

4 CONCLUSIONS

Through an environmental scan of extant training programs, a detailed literature review, and a survey of related experts, this study sought to identify core curricula and assess the need for specialized training in responsible gambling policies and programs. Several insights emerged that may be of interest to RG stakeholders.

First, most RG training programs reviewed proved to be beneficial for the employees, and frequently led to increased awareness of problem gambling and a better understanding of RG. While programs were generally found to focus on frontline employees, there are several lessons that may be helpful in training knowledge workers without service delivery roles. For example, role conflict was one of the most prominent challenges associated with RG training programs. Training programs at all levels should emphasize how RG strategy and operations can and do fit into larger organizational goals.

Second, our review of literature identified multiple areas of study that appear important to the knowledge base of RG professionals. Broadly, these include RG policies, assisting and educating players, self-exclusion, advertising and marketing guidelines, venue and game characteristics, evaluation measures, and treatment and prevention programs.

Finally, our survey of experts, which included 60 persons with backgrounds spanning a broad set of organization types, sizes, roles, and jurisdictions, produced several insights. Our expert group generally confirmed the broad categories of study that emerged in our literature review are pertinent to their work.

A comprehensive educational program should include content related to *gambling and PG information, RG corporate policies, how to educate players, RG guiding principles, how to assist players in need, self-exclusion programs, organizational benefits of RG, game design and structural characteristics, gambling evaluation measures, organizational barriers to implementing RG policies, advertising and marketing guidelines, and venue design and environmental features.*

The survey also revealed that our selection of experts managed, through reading research, attending conferences or external training, and other sources, to meet most of their educational needs. Only a handful of topics, including *gambling evaluation measures, organizational barriers to implementing RG, and game design and machine structural characteristics*, were found to be unmet topics of study, on average. While a training program that targets new leaders in the field may need a broader curriculum, more established knowledge workers may only need educational programs in areas of emerging research (evaluation measures and game design) or ongoing challenges they may be facing once in their roles (organizational barriers).

4.1 LIMITATIONS AND FUTURE WORK

Through an environmental scan, a review of literature, and an expert survey, this study provided insight on the educational needs of RG professionals. We note that our environmental scan and literature review were limited to publicly available, English-language sources, within the scope of our database search. This necessarily excludes potentially important sources, and in particular, may bias against trade secrets that firms believe are valuable, or culturally relevant distinctions that appear in non-English-language speaking countries. Future research could consider a similar exercise in other languages, or through a qualitative mechanism that could explore potentially undisclosed areas of relevance.

Also, reaching our population of study necessarily required a non-probabilistic sampling technique. Because of this, and the limited sample size, our survey results were descriptive rather than inferential. As a means of obtaining more precise inference, researchers could consider attempting a census of individual jurisdictions, workplace learning specialists, or trade associations.

Future research could take other paths. As our study was based on a self-reported assessment of needs, other studies could explore more objective measures of knowledge, to determine if subjective assessments align with objective measures. Perhaps most importantly, training programs should be developed and evaluated to consider how to deliver the information effectively, and assess the overall usefulness of these programs for knowledge workers in RG.

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