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A Qualitative Perspective on Physical, Social and Cognitive Accessibility to Gambling

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Abstract

A possible relationship exists between heightened accessibility to gambling and the development and maintenance of gambling problems amongst employees at gambling venues. This paper takes an interpretive approach to exploring how working in a gambling venue influences accessibility to gambling. Semi-structured telephone interviews were conducted with 40 hotel and club employees in Victoria, Australia. Data were analysed along three key dimensions of accessibility to gambling. In terms of physical accessibility, respondents generally felt shiftwork and split shifts heavily influence the times staff are likely to access gambling facilities. Aspects of social accessibility, including familiarity and comfort of gambling in the workplace, encouragement by other staff, and workplace cultures that do not deter staff gambling, were considered encouraging influences. Cognitive accessibility (or knowledge and understanding about gambling) was heightened by enhanced knowledge of gambling products and processes, greater knowledge of jackpot levels, a desire to know what competing venues are offering, and cognitive distortions around winning.

Introduction

Understanding the link between accessibility to gambling and the development and maintenance of gambling problems is of critical concern for prudent formulation of gambling policy at government, industry and venue levels, particularly in relation to harm minimisation and consumer protection. Despite the importance of developing this body of knowledge, previous research has been largely inconclusive. Indeed, the [Productivity Commission \(1999\)](#) cautioned that authoritatively proving a causal relationship between accessibility and problem gambling is necessarily difficult. This is because accessibility to gambling is a multi-dimensional construct

([Productivity Commission, 1999](#)), so isolating the impact of its different dimensions is challenging. Further, accessibility to gambling accompanies other factors that may influence the development and maintenance of gambling problems. Thus, accessibility may only be “the starting point for all people who develop gambling problems” ([Abbott & Clarke, 2007](#), 127).

Persons employed in gambling venues have been postulated to be at heightened risk for developing gambling problems ([Hing & Breen, 2006a](#); [Hing, 2008](#); [Hing & Nisbet, 2008](#)). This has been tenuously attributed to their enhanced accessibility to gambling venues and products. However, no empirical evidence has confirmed a causal link between accessibility to gambling and an increased prevalence of problem gambling amongst gambling venue employees. While the present study cannot claim to provide this, it contributes to knowledge by offering an interpretive perspective as to how working in a venue influences staff accessibility to gambling and their gambling behaviour, and presents an alternative perspective on a topic dominated by quantitative studies.

The aim of this paper is thus to explore, from the perspective of gambling venue employees, perceptions as to how working in a gambling venue influences one's accessibility to gambling products and venues, both inside and outside the workplace, and one's gambling behaviour.

Links Between Accessibility and Gambling Behaviour

It is generally accepted that accessibility to gambling is a multi-dimensional construct. In the first and only Australian national inquiry into gambling to date, the [Productivity Commission \(1999\)](#) devised a framework of nine such dimensions. This section briefly reviews previous studies pertaining to each of these.

Geographic Opportunities to Gamble.

Geographic opportunities to gamble can be represented as either locational (place-based) or individual ([Kwan, Murray, O'Kelly, & Tiefelsdorf, 2003](#)). Measurable attributes can include the number of venues, number of opportunities to gamble per venue, and venue location relative to the gambler's place of work and/or residence ([Abbott, 2007](#)). [Delfabbro and Le Couteur \(2006\)](#) loosely refer to these as *geographical opportunities*. However, [Kwan et al., \(2003\)](#) dispute the assumption that people travel to their closest location to gamble, and note that locational preferences may change over time.

Machine Numbers.

Several studies have focused on aggregate gaming machine numbers and compared these to problem gambling prevalence rates, with varying results ([O'Neil & Whetton, 2002](#); [O'Neil & Whetton, 2004](#); [Responsible Gaming Council, 2006](#)).

Some authors speculate that this relationship is not linear ([Shaffer, LaBrie, Nelson, & Stanton, 2004](#); [Volberg & Abbott, 2005](#)) and that “somewhere between seven and ten machines (per 1000 adults) the relationship breaks down” ([Volberg & Abbott, 2005](#), p.10). This may be because the gambling problems of newly exposed populations recede over time through a process of adaptation ([Shaffer et al., 2004](#); [Abbott, 2006](#)).

In Victoria, the [South Australian Centre for Economic Studies \(2005\)](#) concluded that regional caps on electronic gaming machine (EGM) numbers had little impact on accessibility to gambling opportunities. In contrast, a 30% reduction in gaming machine numbers in Nova Scotia was followed by a decrease in expenditure and time spent gambling by up to 12% of players surveyed ([Corporate Research Associates, 2006](#)).

Machine Density.

The [Productivity Commission \(1999\)](#) found evidence of a statistically significant relationship between the number of machines per adult and problem gambling rates in a population ([Productivity Commission, 1999](#)). Several studies have supported this notion ([Ladouceur, Jacques, Ferland, & Giroux, 1999](#); [Marshall, 1999](#); [Marshall & Baker, 2002](#); [Ladouceur, Jacques, Sevigny, & Cantinotti, 2005](#); [Clarke, Tse, Abbott, Townsend, Kingi, & Manaia, 2006](#); [McMillen & Doran, 2006](#)). Other analyses have focused on the density of machines in low socio-economic areas ([Marshall, 1999, 2005](#); [Marshall & Baker, 2002](#)). In Victoria, the [Australian Institute for Primary Care \(2004\)](#) found that disadvantaged areas are much more likely to have high EGM densities and expenditure. A later report ([Department of Justice, 2005](#)) compared several Victorian regions with similar areas in Western Australia, where there are no EGMs outside Burswood Casino. The Victorian problem gambling rates were three times that of Western Australia. The authors called for further research to determine whether gambling-related harm is caused more by the number of machines per venue or the convenience of their location.

Proximity.

Several studies provide evidence linking distance travelled or proximity to a gambling venue and gambling behaviour ([Shaffer et al., 2004](#); [Hinch & Walker, 2005](#); [Perese, Bellringer & Abbott, 2005](#); [Walker & Hinch, 2006](#); [Chhabra, 2007](#); [Adams, Sullivan, Horton, & Menna, 2007](#); [Rush, Veldhuizen, & Adlaf, 2007](#)). However, the adequacy of proximity as a measure of accessibility has been questioned ([Donato, 2003](#)).

Nevertheless, spatial analysis in the Australian Capital Territory found the gambling expenditure of patrons living locally to a venue was likely to be higher than that of patrons who travelled more widely to gamble (Marshall et al., 2004). Further, a

U.S. telephone survey found a positive link between proximity to a casino and problem gambling prevalence ([Welte, Wieczorek, Barnes, Tidwell, & Hoffman, 2004](#)). In an examination of spatial variance in problem gambling prevalence in Ontario, Rush, Veldhuizen and Adlaf (2007, p. 205) concluded that "...problem gambling appears to be modestly but significantly associated with proximity to casinos and racetracks with slot facilities" and that "...these forms of gambling might constitute an independent risk factor for problem gambling." Technology, such as the internet and mobile phones, has also transformed the convenience with which traditional forms of gambling, such as racing and sportsbetting, can be accessed ([Delfabbro & Le Couteur, 2006](#)).

Social Accessibility.

Social accessibility to gambling has been defined as "the sense in which a venue provides a non-threatening and attractive environment to groups who might otherwise feel excluded" ([Productivity Commission, 1999](#), 8; p. 6). For example, in the Northern Territory, casinos are perceived as a non-threatening environment for Aboriginal and Torres Strait Islanders, who are said to be tacitly discouraged from gambling in clubs and hotels ([Productivity Commission, 1999](#)). Similarly, the expansion of gaming machines in clubs and casinos has increased acceptability of participation by women ([Abbott, 2001](#); [Delfabbro & Le Couteur, 2006](#)). The increasing incidence of women seeking help for problem gambling supports the positive correlation between this enhanced accessibility and problem gambling ([Productivity Commission, 1999](#)). A further feature of social accessibility is endorsement of gambling, tacit or explicit, by family and peers, with several clinical studies providing strong support linking family involvement in gambling to problem gambling ([Abbott, Cramer, & Sherrets, 1995](#); [Australian Council of Social Services, 1997](#); [Au, 2005](#)).

Opening Hours.

Many jurisdictions have restricted gaming machine operating hours to minimise harm to gamblers. However, little Australian evidence supports the efficacy of this in reducing problem gambling. Conversely, research in Nova Scotia showed "a disproportionate number of problem gamblers played video lottery terminals between midnight and closing" ([Corporate Research Associates, 2006](#), p. 2). After the shutdown time was moved to midnight, problem gamblers reduced their spending by CAD \$75 and moderate risk gamblers by CAD \$140 per week ([Corporate Research Associates, 2006](#)).

Conditions of Entry.

Accessibility to gambling can also be restricted via conditions on entry. The most common is for gamblers be 18 years of age or older. Others include restricting

local residents from gambling, pre-registration of intent to gamble, entrance fees, and dress standards. Yet, it is not known whether these conditions impact on problem gambling. Self- and venue-exclusions can also restrict entry. However, an Australia-wide study documented inherent weaknesses and a general failure of self-exclusion programs to be effective ([South Australian Centre for Economic Studies, 2003](#)).

Ease of Use.

Gaming machines require far less skill than many types of gambling, such as blackjack and betting on the races ([Productivity Commission, 1999](#)). The skill level required to gamble on an activity in turn influences its accessibility. Several authors have identified that male adolescent interest in skill-based games increases their access to these in early adulthood and have linked this with high adolescent problem gambling rates ([Shaffer, Hall, & Vander Bilt, 1997](#); [Delfabbro & Le Couteur, 2006](#)). Gambling operators have also facilitated use of some products (e.g., auto-picks and mystery bets), presumably to enhance their accessibility.

Initial Outlay.

Low outlay games are clearly more accessible to people on low incomes. Electronic gaming machines typically have a much lower initial cost than table games, making the former particularly appealing to people on low incomes ([Productivity Commission, 1999](#)). However, while affordability of initial outlay affects accessibility to gambling, the link between overall affordability and gambling behaviour is less clear. For example, population studies typically indicate that lower socio-economic groups gamble more than affluent groups. Thus, hope of winning may negate affordability for some people.

The preceding review of the literature indicated some evidence of a link between certain dimensions of accessibility to gambling and gambling behaviour and problem gambling. However, research results are largely inconclusive, being hampered by widely varying measures of accessibility, difficulties of isolating the influence of accessibility from other factors, and of distinguishing the influence of different dimensions of accessibility.

Gambling problems among gambling venue employees.

Many of the multiple dimensions of accessibility are enhanced for gambling venue employees. For example, in establishments that allow staff to gamble in their own place of employment, opportunities to gamble are in close proximity and easily taken up; their familiarity with gambling products facilitates their ease of use; and the normalisation of gambling through exposure may heighten social accessibility ([Hing & Nisbet, 2008](#)). This heightened accessibility suggests an amplified risk for gambling problems, which is borne out in empirical research.

For example, a study of the gambling behaviours of 34 employees at three large U.S. casinos ([Collachi & Taber, 1987](#)) found many behaviors to be consistent with problem gambling. Similarly, a sample of 3,841 U.S. casino employees was found to have a higher prevalence of past-year Level 3 (pathological) gambling (2.1%), but a lower prevalence of Level 2 (problem) gambling (1.4%), than the general adult population ([Shaffer, Vander Bilt, & Hall, 1999](#)). A longitudinal study that re-tested 1,176 U.S. casino employees at three intervals approximately 12 months apart found that gambling problems were generally more extensive when compared to the general population, although some respondents reduced their gambling problems over time ([Shaffer & Hall, 2002](#)). [Duquette \(2000\)](#) found a pathological gambling rate amongst 271 employees of one U.S. casino of 20.3%, compared to 1.1% for the general U.S. adult population, while [Wu and Wong \(2007\)](#) identified a pathological gambling rate of 7% among 119 dealers in Macau.

The gambling behaviour of venue staff has also been examined in Queensland, Australia ([Hing & Breen, 2005, 2006a, 2006b, 2007, 2008a, 2008b, 2008c; Hing, 2008](#)). One qualitative study revealed over 80 reasons why working in a venue may encourage staff gambling ([Hing & Breen, 2006a](#)), many of which related to dimensions of accessibility. A quantitative study ([Hing, 2008](#)) found that the proportion of problem gamblers among 511 Queensland gambling venue staff was 10 times higher than for the state population.

Clearly, the studies cited above have found widely varying rates of problem gambling among the venue staff surveyed. There are several possible explanations for this. One is jurisdictional differences, including how numerous and accessible gambling venues are, the legal minimum age for gambling, and legislation and policies that might restrict employees gambling in their own workplace. Cultural differences might also be relevant and may be reflected in the popularity of gambling and propensity to develop gambling problems. In addition, the studies have not been consistent in the types of employees included in their samples. For example, [Wu and Wong's study \(2007\)](#) included only table games dealers from any casino in Macau. [Duquette's \(2000\)](#) sample included both front and back of house employees from a casino where staff could gamble on most forms of gambling available in their workplace. [Shaffer and Hall \(2002\)](#) included only full-time casino employees, but did not specify whether these included both front and back of house staff and operational, supervisory and management staff. Hing's quantitative study ([2008](#)) included staff from hotels and clubs with gaming machines as well as casino staff, and included both front and back of house employees and those at all levels of employment. Nevertheless, where comparisons were possible, all the studies cited above all found higher rates of gambling problems amongst their samples than for the general population in the associated jurisdiction.

Methods

This research was undertaken as part of a larger study examining accessibility to gambling amongst gambling venue employees in Victoria. Semi-structured telephone interviews were undertaken with 40 club and hotel employees. Hotels are for-profit licensed premises which can be privately owned, while clubs are not-for-profit licensed premises which are owned by their members. In Victoria, hotels and clubs can each operate up to 105 gaming machines, as well as operate off-course betting outlets (TAB outlets) and keno. Two gaming operators, Tabcorp and Tattersall's, own all 27,279 gaming machines in these hotels and clubs and lease them to these venues. The only other provider of gaming machines in the jurisdiction is the Crown Casino. However, they declined to allow their staff to participate in the study.

The Interview Schedule

An original interview schedule was developed based on the literature review. The first section gathered information regarding respondents' experiences of working in gambling venues, such as their position, nature of their workplace, and staff gambling policies. Section Two was administered only to participants permitted to gamble (while off duty) in their workplace, whilst Section Three was administered to those not permitted to gamble in their workplace. Sections Two and Three asked participants whether and how certain aspects of working in a venue influenced staff gambling, both outside and, where applicable, inside the workplace. These aspects related to various dimensions of accessibility, sourced from the literature review, and included:

- - Convenient access/proximity to gambling
- - Familiarity with their own venue
- - Safety and security
- - Knowing other staff
- - Knowing other patrons
- - Shiftwork
- - Knowledge and familiarity with gambling
- - Normalisation of gambling
- - Fellow employees
- - Financial circumstances

Sample Selection

Interviewees were recruited via an earlier phase of the larger study. In November 2007, a survey had been distributed to a census of hotels and clubs operating EGMs in Victoria, requesting completion by three staff per venue and inviting respondents to participate in a telephone interview. A \$20 petrol voucher was offered for participation, and 189 respondents agreed.

A target number of interviews had been set at 40, because data redundancy would likely occur after this and due also to budgetary constraints. Interviewees were selected from the 189 volunteers using a process akin to quota sampling ([Neuman, 2006](#)).

Over a two-week period during December 2007, one telephone call was placed to each sampled interviewee to schedule a mutually convenient interview time. The interviews mostly took place the same day as the initial call. No message was left when an answering service was encountered, and the interviewer contacted the next person on the list. Interview duration was 15–30 minutes. All were recorded with permission and transcribed verbatim.

This sampling method has clear limitations, with quota sampling and a one-time telephone call possibly introducing bias. Nevertheless, while the intention was never to produce generalisable outcomes, the quota sampling used ensured a reasonably even balance of males (42.5%) and females (57.5%), although there was a higher proportion of respondents employed in clubs (72.5%) than hotels (27.5%). There was also reasonably balanced representation from staff working in venues with differently sized gaming machine installations (ranging from 10 to the maximum of 105) and those where Keno (58.1 per cent) and TAB (50%) were available.

Data Analysis

The raw data were analysed using thematic analysis, a method for identifying, analysing and reporting patterns within data, by organising and describing the data set in rich detail and by interpreting various aspects of the research topic ([Braun & Clarke, 2006](#)). It involves six distinct stages: (1) familiarisation with the data; (2) generating initial codes; (3) searching for themes; (4) reviewing the themes; (5) defining and naming themes via ongoing analysis; and (6) writing up the results ([Braun & Clarke, 2006](#), p.87).

Results and Discussion

The paper now presents and discusses the results in terms of venue policies on staff gambling in the workplace and various dimensions of accessibility to gambling by staff. Please note that pseudonyms have been used in this discussion to protect staff identities.

Venue Policies on Staff Gambling in the Workplace

Victorian legislation prohibits hotel and club employees from gambling in their workplace while on duty. Individual venues have discretion on any other restrictions on staff gambling in the workplace.

Eighteen of the 40 respondents indicated they were permitted to gamble in their workplace, although there were several variations on this. Some had to wait a certain time period after a shift to commence gambling in their workplace (e.g., 15 minutes, 12 hours), others could only gamble for a limited time after a shift (e.g., 30 minutes, 45 minutes), others had to remove name tags or conceal or change from their work uniform, while others were barred just from playing linked jackpots.

Of the 21 respondents who indicated staff gambling was prohibited in their venue, most spoke of a total ban. One respondent (Will, club gaming manager) explained staff are not allowed to socialise on site (whether gambling or not), while another (Laura, club night duty manager) suggested the ban was to protect the venue from customer complaints. Practical considerations also limited some staff gambling. For example, Kathy (club bar attendant), working in a small club, remarked “We can't gamble here out of our working hours because ... when we're not working we're closed.” Some respondents indicated they were unclear on their venue's staff gambling policy. One respondent explained there was no policy at his venue, but “There really isn't any need for any because the staff don't gamble there anyway” (Rick, club bar and gaming manager). In contrast, Sally (club supervisor), a supervisor at a large club, indicated that not having a ban probably encouraged staff to gamble after work, some to excess, and that a ban would be preferable.

Accessibility to Gambling Among Staff

The interviews revealed numerous issues around staff accessibility to gambling, which are grouped below into three overarching dimensions of accessibility — physical, social and cognitive.

Physical Accessibility

Physical accessibility to gambling was discussed by the interviewees mainly in terms of convenience, proximity to work and home, and the influence of shiftwork and split shifts.

Convenient accessibility and proximity.

Most respondents did not think convenient accessibility to gambling, in terms of its proximity at work, influences staff to gamble in the workplace. For example, Rhonda (hotel gaming supervisor) described “being with it all the time” as discouraging her from gambling while off duty. Amy (club gaming attendant) noted the unattractiveness of her venue as a place to socialise: “I don't gamble a great deal but if I was gonna go to somewhere for dinner I definitely wouldn't go to my work.” Some staff did not want to extend the time they spent in the workplace by also gambling there. However, it was readily acknowledged that staff, like the general public, have convenient access to venues in general.

However, some respondents described gambling as a convenient way to relax after work, particularly following night shifts. Some also gambled in the workplace when they came in to check rosters or return keys in their time off. Max (club duty manager) explained that “a lot of the staff that will play, will play because they’ve come in for something for work and the pokies are there, so yeah, convenience I suppose.” Other respondents, such as Patrick (hotel manager), explained their venue was “the only one in town.”

Where staff were required to change out of uniform to gamble in the workplace, employees who live some distance away appeared more likely to gamble closer to home. However, if there was no other similar venue there, then those workers may be more likely to gamble in their workplace. Even for staff not permitted to gamble at work, other venues in close proximity allow convenient gambling before or after work, or during meal breaks. For example, “convenient proximity” for Graham (club chef) meant a venue where staff “could walk down there on their break, spend 20 minutes down there and walk back again, you know half an hour break.”

Nearby venues were also considered good places to meet up with co-workers and friends who work at other venues. In Banjo's (hotel gaming manager) case, she preferred to gamble at “the other hotel just a few metres up the road ... [because] if you’ve had a stressful day, you can relay it on to someone who understands.” Some respondents who were not permitted to gamble in their workplace indicated it may be more convenient to gamble closer to home, either on their way home from work or during time off, than to go to a venue near the workplace: “People will go to the closest place that they want to go to, or one that they’ve got to pass on the way home. That's where they’ll drop off or they’ll go to, their local” (Noel, club manager).

Shiftwork.

Shiftwork was a further worklife aspect that appeared to affect physical accessibility to gambling. Late night finishes meant some staff did not have the opportunity to gamble after work, thus staff gambling in the workplace was seen as confined to those working day shifts. For example, Sally (club supervisor) explained:

When I used to do day shift, I used to stay, have a drink and play ... But now that I work nights, like I don't go in there to play. And when I knock off, the machines are closed ... all the ones that do day shift, the majority of them will stay and play the pokies afterward.

However, a number of staff who finished late explained they sometimes gamble at other venues after work. Further, many respondents had observed staff from other venues gambling at the respondents’ workplace before or after shifts and could

“recognise the staff from other hotels ... they weren't in for a social drink. They were just more in to play pokies” (Noel, club manager).

Essentially, shiftwork was seen as encouraging staff to gamble at other venues, rather than in their workplace. This was due to workplace policies regarding staff gambling, opening hours, opportunities to meet up with fellow hospitality workers, wanting to experience the gambling facilities at other venues, and a desire for privacy in their own gambling. A lack of alternative leisure opportunities for night shift workers can also encourage staff gambling:

Only last week, well, our venue's probably open the latest, but I'm not allowed to gamble, so I drove for half an hour to another venue that was open to the same time as us just to play for a couple of hours ... I'd been home and I was bored so I thought I'd go to this venue (Dallas, hotel chef).

Split shifts.

Both the workplace and non-workplace gambling groups spoke about split shifts. These are commonly worked by kitchen staff and appear to be a strong influence on their gambling behaviour. Several respondents acknowledged having seen kitchen staff gambling between shifts. These staff often find it easier to stay close to their workplace in between these shifts and gambling is one way to pass that time.

Social Accessibility

Social accessibility was discussed in relation to the familiarity and comfort of gambling in their workplace, safety and security, encouragement from other staff to gamble, the influence of patrons, the normalisation of gambling, limits on other social activities, and management and workplace culture.

Familiarity and comfort of gambling in the workplace.

Most respondents who could gamble in their workplace believed that familiarity with their venue made it a comfortable, sometimes inviting place to gamble. Cheaper drinks for staff (where provided) and the non-judgemental attitude of others added to this comfort level. However, some who were able to gamble in their workplace felt staff preferred to gamble elsewhere, “to go in a different environment so they feel they're actually away from work” (Jake, hotel junior manager).

In contrast, respondents who could not gamble in their workplace tended to disagree that familiarity with gambling environments encouraged staff to gamble. Some reasons were that this familiarity turned staff off gambling and they get sick

of the environment. Others felt that individual factors such as boredom were more influential than social factors. However, Amy (club gaming attendant) described how her level of familiarity and comfort in a gambling environment grew over time: “Before I started working in venues I felt a bit more uncomfortable about going to them, but because I’m very aware of how they work and operate and stuff like that now, I’m more comfortable to go there.”

Safety and security.

Respondents were fairly evenly divided on whether the added safety and security of gambling in your own venue, rather than going to another, encouraged staff to gamble in their workplace. Some commented that knowing other people in the workplace added to comfort levels and others that security is enhanced. As Lara (club cashier) commented, “Having been there for 10 years I know probably 80% of the patrons in there, I know the staff, I know the security, I know that if anybody came at me for any reason that I would be protected there.” However, others noted that alternative venues were just as safe.

Influence of fellow workers.

The influence of other staff on social accessibility to gambling was a topic of much discussion. Most respondents who could gamble in their workplace believed that knowing other staff encouraged workplace gambling. The general collegiality was attractive, although this also applied for staff who gambled at other venues where they knew employees. For example, Amy (club gaming attendant) explained that, “[this town] is not a really big place so a lot of staff swap and change. So I’ve worked with quite a lot of people from around the area.” Consequently, she was more likely to visit their venues.

Finishing a shift at the same time as others, the social atmosphere of TABs for men, a drinking and gambling culture, and sharing of “hot tips” among staff were other encouraging factors noted. However, others felt that social factors had no influence on EGM gambling, as it is a mostly individual activity, while heavier gamblers might prefer to gamble elsewhere to retain privacy. Raina (club administration) for example, believed employees did not “enjoy other staff hovering around them and looking at what they do.” Respondents permitted to gamble in the workplace seemed more likely to encourage other staff to gamble with them, even outside the workplace. There were, however, some that did not want to socialise at all with fellow workers.

Influence of venue patrons.

Knowing venue patrons seemed to discourage some respondents from gambling in their workplace (where permitted). They explained they sought some respite from their patrons and sometimes felt uncomfortable if patrons commented on their

gambling or any wins. For some, however, knowing patrons added to the social enjoyment.

Offering tips to TAB staff was prominent in venues where patrons involved in the racing industry gathered, and was facilitated by a welcoming social atmosphere. For example, these patrons might encourage staff to place bets on particular racehorses with comments such as “So and so's got a ride today, it might do alright” or “I heard a tip” (Sky, club gaming supervisor).

Normalisation of gambling.

Most interviewees recognised that gambling becomes very normalised for staff. However, whether this translates into heightened gambling activity depends on many other factors. Nevertheless, this normalisation can reduce any stigma around gambling. As one interviewee noted: “I think they [staff] feel it's more acceptable” (Ben, hotel bar and gaming attendant); according to another, normalisation has an effect because it “sort of eases a bit on the perception that gambling is bad ...” (Kaitlyn, club manager). Kaitlyn also illuminated the normalising effects of gambling that arise from noticing gambling's positive effects, such as relief from loneliness and boredom amongst older patrons.

Among respondents who strongly agreed that the normalisation of gambling compelled staff to gamble themselves, a few believed this influenced their own gambling. Jill (club duty manager) spoke of how “whenever we go out as a group ... we either meet in the pokies or meet in the bistro and end up in the pokies.”

Limits on other social opportunities.

While previously postulated as influencing physical accessibility to gambling, elements of shiftwork were also described as influencing social accessibility. This related to the limit it imposed on social opportunities. Many respondents explained that family time and options for relaxing after work are very restricted, particularly when working late shifts, so they may socialise with fellow staff instead. Max (club duty manager) explained that the unusual hours associated with night-shift encouraged him to gamble after work, and discouraged him from going home as his family would most likely be asleep:

... sometimes we've finished work at say 12:30 here ... you might have worked from 3 o'clock. You're a little bit, like awake and we tend to go to another venue for a drink because we know it's open. And then obviously, if they go for a drink and there's staff that do gamble here, well they tend to throw in 20 or 30 at another venue. And also, certainly if their partner's also asleep at that time of night, they're not likely to go home. So they're wanting to go somewhere else.

Financial circumstances.

The typical low wages of staff were also acknowledged as influencing the affordability of gambling for staff and thus the comfort level of spending limited disposable income on gambling. Most respondents felt venue employees would not consider gambling as a way to supplement their income. Matilda (hotel gaming attendant), for example, was typical in acknowledging her tight finances and said this limited her gambling expenditure to \$2.00 – \$3.00 at most (in Australian currency, a relatively insignificant amount of money). However, some younger or newer staff members appeared more naïve in this regard. Max (club duty manager) noted that new employees “...can think wow, that's so easy to do. So when money is low, maybe they do tend to look at pokies as an option of winning.”

Management attitudes to staff gambling.

Social accessibility to gambling was also seen as dependent on management attitudes to staff gambling. Where a permissive policy applied, management can be seen as endorsing staff gambling. In some instances, staff gambling was recognised as keeping EGM turnover up. Sally (club supervisor) had approached her manager, seeking a ban on staff gambling. The manager responded: “our turnover would drop. I would sooner the staff play here, than go elsewhere and play.” This illustrates the strong leadership and mentoring role that managers can take, and the potentially strong message that a permissive staff gambling policy can send. Another respondent spoke of the liberating effect when the hotel owner/manager was absent, noting staff were then readily able to gamble in the workplace late at night.

Cognitive Accessibility

Several themes in the interviews related to cognitive accessibility to gambling, and those discussed below include perceived insider knowledge, enhanced product knowledge, better knowledge of jackpot levels, a desire to be aware of gambling products offered at competing venues, and cognitive distortions of some staff.

Perceived insider knowledge.

It was widely acknowledged that gambling venue employees should have enhanced knowledge of the odds of winning at gambling and the extent of patrons' losses, so this should discourage them from gambling. However, a perception of insider knowledge can override this. For example, Noel, a club manager with a long history of working in gambling, suggested staff can believe they have inside knowledge of gaming machines. He also clearly believed in the gambler's fallacy:

I'd like to think we've got inside knowledge. Look, I can tell you, tell you now, when I do the morning shifts and I count the cash every morning

for four or five days, on about day three or four I think, “gee we’re due for a couple of payouts.” And all of a sudden the machines will start paying out.

Enhanced product knowledge.

The special knowledge required of staff working at TABs further added to their familiarity, comfort and knowledge of how to gamble on TAB activities. Others were genuinely interested in playing certain EGMs after watching patrons play them, and wanted to try the games themselves at their own, or another, venue. Reflecting a belief in the gambler's fallacy, still other staff observed patrons winning on particular machines and were enticed to play them to see if they could also win. For example, Betty (club staff) spoke of how gaming floor personnel have time to observe patrons in play, develop a rapport and “hang around with them while they’re on the machine.” This can translate to gambling outside of work, as described by Banjo (hotel gaming manager), who “used to go just up the road because there was a particular game I liked to play ... and if I enjoy playing the game I enjoy watching [customers play] it too.”

Jackpots.

The respondents generally felt they had a greater knowledge regarding jackpot levels than the general public. This led some respondents to again be subject to the gambler's fallacy as they erroneously believe they know when jackpots are about to be won, with some reporting that they encourage fellow (off-duty) workers to pursue these jackpots. Max's (club duty manager) “first memory of staff gambling” related to a staff jackpot win in the context previously described: “...we used to go around and say ‘go get on the Wild Cash machines, it's about to go off.’ One of our staff had finished his shift, got on, won it.” The staff gambling policy at Max's workplace was changed as a consequence of this incident.

Some respondents reported closely monitoring jackpot levels in their workplace, then playing these machines when off-duty or seeking out a linked machine at another venue. Amy (club gaming attendant) perceived this knowledge component as a consequence of the job, because “when you’re at work all day you keep an eye on those things.”

Competing offerings.

Staff gambling was also encouraged by a desire to see what competing venues are offering, to try different machines and learn about alternative promotions and competitions. Some felt they gambled to enhance their product knowledge and work performance and to gain a better understanding of the patron experience. Andrew (club night supervisor), for instance, described “competition checks,” whereby gambling venue staff visit competing venues to “see what sort of

operations the other venues are running.”

Cognitive distortions.

In general, younger or newer staff were considered by respondents as being more vulnerable to cognitive distortions around gambling, seeing gambling as “easy money” after watching patrons win. However, the majority believed that staff were more influenced by player losses which, in turn, deterred them from gambling themselves. Betty's (club staff) response was typical of many: “I probably gamble less [since I started working here], just because I’m sick of the place.” Responsible gambling awareness was also cited as a discouraging influence for some staff, but the limited training of newer or younger staff added to their vulnerability. Betty was sufficiently concerned with the propensity of newer staff to take up gambling, that she raised the matter with her hotel management. This vulnerability suggests a need for ongoing responsible gambling training so that newer staff are also trained.

Conclusions and Implications

This paper has presented an interpretive perspective from gambling venue employees as to how working in a venue influences their accessibility to gambling products and venues and their gambling behaviour. The results of 40 interviews with staff of hotels and clubs in Victoria, Australia were analysed and drawn together in relation to physical, social and cognitive accessibility to gambling.

Clearly, this study is subject to the usual limitations of qualitative research drawing on small and non-random samples, such that results cannot be generalised beyond the participant sample. Further, it cannot be claimed that the interview process did not introduce any bias. For example, interviewees may have been more or less honest and expansive due to the telephone administration of the interviews rather than if a face-to-face approach had been taken. Similarly, a longer interview time may have yielded additional insights. Also, while only one interviewer was used for consistency, it is possible that interviewer bias was present, although attempts were made to avoid this, particularly with the use of standardised questions. Further, the interviews did not ask about the interviewee's own gambling, as this was considered too personal. Therefore, it was not possible to distinguish amongst situational, regular and problem gamblers in the sample and whether their motivations for gambling differed. Nevertheless, an interpretive approach as utilised here is valuable in providing insights in two ways.

First, this study has shed further light on how working in a gambling venue can influence accessibility to gambling and, in turn, gambling behaviour, as the preceding data analysis has shown.

Second, this study has provided empirical support for the multi-dimensionality of

accessibility as it pertains to gambling. While the [Productivity Commission \(1999\)](#) articulated nine dimensions of accessibility, their model has not been empirically tested. Indeed, most studies of accessibility to gambling have selected only one or a few dimensions of accessibility, usually in the physical domain. For example, proxy measures of gambling accessibility have included proximity or distance travelled, aggregate numbers of gaming machines in a jurisdiction, number of machines per head of population, and the spatial distribution of gambling facilities, as discussed earlier in this paper.

Yet, the staff interviews reported here highlight the importance of non-physical dimensions of accessibility on gambling behaviour. While it is accepted that physical access to gambling must be present for gambling to occur (even if that means only physical access to the Internet or telephone for some types of gambling), the staff interviews revealed the importance of non-physical dimensions of accessibility. In fact, where physical access is easy in terms of proximity, convenience and choice, it may be that the social and cognitive dimensions of accessibility are stronger determinants of where, when, how often and how much people gamble.

This contention has a number of implications. First, it suggests that research examining gambling accessibility would benefit from broadening how the construct is defined and then operationalised through related measurement tools. It may well be that a failure to do this in the past explains why research into the links between accessibility and gambling problems have been inconclusive and sometimes contradictory.

Second, most physical measures of accessibility to gambling have focused on population-level accessibility where, for example, numbers of gaming machines or casinos in a jurisdiction have been correlated against problem gambling prevalence rates in that population. Such efforts ignore additional factors that impact on individual-level accessibility. For an individual who wishes to gamble on gaming machines, it may not matter whether the jurisdiction has 100 or 100,000 machines, or whether a venue has 10 or 100 machines. What enables gambling is if the person can get to at least one machine that they want to play, that they have spare time to do so when the venue is open, that they have the money to play, have sufficient know-how to do so, and that they personally feel that gambling on that machine is an acceptable thing to do. In addition to these enabling factors, there may well be a range of encouraging factors that then increase accessibility for that person. These might include, for example, encouragement from peers, a need to fill in time, enhanced knowledge about certain gambling products or a lack of other recreational opportunities.

Third, an expanded conceptualisation of accessibility to gambling might encourage policy-makers to rethink the efficacy of harm minimisation measures that limit only

physical accessibility to gambling (e.g., caps on machine numbers, limits on opening hours). It may be that measures to limit the social accessibility of gambling (e.g., public education that denormalises heavy gambling) and the cognitive accessibility of gambling (e.g., consumer education aimed at lessening cognitive distortions around gambling) would be effective additions to accessibility-focused harm minimisation strategies.

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