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## Evaluating Language and Communication Surrounding Responsible Gambling

Marla B. Royne Stafford  
*University of Nevada, Las Vegas*

Anastasia Hronis  
*University of Technology Sydney*

Alan Feldman  
*University of Nevada, Las Vegas*

William T. Hartwell  
*Nevada Council on Problem Gambling*

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## Evaluating Language and Communication Surrounding Responsible Gambling

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*Marla B. Royne Stafford*

*Anastasia Hronis*

*Alan Feldman*

*William T. Hartwell*

## **Abstract**

The topic of responsible gambling has been the focus of debate over recent years. Unfortunately the language surrounding responsible gambling has proven ineffective, due to varying definitions and debate over stigma related to responsibility. This paper discusses the importance of language in communicating about consumer protection and harm minimization to the public. Three key areas of discussion are highlighted: 1) decoupling responsible gambling and problem gambling to reduce the barrier of stigma; 2) redefining responsible gambling, and 3) the need for conversations amongst peers and parents, all with the view to proactively prevent gambling-related harms.

*Keywords:* responsible gambling, problem gambling, messages, language

Marla B. Royne Stafford  
University of  
Nevada, Las Vegas  
marla.stafford@unlv.edu

Anastasia Hronis  
University of  
Technology Sydney  
anastasia.hronis@uts.edu.au

Alan Feldman  
University of  
Nevada, Las Vegas  
alan.feldman@unlv.edu

William T. Hartwell  
Nevada Council on  
Problem Gambling  
ted@nevadacouncil.org

## Introduction

Responsible gambling (RG) remains a ubiquitous term in the gambling world. Unfortunately, the current messaging surrounding RG has proven ineffective because gambling patrons reject responsible gambling messages as being irrelevant for them, often considering these messages as targeting those who have already experienced a gambling problem. Additionally, the term itself faces criticism as stigmatizing (Hancock & Smith, 2017). Yet with the legalization of sports gambling, the growth of online gambling, and the continued expansion of commercial and tribal gambling, it is important to better understand the arguments surrounding responsible gambling as well as its terminology.

Progressive discussion on responsible gambling is clearly needed, and it is crucial for the concept to encompass several areas. Hence, the purpose of this paper is to focus on three specific critical areas of discussion in the responsible gambling literature: 1) decoupling responsible gambling and problem gambling, 2) redefining responsible gambling, and 3) developing effective communication about responsible gambling. Additional aims include noting the importance of disambiguating the terms “problem gambling” and “responsible gambling,” as well as to “increase clarity and reduce stigma” with regard to responsible gambling and gambling harm.

### What is Responsible Gambling (RG)?

The concept of RG was originally borrowed from the alcohol industry in the late-1980s. By that time, liquor companies had already been incorporating responsible drinking messages in their advertisements (Barry, 2007). Since then, RG has become a prevalent concept, yet one of much debate. In 2004, Blaszczynski and colleagues identified gambling-related problems as a public health issue and advocated for stakeholders to work collectively to minimize harms as well as to adopt and implement RG practices in the Reno Model.

Current definitions of RG differ based on who is defining it; Edelstein (2023) points out that 100 people would define the term differently. The general idea of RG subsumes a level of consumer protection that is often equated with harm-minimization, by restricting a gambler’s expenditure of time and money to affordable limits (Breen et al., 2005). A review of the existing literature and survey from experts within gambling by Hing, Russell and Hronis (2018) identified six key themes of RG as affordability, balance, informed choice, control, enjoyment, and gambling harm-free. Based on these principles, the following definition of RG was formulated and adopted for use in this paper: *Exercising control and informed choice to ensure that gambling is kept within affordable limits of money and time, is enjoyable, in balance with other activities and responsibilities, and avoids gambling-related harm.*

As RG research and conceptualization have both continued to develop, Blaszczynski and colleagues (2004) furthered the conceptualization of RG from the Reno model, emphasizing stakeholders should define RG as an *outcome* rather than an activity or process (Blaszczynski et al., 2022). That is, the authors argue that because RG exists when a person gambles within their own personally affordable limits, RG is an outcome rather than a policy, regulatory requirement, or individual decision-making process. The authors further draw a clear distinction between RG as the outcome, and the actions that stakeholders can do to bring about this outcome. However, because RG is generally believed to protect industry interests, Livingstone and Rintoul (2020) argue for a new discourse on the topic, something that is clearly needed.

### The Need to Decouple Responsible Gambling and Problem Gambling

We believe to increase clarity and reduce stigma, it is important to disambiguate the terms “problem gambling” and “responsible gambling.” Since its introduction in the late 1980s, RG has seemingly been conflated with problem gambling (PG). The term exists because there was growing industry awareness of problem gambling as a public health issue

and the need to identify behaviors that reflected non-problematic play or non-problem gambling. It is worth noting at that time, no industry regulatory requirements were in place. Harrah's CEO, Phil Satre, first put the term RG into the public lexicon in 1988 with his company's "Operation Bet Smart" program (Shaffer et al., 2019). This unique program was developed in-house and borrowed the construct of responsibility from the industry ("Please Drink Responsibly") where it was already well established. The significant difference between the industries was how responsibility is defined. In responsible drinking, responsible alcohol consumption can be defined as a one drink limit, having a designated driver, or leaving car keys with a friend (Gray et al., 2021). For responsible gambling, however, no such clear actionable definitions existed when RG was introduced as a concept (Shaffer et al., 2019).

Even the broad definition of RG did not emerge until Blaszczynski and colleagues (2004) developed a definition in the Reno Model: "policies and practices designed to prevent and reduce potential harms associated with gambling." In detailing such policies and practices, there is a clear disconnect between intention and outcome. Programs including self-exclusion, self-imposed marketing limits, and time or loss limits, among others, have been implemented, but have seen very little actual usage among the general public (e.g., Cohen et al., 2017; Edelstein, 2023; Gainsbury, 2012), although some programs have demonstrated positive impact on the individual participants (Shaffer et al., 2019).

Despite the ubiquitous nature of the term problem gambling in the gambling world, considerable confusion exists about its definition, particularly relative to the concept of responsible gambling, although responsible gambling can also be considered non-problem gambling. Blaszczynski et al. (2011) and Reynolds et al. (2020) discuss such issues. One well-accepted definition for problem gambling is "gambling behavior that creates negative consequences for the gambler, others in his or her social network, or for the community" (Ferris & Wynne 2001, p. 8). This definition stands in clear contrast to the definition of RG articulated above. That is, the underlying notion of RG actually suggests engaging in betting activity in a way that minimizes potential harm to the player. This potential harm is an outcome.

Moreover, it is in the best interest of operators to promote and support responsible gambling among its customer base and community. For example, in the years shortly after Harrah's implemented Operation Safe Bet, the program's very existence proved to be an unexpected competitive advantage as the company sought to expand along the Mississippi River (Shaffer et al., 2019, preface). By assisting players in maintaining healthy gambling habits, operators demonstrate care for their customers as well as ensuring players engage in sustainable behavior that allows for continued participation in future gambling activities. That is, operators who support such healthy play have the opportunity to help their customer base while potentially increasing long-term player loyalty and value (Shaffer et al., 2019).

Further, the need for clarifying such terminology is clear in part because people tend to engage in selective attention. Selective attention occurs when consumers, bombarded by an overwhelming number of messages encountered daily, choose to avoid those messages they deem irrelevant (de Fockert et al., 2001; Florack et al., 2020). By engaging in selective attention when communicated information is too clinical or unengaging, a player simply tunes out the message of responsible gambling (Younes & Hronis, 2023). As a result, the information is not processed. Quite simply, programs designed to reinforce the fun and positive aspect of play (along with balance in play) have the potential to reach more individuals than those that focus on the clinical words and concepts generally associated with the underpinnings of responsible gambling (e.g., McMullan & Miller, 2010).

A possible reason for selective attention of RG messages and the lack of effectiveness of responsible gambling programs appears to be the noted conflation of the two terms. Often, just the hint of "responsible gambling" generates thoughts of addiction and other negative terms (e.g., Wood et al., 2018) that may trigger selective attention to any message that includes the word "responsible." Wood and Griffiths (2015) coined the term "positive play" to refer to strategies that regular players use to maintain a healthy level of gambling engagement.

Further, the development of RG initiatives has emerged as a reaction to PG and the recognition that some players will experience gambling-related harms, whether or not those harms reach the level of a problem gambling diagnosis. However, a key basis of responsible gambling is the notion of prevention (Blaszczynski et al., 2011). To prevent individuals from experiencing significant harms, interventions such as self-exclusion and self-limit programs have been introduced (Blaszczynski et al., 2011; Håkansson & Henzel, 2020). We argue, however, that these are not fundamentally RG strategies that help consumers gamble in a safer way, but rather tools to help those who are already experiencing a certain level of harm. Hence, in the history of RG initiatives and messages, there has been confusion between ways to keep players who experience gambling harms safe, versus prevention strategies to keep players who are not experiencing significant gambling-related harms playing in a safe and what is, for them, sustainable manner (such as setting time and money limits).

There has also been an oversight of the in-between gray area, where a person can experience gambling-related harms, without having a diagnosable “gambling disorder.” For example, on a particular occasion, an individual may overspend or play longer than anticipated, forgetting an important obligation that jeopardizes a work or family situation. Although this situation may indicate the beginning of a potential gambling problem, it is, in isolation, one example of sub-clinical gambling-related harm that an individual should be cognizant of as input into managing potential future gambling behavior. Harms can also be experienced well below the PG threshold, that is, amongst low and medium risk gamblers. However, because of the greater incidence of low and medium risk gamblers, this can contribute to a significant portion of population levels of harm (Browne & Rockloff, 2018).

Gambling-related harms can present themselves in a multitude of ways. They may include experiencing harms related to one’s mental health and wellbeing, productivity at work, financial strain, or relationship stress (Delfabbro & King, 2019; Langham, 2015). These harms may exist irrespective of one having a “gambling disorder” or not, further emphasizing the need to decouple the terms responsible gambling and problem gambling. Additionally, it is more useful for people to understand gambling-related harms as existing on a spectrum of severity, rather than a black and white dichotomy. That is, if people believe they do not need to use any RG strategies because they do not have a “gambling problem,” then selective attention means potentially useful messaging or effective RG strategies will be overlooked.

Existing work on RG lends support to this. Considerable research shows traditional RG messages and/or strategies have little effect on gambling behavior and gambling-related harms (e.g., Lole et al., 2019; Harris et al., 2018; Fiskaali et al., 2023; Bjørseth et al., 2021), and that wording in message content aimed at reducing gambling harms likely needs to vary across different demographic cohorts to be effective (Gainsbury et al., 2018), essentially introducing the notion of target marketing into responsible gambling messages. While selective attention may indeed contribute to the cause of this lack of effectiveness (Stafford, 2024), other potential explanations include the stigma associated with gambling harms, the false belief that an individual is incapable of developing harms, and operator policies that encourage play beyond an individual’s capacity (Hing et al., 2013; Marko et al., 2022; Parke et al., 2015; Miller & Thomas, 2017). In sum, it is important to disambiguate the terms problem gambling and responsible gambling to increase clarity, reduce stigma and encourage responsible gambling among players.

### **The Need to Redefine the Term Responsible Gambling**

With the conflation between the terms problem gambling and responsible gambling, along with players’ inattention to messages related to responsible gambling, Gainsbury (2023) recently suggested it is time for the term’s demise. However, in determining the appropriate language to use moving forward, it is particularly helpful to enhance understanding of why the term responsible gambling is ineffective.

One key issue is that RG messages often use questionable framing tactics. Framing in advertising messaging refers to how an ad is positioned for interpretation by the audience. One approach to framing is presenting the message in a positive (a gain) or negative manner (a loss) (Shiv et al., 1997), even though both options may lead to the same outcome. In public health messages promoting RG, many terms and frames used are inherently negative. For example, current existing programs and referral resources use phrasing such as “Know When to Stop,” “When the Fun Stops,” “Self-Exclusion,” and “1-800-ADMIT-IT.” (Yang et al., 2024). In fact, a recent UK study found no credible evidence that certain “safer” gambling messages do in fact reduce gambling, with a specific focus on the message “when the fun stops, stop” (Newall et al., 2022). While much research in the cause-related and health advertising literature indicates negative framing often produces results primarily due to loss aversion (e.g. Meyerowitz & Chaiken, 1987; Block & Keller, 1995; Maheswaran & Meyers-Levy, 1990), the advertising literature notes many moderators exist that can affect these results (e.g., Shiv et al., 1997). Given the lack of research on what those moderators could be in the RG space, along with the strong negative connotations, it is hardly surprising that players around the globe largely reject these RG concepts as having any meaning in their lives even if they are experiencing harm from gambling.

Over time, the language of RG has seen some change. Alternatives have been suggested, such as “lower risk gambling” and the Lower Risk Gambling Guidelines (Currie et al., 2008; Currie & Low Risk Gambling Guidelines Scientific Working Group, 2019), Safer Gambling (Hing et al., 2019, 2022; Peller et al., 2008; Newall et al., 2022), and even “rational and safe play” (Barboianu, 2022). As Shaffer and colleagues stated, the changes in terminology, while important to consider, have led to “conceptual chaos” (Shaffer et al., 2023). Harm minimization, player safety, player health, player protection and safer gambling have all emerged as possible replacements for responsible gambling. However, whether or not any of these newer terms might have greater impact in the minds of players or would be more effective remains unknown. The terms “lower risk” and “safer” still carry questionable connotations that may likely fail if implemented by operators because concerns exist about whether these terms actually enable players to think there are safe ways of gambling. It is well documented that all gambling is inherently risky; as such, the connotations of this messaging should be carefully considered. In short, as potential new terminology begins to unfold in the industry, it is important to consider what constitutes appropriate and effective language.

As noted, the term Positive Play has been suggested as an alternative (Wood & Griffiths, 2015) which clearly drives the conversation away from negativity. Through its development, it was proposed that more players may in fact identify with the term Positive Play rather than RG, which is frequently interpreted as aimed at people with gambling problems. However, this alternative term too, has been the topic of debate. For example, it has been argued that Positive Play is a conceptual subset of RG, rather than a fully developed and independent harm reduction framework of its own, and therefore, unable to function as a replacement of RG (Shaffer et al., 2023). Yet, even through the use of “Positive Play” and the Positive Play Scale, research shows most players may believe it is ultimately their responsibility to gamble in a responsible manner, and such a belief may have the potential to create an “irresponsible” feeling about playing, reinforcing the stigmatization. At the same time, players may not truly understand what is meant by “positive play,” again putting the onus on them. However, as Blaszczyński et al. (2011) note, there are several stakeholders involved in ensuring an effective responsible gambling program, including gambling operators.

Regardless, positivity has potential in redefining RG. For example, research suggests the positive emotion of humor can be used in messages pertaining to well-being and health (Yoon, 2015), suggesting the gambling industry borrow from other industries in redefining RG to ensure the appropriate and effective terminology. A qualitative evaluation of the Australian responsible gambling campaign, *C’Mon Australia, Don’t Let the Game Play Ya!*, conducted with eight young adults (Younes & Hronis, 2023) revealed young adults

preferred the light-hearted, non-judgmental and humorous approach of the campaign, while perceiving fear-mongering campaigns as unrealistic and unlikely to lead to behavior change (Younes & Hronis, 2023).

Evaluations of safer gambling campaigns indicate a lack of evidence supporting the use of “gamble responsibly” as an effective public health message (Newall et al., 2023). In fact, evidence shows the frequent repetition of such identical messages leads to negative psychological resistance, resulting in the opposite effect to the one that was intended (Cacioppo & Petty, 1979). Newall and colleagues (2023) found messaging strategies including teaching safer gambling practices, correcting gambling misconceptions, boosting conscious decision making, norm based messaging, and emotional messages, all require additional research.

In sum, it is imperative to develop acceptable alternative positive terms to RG that are both prevention and customer-focused, positive, and engaging. Identifying new terminology that appeals to different target markets across the broad base of players engaged in gambling as opposed to a term associated with or relevant only to that percentage of gamblers who are experiencing problematic behavior is key to focusing on the prevention potential of RG.

### **The Need for Comfortable Conversations among Peers and Parents**

For years, discussions related to mental issues and disorders were often considered taboo because of the stigma associated with such illnesses (Thornicroft et al., 2016). Similarly, alcohol and drug addiction, though still facing some societal acceptance challenges, continue to gain strides in encouraging frank and open discussions to break down barriers in getting help. Even relative to other mental health issues, gambling disorder is highly stigmatized (Quigley, 2022). Perceptions of people with gambling-related problems suggest they are “irresponsible” and “greedy” (Wöhr & Wuketich, 2021). Attribution theory offers a possible explanation for such stigma; this is where a condition believed to be caused by controllable factors is more stigmatized than one that is deemed to be the result of uncontrollable factors (Quigley, 2022). That is, people will stigmatize gambling because they believe gambling behaviors can be controlled, a stigma still associated with other addictive behaviors such as drugs and alcohol.

As legalized forms of gambling become universal and easily accessed, the need for conversations amongst peers and parents grows to emphasize the need for prevention of gambling-related harms, as well as to create an open environment to talk and seek support if harms do subsequently arise. Over the years, an increase in Public Service Announcements (e.g., talk to your kids about drugs) has helped to increase awareness and acceptance of these conversations, while also contributing to some reduction in stigma and shame. Additionally, research related to open discussions about stigma-related topics has produced positive outcomes. Targeted interventions can certainly be effective in reducing stigma relating to mental health (Mehta et al., 2015), and a 2024 study found people who were randomly allocated to watch a brief online TED Talk on mental illness had more positive attitudes toward mental health and treatment seeking (Morton et al., 2024). Hence, it follows that more exposure to gambling-related harms may contribute to more positive attitudes about gambling issues and seeking help.

Children learn from their parents and peers at a very young age and begin modeling and learning a range of behaviors, including consumption patterns (Bandura, 2002). Some researchers suggest peer influence may happen as early as the pre-school years (Ahn & Nelson, 2015; Atkinson et al., 2015), while others suggest peers become agents for the consumer socialization process as early as 6 or 7 years old (John, 1999). Parents, however, are generally the first consumer socialization agents for teaching children rational consumption (Moschis & Churchill, 1978), yet it is worth noting the vast majority of parents are likely ill-equipped from a general knowledge standpoint to converse with their kids about why gambling should be an adult behavior and the ramifications of engaging in this behavior. Indeed, whether addressing age appropriateness for engaging in gambling



behavior or concepts of “RG/Safer Play/Positive Play,” there is virtually no context from our formal educational experience that explains what any of those things mean relative to gambling. Terminology aside, there is at least some educational context concerning alcohol consumption. From as early as elementary school, there are often discussions about some substances, whether legal or illegal, their addictive properties and their ability to cause harm even absent development of an addictive disorder.

For example, as noted previously, there is at least a broad understanding of what “responsible” behaviors and/or strategies exist to decrease the potential for harm to ourselves or others when consuming alcohol. Therefore, some guidance exists before individuals reach the legal age to engage in alcohol consumption. No such context exists for gambling, which is a barrier for both parent-child and peer discussions of the issue. Currently, knowing what RG/safer play/positive play means and how to implement such strategies requires the individual to proactively seek out that information.

To be most effective, the prevention aspects of RG ideally start early in childhood education (Grande-Gosende et al., 2020; Schwartz et al., 2020), where many peer relationships develop and then are reinforced through relevant messaging in advertising/promotion /programs, whether proffered by government as a public health message or by industry as a player sustainability and regulatory effort. This may greatly enhance the potential for positive peer influence to occur.

Research on the impact of gambling and gambling advertising on children reveals that children are, in fact, influenced by gambling advertisements, as well as the gambling behaviors of those within their family unit. In Australia, the *Growing Up in Australia* longitudinal study of Australian children found the most common gambling activity for 16–17-year-old children was private betting with friends or family (Warren & Yu, 2018). There were also teenagers who reported betting on sports and races with strict age restrictions requiring people to be 18 or over. Although it is illegal for Australians under the age of 18 to gamble, research indicates about half of all young people in Australia have participated in some type of gambling by the age of 15, increasing to three quarters of young people by age 19 (Delfabbro et al., 2009; Purdie et al., 2011). Therefore, the conversation with youth is an important one to start early because peer conversations may play a role in children’s behavior.

Limited research exists on understanding parents’ influence on their children’s gambling behavior. Studies show that parental attitudes toward and engagement in risky behaviors such as cigarette use and alcohol use, represent risk factors for adolescents’ involvement in those behaviors (Beyers et al., 2004). The same can be seen with gambling, where many adults of all ages casually report their first gambling activity was done in conjunction with, and at the encouragement, of their parents (Donati et al., 2023). For example, a parent may purchase a scratch-off lottery ticket, while their child scratches it off for “fun.” Recent research has confirmed via cross-sectional path models that parental gambling behavior has an important role to play in understanding their children’s gambling behaviors and severity (Donati et al., 2023). Donati and colleagues also report parental gambling frequency is found to be directly associated with adolescent gambling frequency, and indirectly linked to gambling problem severity. Hence, the results of any advertising research should consider whether the individual respondents were already gambling with friends and family prior to seeing any gambling advertising.

A recent NCAA study about student sports gambling behavior on campus demonstrates the effects of advertising on gambling behavior, particularly on certain demographics, as well as the fact that having “skin in the game” has an impact on likelihood of watching the game (NCAA, 2023); this itself has implications for exposure to advertising during the game. Given the early exposure that children and adolescents can have to gambling, it is imperative that effective prevention strategies are communicated from a young age and embedded into the education system.

As individuals mature, social interactions change. As adults, individuals may be well-socialized, but friendships are harder to make and maintain than ever before (Piazza,

2022). Peers do, however, remain an important component of people's lives and can serve as support through life changes and events. This may include positive (e.g., marriage, babies) as well as negative (e.g., divorce, death, financial problems) occurrences. As such, peers may offer perspective, advice, and more as adults navigate through the complexities in life. Hence, adult peers can play an important role in encouraging healthy gambling behaviors and providing support in many ways. We believe that because of peer influence, personal relationships have significant potential in ensuring positive gambling choices and avoiding potential gambling harms as adults. This may be particularly helpful within the social gambling space where one person may be exhibiting more control than the other (or others). In fact, we propose that peer support programs should be considered as a potential initiative of the gambling industry.

In sum, encouraging peer and parent conversations to establish healthy norms has significant potential for assisting individuals in determining their own behaviors relative to ensuring self-harm minimization. These conversations should begin in childhood and continue throughout adulthood. Peer-to-peer discussions among adults have the potential to encourage healthy gambling behaviors while discouraging practices that result in personal harm.

### **Conclusion**

This paper outlines the importance of advancing the discussion around RG, along with current concerns faced by a lack of clarity in definitions, as well as conflation with PG. It is proposed that decoupling RG and PG, redefining RG and ensuring effective conversations with people of all ages about RG are important considerations as the industry grows and seeks to develop appropriate messages and tools for players. Addressing these components will allow for increased prevention of gambling-related harms, effective public health initiatives, and more effective guidelines for the industry to follow in promoting RG practices.

### **Disclosures**

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