

## **first person account**

### **The story of a lottery addict in India: Who is responsible and what are its policy implications?**

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#### **Introduction**

This is Muthu's story. He is a gambler who lives in Kerala, India. Here I narrate this story as told by his wife, and also highlight the issue of "responsible gambling" as seen from the lottery seller's perspective. The narratives and advertisement excerpts are translated from Malayalam, the local language spoken in Kerala. Using my professional expertise a practitioner, I describe the landscape of gambling in both Kerala specifically and India generally, albeit in both cases briefly, and suggest how the country should rethink its gambling policy to limit gambling-related harm. This presentation is unique because there is little to no literature on gambling in India. Although the "case" and the ensuing policy discussion are limited to India, the issues being highlighted and the solutions being suggested will resonate with all those working throughout the world in the field of gambling. More than anything, this brief paper is an attempt to introduce the Western reader to the world of gambling in India, and is a call for more cross-fertilization of ideas, research and policy.

#### **Vijayalakshmi's story (pseudonym; gambler's wife)**

"Muthu isn't the man I married four years ago. He never had any 'bad habits' back then. It started with alcohol; he rarely gambled in the early days of our marriage. Two years ago, he started playing the lottery more often. Initially he would just buy a ticket once a week or so on a Saturday. Then the frequency increased. Nobody believed me when I told them it was becoming a problem. They kept telling me it's only lottery, how bad can that be? He started buying a lottery ticket almost every day, on his way back from work [1 ticket costs about 30 rupees, which is less than half one US dollar]. Over the past one year or so, he has been spending all his wages on the lottery [about 700 rupees a day = 10 dollars US]. Some days when he doesn't get work, he has no money but he still wants to gamble so he borrows from me or his friends. As a result, he is now in a lot of debt. When I ask him to stop, he says he will win big one day and then he will stop. I don't know what else to do. He is so irresponsible with money and his life. Our two year old son and I are not his priority anymore. Out of desperation I have even gone and spoken to the lottery agent who

sells him the tickets, asking him not to sell to him—that didn't work. So I tried asking him if he could not sell to my husband when he is drunk or at least not to sell him more than one ticket a day. Sadly the lottery agent didn't agree. He said he is only doing his job. I want my old Muthu back. Can you help?"

### **Muthu's story (pseudonym)**

Muthu is a 28 year old married man. He lives in a one bedroom, rented house with his wife, Vijayalakshmi, and their two year old son. Muthu is a daily wages labourer and does not hold a regular job. He lives in Kochi, Kerala, India. He has no previous psychiatric history, and had an uneventful childhood and early adult life. He was premorbidly well-adjusted. He drinks approximately eight units alcohol (equal to 10 ml or 8 grams of pure alcohol) on most days. He started gambling two years ago. He only plays the lottery, run exclusively by the Kerala State government. Initially he used to buy 1 lottery ticket per week but gradually increased this rate to 20 to 30 tickets a day. He has not won any prizes yet but is certain that he is due to enjoy a big win soon. He spends more on the lottery than he earns and hence is in debt. He gambles more when under the influence of alcohol. Apart from alcohol and gambling he has no other addictions or other psychiatric comorbidity.

Under duress from his wife, he came to see me in my outpatient gambling clinic. He attended two sessions of cognitive behaviour therapy before dropping out. Muthu enjoys only limited insight into his gambling disorder.

### **Muthu's lottery seller**

Ravi (pseudonym) runs his lottery sales agency at the local town centre. I spoke to him briefly, and asked about Muthu and about his own (the lottery seller's) sense of responsibility in selling lottery tickets to Muthu. He said, under assurance of anonymity, "Yes, I know him. He's a good customer for me because he spends a lot of money in my shop every day. What responsibility? It's not my responsibility. It's he who should be responsible with his money and his life. What can I do? My responsibility is to my wife and kids. If I don't sell tickets I can't put food on my table, so that's what I do. Go ask the government about responsibility, they are the ones who make a lot of money out of all this. I only get a small commission. What can I do? I am not tricking anyone, neither am I forcing anyone to come into my shop and buy tickets." This interview then had to be terminated as he turned hostile.

### **Kerala government's lottery advertisement**

The Kerala State government extensively advertises its State lottery in print and broadcast media. The narration of a television advertisement is approximately as follows. "The setting is a local tea shop. One man buys a lottery ticket from a retail seller just outside the shop and walks in. He asks another man, who is having his tea, if he has bought the lottery ticket. When he says he doesn't want to waste money, several others in the tea shop are seen convincing him about how lucrative the prize money is,

how it helps employ poor people, how it goes into building bridges, roads and airports, and fund healthcare for the poor. Finally he is ‘convinced’ and he too buys a ticket.”

The tag line of the State government’s radio and television lottery advert is, “Kerala State Lottery—trustworthy, democratic and transparent.”

### **Gambling and gambling legislation in Kerala, India**

India, a South Asian country, is the world’s second most populous after China, and the world’s seventh largest by area. It is also the world’s largest democracy. Kerala is located at the southwestern tip of India and is one of India’s 29 States. Kerala had a population of over 33 million in 2011 (*Population Census 2011*) and as such contributed 2.75% of India’s population. Kerala boasts the highest sex ratio (females : males = 1.084) in India, the highest literacy rate (100%), and the highest life expectancy (74 years).

Lotteries are legal in 13 of the 29 Indian States (including Kerala) and 5 Union territories; horse racing in 6 States, and casinos only in 2, specifically Goa and Sikkim. Lotteries and certain card games are legal in Kerala. All lotteries in Kerala are run by the State government. Online lotteries are banned in Kerala.

The Public Gambling Act (1867) is the sole piece of legislation that regulates gambling in Kerala and India. This was brought in by the British during their rule of India to exercise some control on gambling in India. The Centre has devolved powers to individual States to make necessary amendments to the 1867 Act, as they deem fit, to regulate or deregulate gambling within their own State boundaries. This act makes a distinction between games (1) of pure chance, and (2) a combination of chance and skill, making only the latter legal. Although lotteries are games of pure chance, certain States in India, of which Kerala is one, have made amendments to the Central Act, and in doing so made lotteries legal within their State boundaries. Sports betting, though it could be justifiably classified as combination of skill and chance, is deemed illegal throughout India, except in the State of Sikkim where sports betting via the internet has been illegal since 2010. Similarly, individual States have the capacity to make amendments in the law to make them legal within their jurisdictions, if in the future they so wish. The Act is ambiguous in certain aspects—for example, it considers betting on horse racing legal (although only certain States allow it) as it involves skill and chance, but sports betting is considered illegal although it too could be considered to involve a combination of game and chance. Studies of school and college students have found that lotteries are popular types of gambling activity in Kerala (George et al., 2016; Jaisoorya et al., 2016). Although illegal betting is thought to be extremely common, especially betting on sports, it is impossible to determine its scale.

The State of Kerala runs seven weekly lotteries and six bumper draws. Between 4 crore (40 million) and 4.5 crore lottery tickets are sold every week. For example, 40,513,630 lottery tickets were sold during the week of 8–14 August 2016 (K. M. Abraham, personal communication 9-Aug-2018). There are 34,417 authorized

lottery agents and one determined lakh retailers. Karunya lottery (the word *karunya* in Malayalam means *kindness*) is one type of State lottery. It was set up by the State government in 2011 with a view to using the revenue generated for charitable purposes. The State lottery scheme is estimated to have generated revenue for the State in the region of 8700 crore rupees (about 1.1 billion US dollars) in 2017–18. From these figures it is evident that the State lottery is a major source of revenue for the government and this economic “angle” cannot be underestimated in any policy debate.

### **Policy implications: Government’s responsibility?**

I do not wish to start here a debate about the concept of “responsible gambling” (Chóliz, 2018; Hing, 2018) but merely wish to highlight some of the responsibilities of the Kerala State government in this area. The government needs to acknowledge gambling as a public health issue, one with potential for addiction, and consequent harm to the gambler, his or her family, and the wider society (Roaf, 2015).

As the State is the only agency that runs lotteries in Kerala, it only seems reasonable to argue that it has a responsibility to put in place measures to reduce gambling-related harm.

### **How should India rethink its gambling policy?**

1. It is the Public Gambling Act of 1867 that still regulates gambling in India and the Centre has devolved exclusive powers to individual States to deem what types of gambling are legal or illegal. This legislation is archaic and needs revision, primarily because the gambling landscape in India has changed immensely since 1867. The law could be made fit specific purpose. A wider debate on legalizing gambling in India needs to take place.
2. Gambling’s harm to the individual, family and society are well established (Wardle, Reith, Best, McDaid, & Platt, 2018). The government needs to take a public health approach to gambling and gambling-related harm (Roaf, 2015). A three-level approach for the prevention of gambling-related problems, consisting of primary, secondary and tertiary levels of prevention ought to be considered. Primary prevention measures focus on social, psychological and legal strategies. Examples of such strategies include awareness-raising campaigns (about various aspects of gambling, its potential for harm, signs and symptoms, how to seek help, etc.), the banning of gambling advertisements and promotions, and limiting the availability of gambling opportunities. Secondary prevention measures aim at early diagnosis and treatment of at-risk and problem gamblers. Of various such interventions, the ones of interest to the case discussed here include providing training to staff at gambling venues (casinos and lottery shops) to enable them to recognise problem gamblers. Similarly, staff at gambling venues such as lottery shops need to be trained in the basics of “responsible gambling”—i.e., not to sell tickets to gambling addicts or those persons under the influence of substances, and work with families in the area of self-exclusion (to enable them to

recognize problem gamblers). Tertiary prevention strategies would target individuals experiencing harm from their own gambling or through their loved ones' gambling. The approach would include specialist and intense psychological and psychiatric interventions for problem gamblers and support for their families. The government also maintains a duty to offer or at least advertise appropriate treatment programs, both psychological and pharmacological, for problematic gamblers and their loved ones.

Another key issue to address is funding of gambling treatment services—i.e., who will fund this? To be ethically sound, the provision of gambling treatment should be independent of the gambling industry (Walker & George, 2013). However this may not be realistic given the scarce resources. It might be more pragmatic to implement a combined funding stream involving both the government and the gambling industry. A strict ethical code of practice for the industry's involvement would need to be imposed and monitored, to allay any ethical concerns.

It is also worth noting that more research needs to be done in the field of gambling in India as little has been done to date. Only limited data on the prevalence of gambling and gambling-related problems in India exists, or data concerning its prevalence in specific populations, let alone its correlates and comorbidity, course and outcome, and treatment effectiveness. Answers to these questions are needed to inform meaningful and comprehensive policy development.

Developing a national gambling strategy and appointing an independent body to oversee it are key to minimising gambling-related harm and to promote responsible gambling. There are examples of good practice from the West—for example, the Responsible Gambling Strategy Board in Britain (RGSB), which could be replicated in India. Such an independent body could include experts from the fields of gambling research, treatment, policy and academia. It could advise the government on the research, education and treatment aspects of gambling; and determine what research, education and treatment is required to reduce harm from gambling. It should also consider all forms of gambling and set the agenda for gambling operators, regulators, commissioning organisations, government, trade bodies, treatment providers and several other public agencies. The participation of the gambling industry should come with certain clear caveats to prevent the promotion and realization of specific and unacceptable self-interests.

The public health impact on gambling in Kerala and India needs to be seen against the backdrop of a move to legalize sports betting in India. The Law Commission of India was asked, two years ago, by the government to examine the best way to deal with India's illegal gambling. In response, the Law Commission of India in its 2018 report (2018), claimed that “since it is not possible to prevent these activities completely, effectively regulating them remains the only viable option.”

### **Theory to practice: challenges in implementation**

Although the above-mentioned theoretical measures appear sound in theory and are unlikely to be disputed by most persons, I acknowledge nevertheless that the real

challenge ahead will lie in translating these ideas into practice. Resistance will likely take place from lottery sellers and politicians, as implementing tighter controls and restrictions can eat their revenues. It is evident that both lottery sellers and politicians hold a conflict of interest here. Acknowledging this fact, ways and means still exist to achieve responsible gambling policies and practices. It could, for example, be made mandatory for lottery sellers to obtain their annual State Government license that they need to engage in stricter responsible gambling practices, and that they must implement them and provide evidence of having done so. As far as politicians are concerned, providing proof of the negative consequences of problem gambling could make them take stronger actions and agree to a change in policy. And currently there is only scant evidence from India to present a case for more responsible gambling policies; hence, I call for more local (India-focused) research into gambling-related harm with a view to informing required and successful social policy change.

### Conclusion

In summary, lottery is a popular form of gambling in Kerala. As is evident from this case report from this case report, for certain gamblers lotteries can be addictive. Yet its public health risk is not acknowledged by the government who exclusively run the lottery in the State of Kerala. I argue the case for more work to be done to raise the profile of gambling as an important public health issue, and to make it widely acknowledged as a behaviour with addiction potential. In this regard, the government holds crucial responsibilities to minimize gambling-related harm. I have made suggestions to make these shifts take place.

### References

- Advisory Board for Safer Gambling (n.d.). Birmingham, UK: Author. Retrieved from: <https://www.rgsb.org.uk/Home.aspx>
- Chóliz, M. (2018). Ethical gambling: A necessary new point of view of gambling in public health policies. *Frontiers in Public Health*, 6, 12–23. doi:10.3389/fpubh.2018.00012. Retrieved from: [https://www.researchgate.net/publication/322831236\\_Ethical\\_Gambling\\_A\\_Necessary\\_New\\_Point\\_of\\_View\\_of\\_Gambling\\_in\\_Public\\_Health\\_Policies](https://www.researchgate.net/publication/322831236_Ethical_Gambling_A_Necessary_New_Point_of_View_of_Gambling_in_Public_Health_Policies)
- George, S., Jaisoorya, T. S., Nair, S., Rani, A., Menon, P., Madhavan, R., ... & Petry, N. M. (2016). A cross-sectional study of problem gambling and its correlates among college students in South India. *British Journal of Psychiatry Open*, 2, 199–203. doi:10.1192/bjpo.bp.115.002519. Retrieved from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4995164>
- Hing, N. (2018). The evolution of responsible gambling policy and practice: Insights for Asia from Australia. *Asian Journal of Gambling Issues and Public Health*, 1, 19–33. doi:10.1007/BF03342116. Retrieved from: <https://link.springer.com/content/pdf/10.1007/BF03342116.pdf>

Jaisoorya, T. S., Beena, K. V., Beena, M., Ellangovan, K., Thennarassu, K., Bowden-Jones, H., ... & George, S. (2016). Do high school students in India gamble? A study of problem gambling and its correlates. *Journal of Gambling Studies*, 33, 449–460. doi:10.1007/s10899-016-9651-5

Law Commission of India (2018) *Legal framework: Gambling and sports betting including in cricket in India*. New Delhi, India: Government of India. Report number 276. Retrieved from: <http://lawcommissionofindia.nic.in/reports/Report276.pdf>

Population Census 2011 (2015). Retrieved from: <https://www.census2011.co.in>

The Public Gambling Act, 1867. Retrieved from: <https://indiankanoon.org/doc/1824663/>

Roaf, E. (2015). Gambling and public health. In Bowden-Jones, H., & George, S. (eds.), *A clinician's guide to working with problem gamblers* (pp. 15–27). London, UK: Routledge.

Walker, T., & George, S. (2013). Funding treatment for gambling addiction in Great Britain: Ethical issues. *British Journal of Hospital Medicine*, 74, 246–47. doi:10.12968/hmed.2013.74.5.246

Wardle H., Reith G., Best D., McDaid D., & Platt S. (2018). *Measuring gambling-related harms: A framework for action*. N.p.: Gambling Commission. Retrieved from: <https://www.gamblingcommission.gov.uk/PDF/Measuring-gambling-related-harms.pdf>

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