16 October 2026

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ATTN: Gambling Legislation Reform
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Subject: Submission to *Review and Reform of Western Australian Gambling Laws*

We provide our submission to the *Review and Reform of Western Australian Gambling Laws* coordinated by the Department of Local Government, Industry Regulation and Safety.

Healthway is the only State Government agency solely dedicated to health promotion and preventative health efforts in Western Australia. Our interest in this review focuses on prevention of gambling product harm and is aligned with our Strategic Plan 2024-2029*: Creating a heathier Western Australia together.*

Gambling product harm is a key preventative health issue – with regulation to protect Western Australians a key priority for mental health. Gambling product harm is also related to alcohol intake and discretionary funds available for healthy eating and physical activity.

In lieu of a dedicated lead agency with health expertise to support gambling product harm prevention, we offer our continuing support to maximise opportunities for preventing harm caused by commercial gambling products to improve the health and wellbeing of the Western Australian community.

Should you wish to discuss any aspect of our submission further, please do not hesitate to contact me on 08 9488 6839 or email carina.tan-vanbaren@healthway.wa.gov.au.

Yours sincerely

Carina Tan-Van Baren
Executive Director, Healthway

Contents

Conflict of interest declaration 3
About Healthway 3
Scope, terminology and framing 5
Introduction 6
Trends in gambling product losses 10
Gambling product industry in WA 16
Gambling products are not an ordinary commodity 21
Law reform opportunities 22
Commercial determinants of health 27
Community sentiment towards gambling 29
Recommendations 30
Conclusion 32
Appendix 33
References 35

Conflict of interest declaration

Healthway recognises the importance of protecting regulatory and other action from the influence of harmful industries, particularly as it relates to children and young people. The commercial determinants of health refers to the systems, practices, and pathways through which commercial actors drive health and equity.[1]

In 2018, Healthway was brought together with Western Australia's state-owned lottery, Lotterywest. Healthway remains an independent statutory body with its own Act, Board and funding source (separate from lotteries) and is part of the International Network of Health Promotion Foundations.[2, 3] In the interest of full transparency, Healthway provides the following declaration to address this conflict of interest with Lotterywest:

- Healthway does not claim total independence from the gambling industry in our submission. However, Healthway does claim total independence from the commercial gambling industry.
- There is a spectrum of products and associated harms, but all gambling products, including non-commercial and commercial products, can be harmful, although the scale of harm can vary with type of product and marketing tactics.
- Healthway operates as an independent entity from Lotterywest, with its own Act, source of funds (State Government appropriation) and Board.[4, 5] Healthway operates under the *Western Australian Health Promotion Foundation Act 2016.*[4, 5]
- Lotterywest is the employing agency for Healthway and provides employment and other support services such as office space and information technology services under a Service Level Agreement (SLA).[4] In 2024-25, Healthway payments to Lotterywest totalled $3.7 million for direct Healthway staff salary costs (92%) and for other ancillary services listed in the Service Level Agreement (8%).[4]
- The Western Australian (WA) government has responsibility for regulations and laws to protect the community from gambling product harm, including those relating to the casino, TABtouch, oncourse gambling and lotteries.
- Lotterywest is a state operated gambling business but is not considered to be commercial gambling. Commercial gambling refers to all for-profit gambling, such as casinos and online gambling on sport and racing, and often includes growth targets[6]. This definition excludes Lotterywest, as Lotterywest does not have a growth target as a key performance indicator[7] and returns all profits from the sale of Lotterywest gambling products to the WA community through statutory and discretionary community grants.
- Throughout this submission, when referring to gambling industry and products, unless otherwise stated, this includes the commercial gambling industry and their products.

About Healthway

Healthway is the only State Government agency solely dedicated to health promotion efforts in WA. We work across systems to create healthy environments, motivate behaviour change and influence policy to reduce and eliminate barriers to good health.

Healthway's work focuses on creating healthy environments to support the Western Australian community to make more informed choices about health and leading a healthy lifestyle, while also reducing the need for hospital and clinical care. We do this through health promotion campaigns and education, grants and partnerships with sports, arts, racing and community organisations, research, and advocating for and coordinating policy and systems change across government and non-government organisations.

History of Healthway

Healthway was established in 1991 initially under the *Tobacco Control Act 1990*, with the purpose of actively discouraging tobacco use, promoting good health, and preventing illness.[3, 5, 8-16] The *Tobacco Control Act 1990* required that, for an initial period of five years, Healthway must give priority to organisations and individuals (other than manufacturers or wholesalers of tobacco products) who had suffered hardship or foregone benefits as a result of a banned tobacco sponsorship.[14] In line with this requirement, Healthway began by replacing tobacco advertising and sponsorship with health messages via sponsorship of sport, arts and racing events, using funding from a specific tax on tobacco.[8, 9] By 1992, almost all tobacco sponsorship in WA was replaced with Healthway sponsorship.[9] In addition, Healthway offered, and continues to offer, several types of grant opportunities for research, sports, arts, racing and community projects.[8, 9, 11].

Healthway has a proud history of leading health promotion to combat harmful industries. Healthway has introduced strong policies to protect the community from the influence of harmful industries, for example, through the Co-Supporters Policy[17] (first adopted in 2004) and Minimum Health Requirements Policy[18] (first adopted in 2009). Since 2016, Healthway has operated under its own Act.[5]

Healthway's general position

Current approaches to gambling are failing many Western Australians. Gambling products cause harm to the physical, social and mental health of individuals, families and communities and are associated with reduced discretionary funds and higher levels of comorbid mental health disorders and substance abuse. As such, WA law reform for gambling product harm is directly relevant to Healthway's priority health areas, in particular 'promoting mental wellbeing' and 'preventing and reducing harm from alcohol'.[11]

Healthway does not seek to prohibit gambling products. Rather, Healthway supports strong policy, regulatory and legislative action to protect all Western Australians from the harms associated with gambling products — by taking a public health approach to commercial and non-commercial gambling products.[19] In lieu of a dedicated agency with sole remit for gambling product harm prevention in WA, Healthway supports action by both state and federal governments to protect against the harms of gambling products.

Healthway affirms the evidence that public education on its own is insufficient to change population behaviour, reinforces the notion of individual responsibility (e.g., 'Gamble Responsibly') and may undermine population support for regulatory protection from gambling

products.[20, 21] Protective regulation is essential for gambling products by reviewing proximity, time and price policy levers to reduce gambling product harm exposure.[21]

Scope, terminology and framing

Scope

Healthway fully supports the findings in the 2023 Murphy Report 'You win some, you lose more' pertaining to online gambling.[22] Our submission focuses on WA-based gambling operators and therefore does not cover sport and racing gambling that is not TABtouch related as distinct from mobile and online private providers.

Definitions

See Healthway Glossary, available here.

Framing

Gambling corporations use particular framings and narratives to normalise their harmful products, grow their reach and maximise profits for shareholders.[19, 23] These frames are pervasive and create stigma by attributing responsibility for gambling product harm to the individual[19, 20] and reduction of community support for regulatory action.[21, 24] For clarity, the Appendix provides our preferred terminology, adapted from guidance from the Alliance for Gambling Reform[25] and the New South Wales (NSW) Government.[26]

Introduction

Gambling in WA Snapshot

A snapshot of gambling in WA is provided below in Figure 1.



Figure 1: A snapshot of key gambling statistics in WA.

Supporting references, top to bottom statistics[27, 28, 27, 29, 28, 30, 31, 27].

Gambling product harms

Gambling product harm includes, but is not limited to, impacts on suicide[32]; domestic violence and child abuse[31, 33-37]; mental health problems[31, 38]; state economic burden[39]; alcohol consumption[40, 41]; homelessness[42]; overall life satisfaction[43]; and catastrophic financial loss and ruin[27, 31]. One of the key features of gambling problems is comorbidity with a range of other harmful behaviours or conditions, such as alcohol use, unhealthy eating and depression.[19, 38]

Figure 2 provides an overview of gambling product harms.

SUICIDE

In WA, 15 suicides per year may be attributed to gambling product harm

ALCOHOL

Of those experiencing gambling harm, 28 per cent also suffer alcohol use disorder

DV & CHILD ABUSE

Roughly **four in 10** experiencing gambling harm report being perpetrators of physical IPV

ECONOMIC BURDEN

Per capita social costs = $1,490



MENTAL HEALTH

More than four in 10 high risk gamblers lose their 'full enjoyment of life'

HOMELESSNESS

The severity of harmful gambling is linked to higher levels of homelessness

HARMS TO OTHERS

At least six other people will be affected by each person experiencing gambling product harm

FINANCIAL

Per capita loss in WA = $896 per year
Of those who gamble, this rises to $1270

Figure 2: Gambling product harm summary

References: Suicide[32, 44]; Domestic violence and child abuse[31, 33-37]; Mental health problems[31, 38]; State economy burden[39]; Alcohol consumption[40, 41]; Homelessness[42]; Disproportionate impacts[45]; Life satisfaction[43]; and Financial loss and ruin[27, 31].

The distribution of gambling product harms is provided in Figure 3.

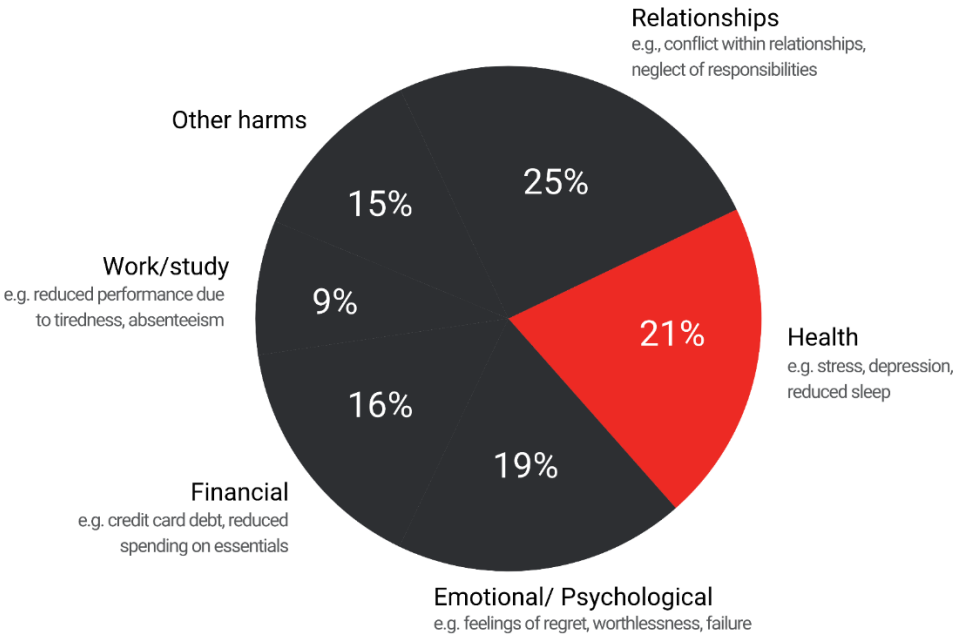


Figure 3: Distribution of gambling product harms in Australia[38].

Size of gambling product harm, including the harm to others

Gambling product harms are a significant public health issue. They account for around two-thirds of the burden of alcohol use and dependence, when measured on a disability-adjusted life years (DALY) basis.[38]

Gambling product harms ripple through communities, with non-gambling friends and family members impacted. For each person directly experiencing gambling product harm, at least six other persons will be impacted.[46, 47] More than 1 in 20 (6%) Australians report being harmed by someone else's gambling.[48] Those most commonly affected are family members (including spouses/partners, other relatives, siblings, former spouse/partners), friends and work colleagues.[48]. Further, the most commonly used scale to measure gambling risk is known to underestimate the wider harms (Problem Gambling Severity Index).[31, 48]. In WA, a significantly lower proportion of people report experiencing harm from another person's gambling, compared to the rest of Australia.[49]

Individuals experiencing high levels of gambling product harm report the greatest severity of personal harm. [29] However, the number of people experiencing low and moderate level gambling product harm is far greater and they contribute the majority of harm (85%) at the population level.[29] Figure 4 provides an outline of the prevalence of people experiencing gambling product harm at low, medium and high risk levels – as well as the distribution of gamblers not experiencing harm and people who do not gamble

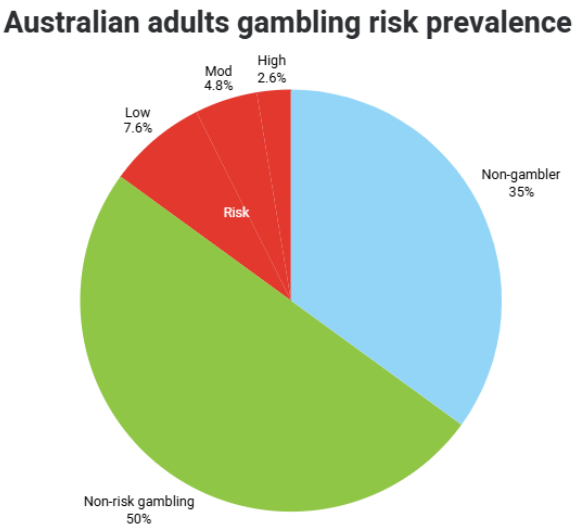


Figure 4: Risk profile of Australian adults according to the Problem Gambling Severity Index (PGSI), 2024 and adapted from [31].

Trends in gambling product losses

WA's comparative gambling product losses nationally and globally

Australians gamble at higher levels than any another nation.[28] Figure 5 positions WA into this comparison, highlighting that WA is doing very well compared to the rest of Australia.

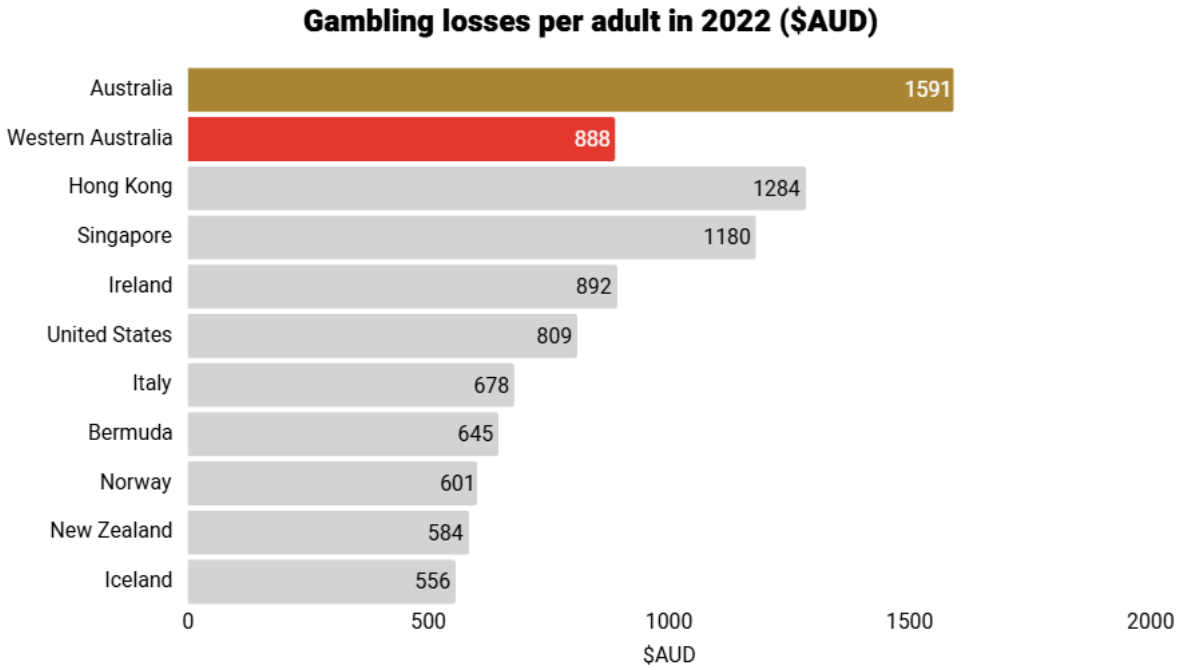


Figure 5: Gambling losses per adult, 2022.

Notes: Source for all countries except Australia and Western Australia: H2 Gambling Capital, cited in Australian Financial Review[50]. This data was converted from USD to AUD using ATO conversion rates.[51] Source for Australia and Western Australia is 2022-23 data from the Australian Gambling Statistics 40th Edition[27] – per capita gambling expenditure 2022-23.

Since 2000-01 in WA, gambling losses have grown by more than 60% from $1.22 billion to $2.04 billion, after adjusting for inflation.[27] Figure 6 provides an overview of trends in per capita losses on gambling products.

Although Western Australians lose less money than their Eastern states counterparts[27], yearly losses per Western Australian that gambles are equivalent to the average cost to insure a car for a year.[52] Rates of gambling are increasing alongside the size of gambling losses. This is occurring at the same time as rising costs of essential goods and services and declines in real wages.[53]

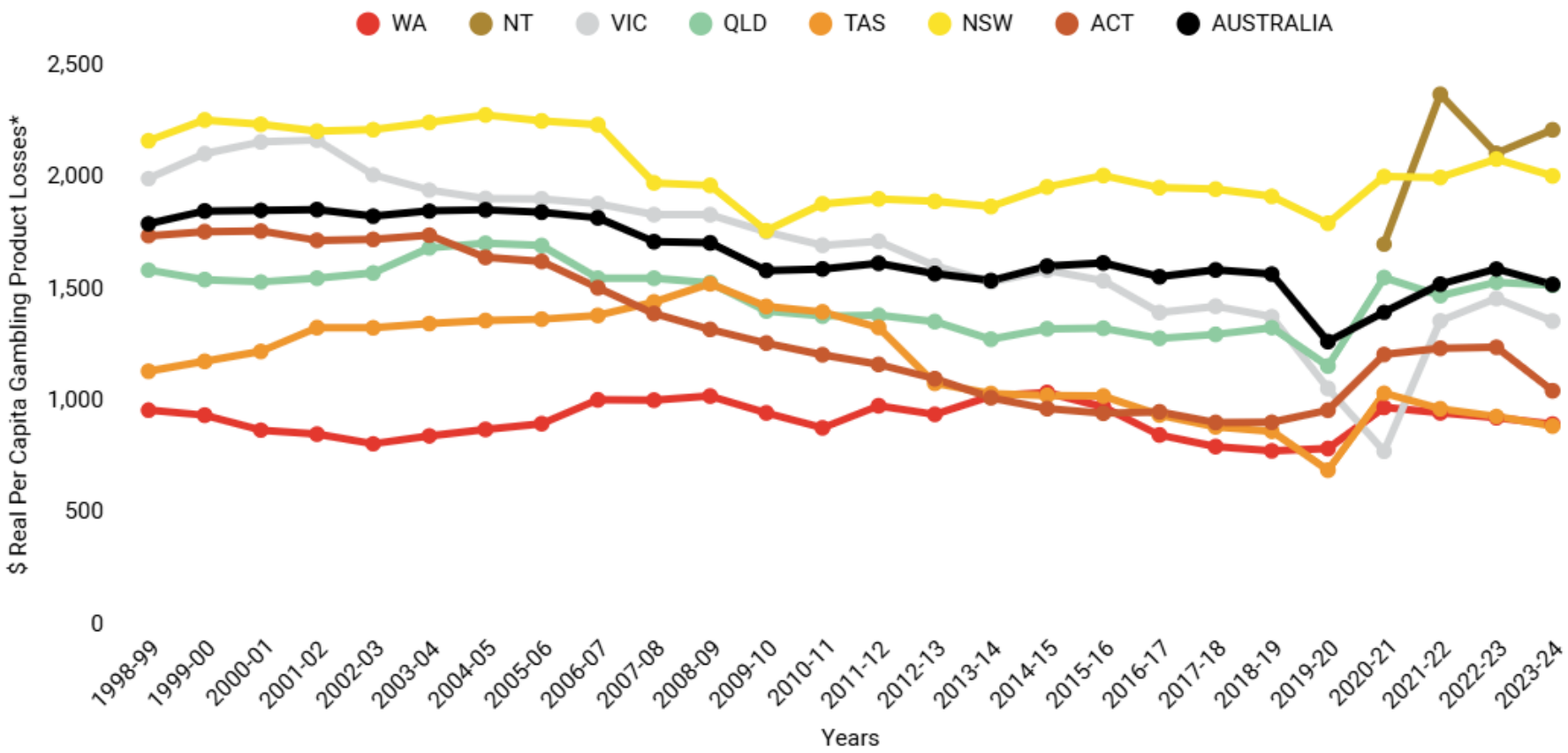


Figure 6: Losses on gambling products in Australia.

*Gambling products includes casinos, gaming machines, interactive gaming, Keno, minor gaming and wagering. *Based on real per capita losses, which adjusts for inflation. Source data[27]. Comparable data from the Northern Territory starts in 2019-20.*

Gambling product harms are minimal when losses are limited to 'frivolous' amounts. However, losses are far from frivolous for many, with per capita losses in 2023-24 for Western Australians at $896, rising to $1,270 per year when removing the population who do not gamble. [27, 31].

The reality is that large proportions of Western Australians gamble (see Figure 7) and large proportions of household budgets are lost to gambling (see Figure 8).

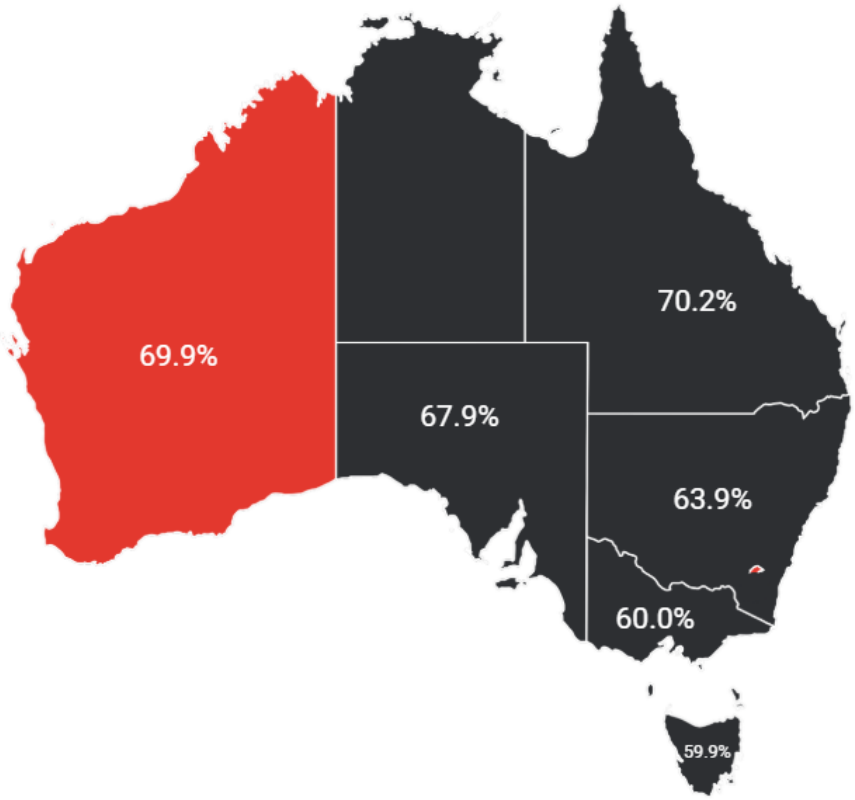


Figure 7: Proportion of Australian adults participating in any gambling activities at least once in the past 12 months, 2024.

Adapted from[31]. Source data[31].

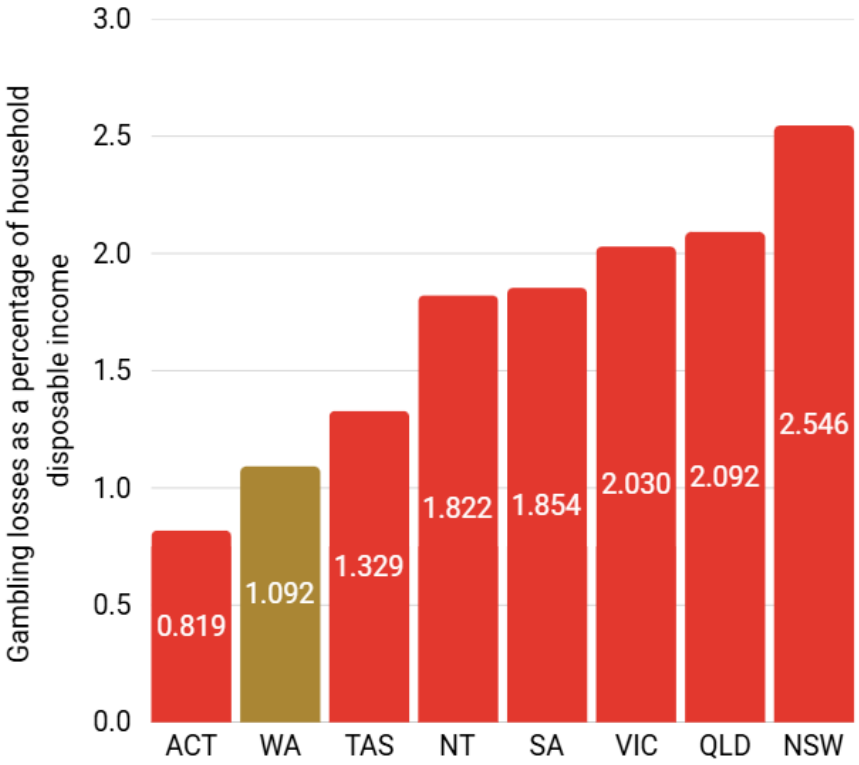


Figure 8: Gambling losses as a percentage of household disposable income. Comparison by jurisdiction. Source[27].

Teenage Gambling

Of particular concern for Healthway is the rising trend in gambling, and associated losses, among teenagers. One-third of Australian teenagers report gambling.[28] Annual losses from gambling is $87 per teenager per year[28] or $256 per year if limited to only those teenagers who report gambling.[28]

Teenagers – before and after they turn 18 years of age – are more likely to gamble than to play any of the most popular sports in their age group.[28] For example, teenagers aged 12-17 years are two and a half times more likely to gamble (30%) than play Australian Rules Football (12%).[28]

Sports gambling

Sports gambling trends are a key concern for men in particular. Between 2015 and 2022, there was a 66% increase nationally in the proportion of men involved in sports gambling.[43] In the 10 years to 2023-2024, losses on gambling on sport and racing (wagering) in WA increased considerably, from 24% to 42%.[27] See Figure 9.

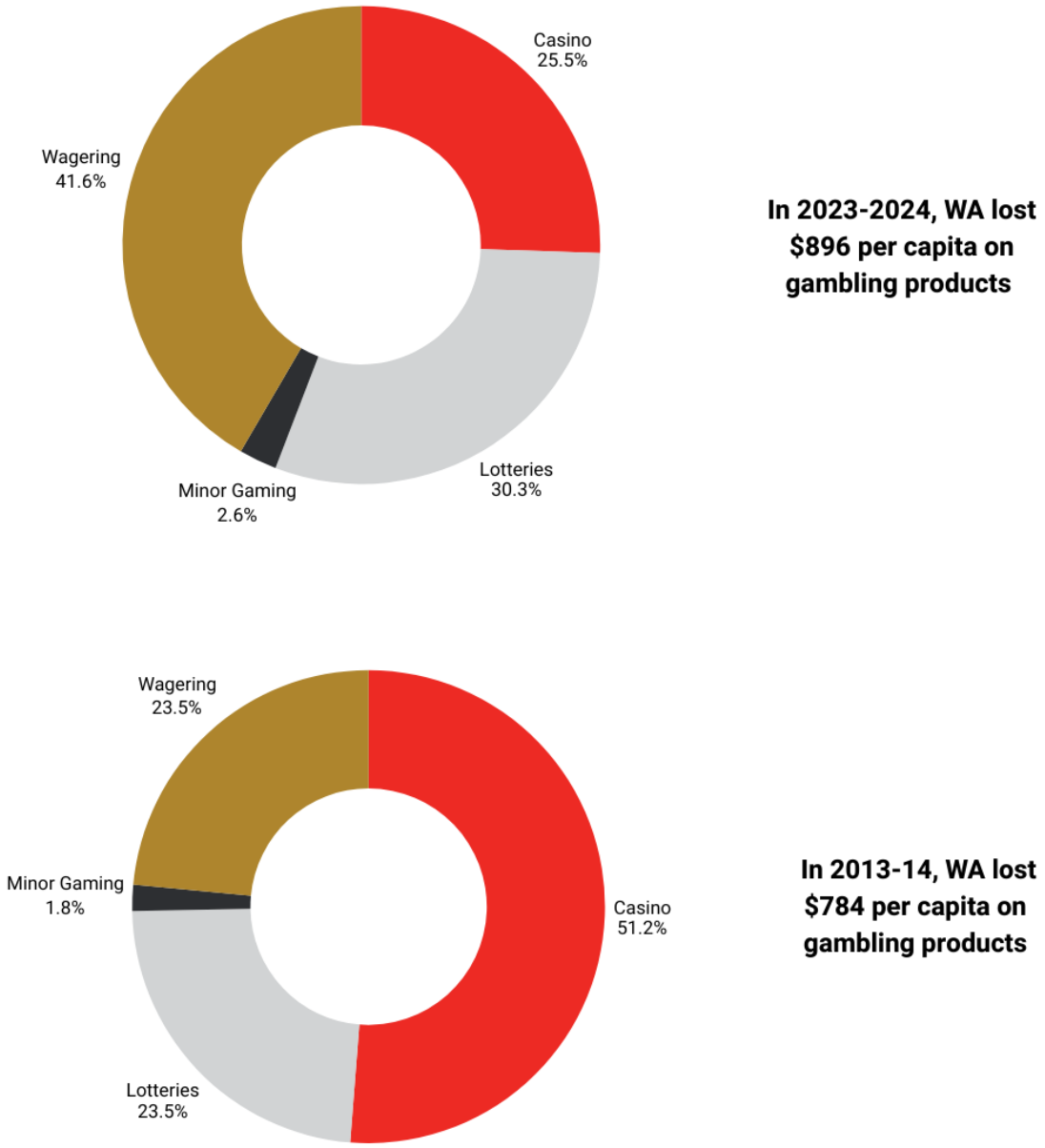


Figure 9: Losses on different types of gambling products in Western Australia – comparison between 2014 and 2024.

Source data[27]. Minor gaming includes raffles, bingo, lucky envelopes and the like. Wagering is defined as all legal forms of gambling on racing, sporting events and other approved events (e.g., elections). Wagering includes all the racing and sports gambling activities.

Per capita gambling losses in 2023-24 in WA were the second lowest across the country as outlined in Figure 10.

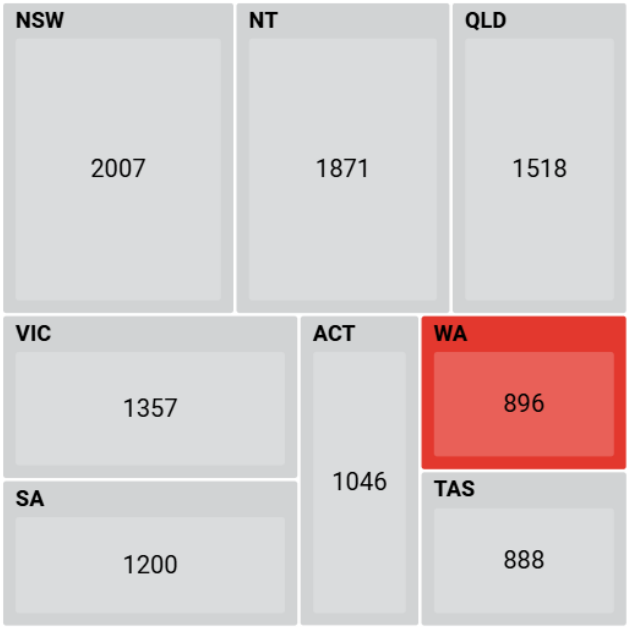


Figure 10: Treemap showing expenditure in 2023-24 on **all gambling products** across Australia ($AUD).

Gambling products includes casinos, gaming machines, interactive gaming, Keno, minor gaming and wagering. Based on real per capita expenditure. Source data[27]

Gambling product industry in WA

Common gambling products permitted in WA include:

- Electronic gambling machines (EGMs), limited to 2,500 at Perth Casino[27]
- Casino games at Perth Casino[27]
- Sports and race gambling via government operated TABtouch (in-person and online)[6]
- Scratchcards and lottery products via government operated Lotterywest[7] (in-person and online)
- Other gambling products including video lottery terminals[54], bingo and two-up.[55]

Electronic gambling machines (EGMs)

EGM use is the strongest predictor of people experiencing gambling harm.[49] In WA, EGMs are limited to Perth Casino – so do not proliferate through hotels and clubs throughout the WA community as they do in other states. Figure 11 provides an overview of the number of EGMs across Australia.

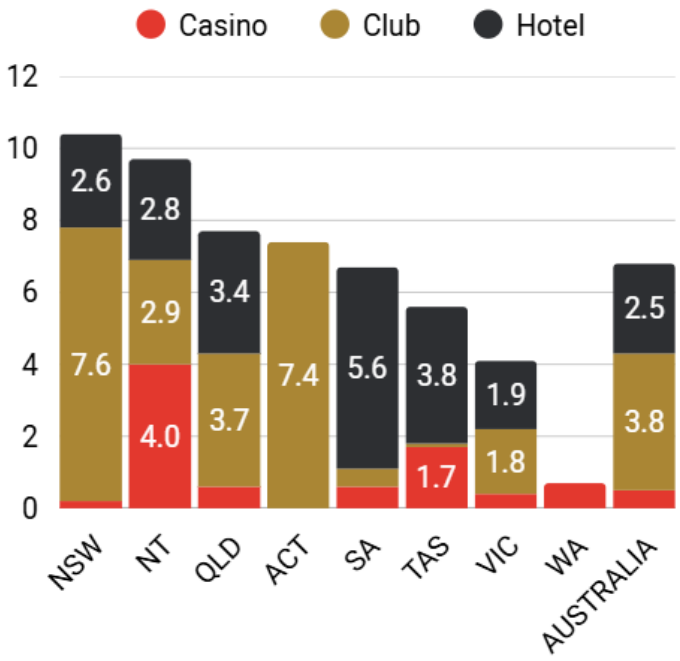


Figure 11: Number of electronic gambling machines per 1000 people across jurisdictions, 2023-2024.

Source data[27]. Population source data ABS.[56] In 2023-24, there were 186,188 electronic gambling machines in Australia, of which 1.2% (2553) were in Western Australia).

The relatively lower gambling product harms in WA[49] can largely be attributed to the strong public health approach of limiting the harms of EGMs by restricting them to the Perth Casino. There is strong state government support to maintain this protection[6, 49] People who experienced problems or harm from their own gambling in WA are significantly less likely to attribute their problems or harm to EGMs (15.2%) compared to the rest of Australia (41.3%).[49] Outside of WA, 53.9% of those harmed by another person's gambling reported that EGMs were the form that caused the most harm compared to 13.3% in WA.[49]

Registered gambling product operators

Of the 198 registered gambling operators in Australia, a disproportionate number of organisations are registered in the Northern Territory (NT) — especially the largest online gambling organisations. Recently, the NT government confirmed it is reviewing allegations of conflicts of interest within the NT Racing and Wagering Commission (NTRWC), revealed by Four Corners.[57]

Four gambling operators are based in WA (correct as at 11 November 2025).[30] These are: trading name (licence holder):

- PlayWest (PlayWest Pty Limited).
- Russell Collett (Collett, Russell).

- SteveBet (Mills, Stephen)
- TABtouch (Racing and Wagering Western Australia). [30]

Figure 12 provides an outline of where operators of gambling are located across Australia.[30]

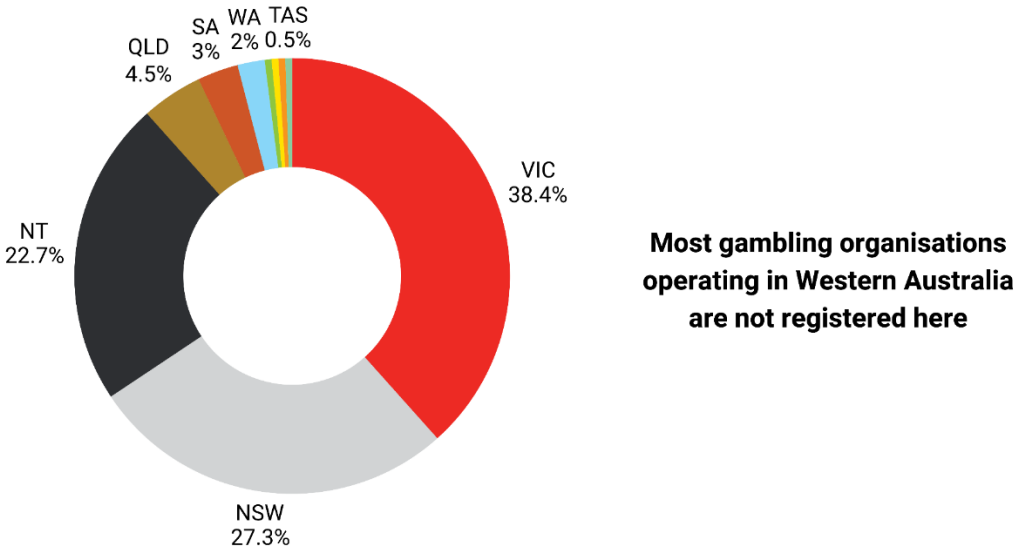


Figure 12: Location of gambling operators registered in Australia. Source data[30].

TABtouch – state operated gambling organisation for racing and sport gambling

Wagering (sport and race gambling) is the fastest growing gambling sector in WA, with growth adjusted for inflation of more than 45% between 2018-19 and 2022-23.[27]

Growth target

In the Racing and Wagering WA Annual Report for 2025,[6] the Performance Management Framework effectiveness indicators section includes an aim for growth, specifically: "Annual growth in TAB Turnover on Western Australian racing".[6] In recognising the harms associated with this form of gambling, the framework does not outline specific effectiveness indicators or key performance indicators for demonstrating harm reduction efforts.[6]

Board remuneration

The 2024-2025 annual report noted $576,402 in remuneration across 11 positions, for the Racing and Wagering WA Board and Committee.[6] By comparison, Healthway's board remuneration for seven members for the same period totalled about one-tenth this amount ($61,593).[4]

Advertising

In 2024-25, TABtouch spent $12.2 million on advertising to maintain its high brand awareness in community (91%).[6]

Venues

Cash gambling (note feeders) is possible on TABtouch electronic gambling terminals at TAB outlets. This facilitates rapid gambling and can be combined with alcohol consumption in some of its venues. Figure 13 provides an overview of the number of TABtouch venues in WA.

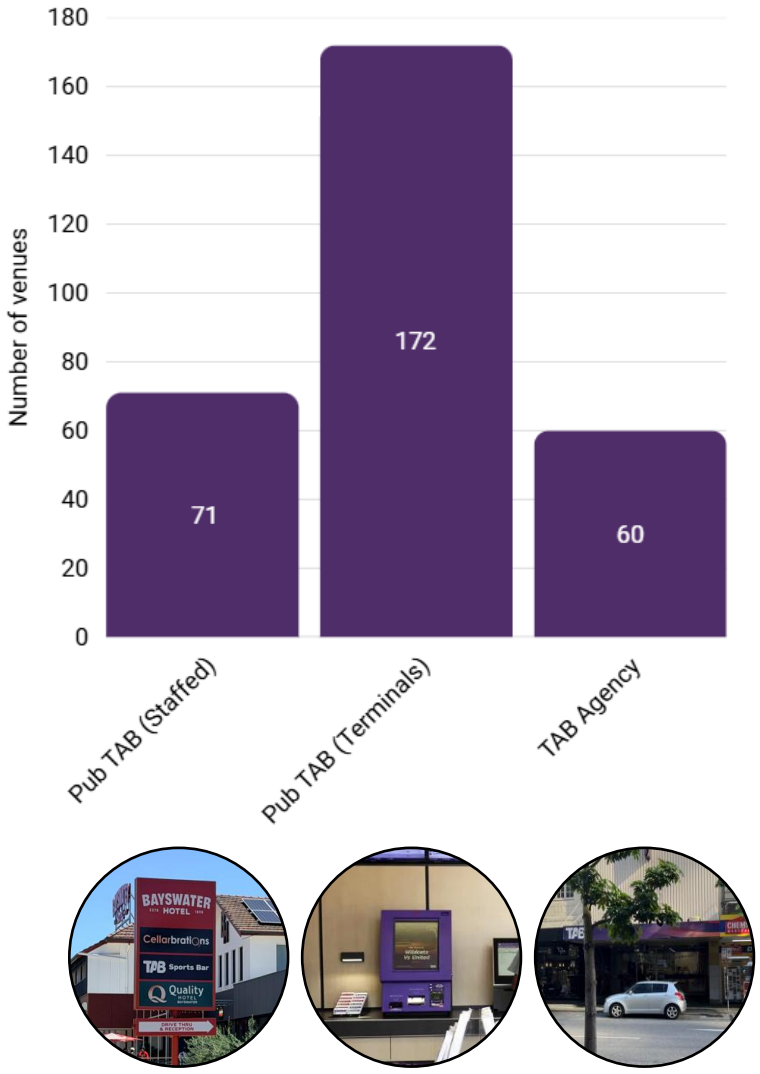


Figure 13: Estimated number of TABtouch venues in WA, by type.

Source data TABtouch – data manually extracted and estimated from Google embed map.[58]

Government income from gambling in Australia

Government perceived or actual dependence on gambling revenue may pose a challenge to reform as any significant reduction in harm will reduce revenues. However, WA is less reliant on

gambling taxes than other states such as NSW — which receives 6.5 % of its state tax revenue from gambling taxes.[59] The WA Government receives 2.3% of its state tax revenue from gambling taxes – see Figure 14.[59] This mainly comes from Lotteries (see Figure 15) which, as mentioned earlier, is returned to the WA community through statutory and community grants. Internationally, Finland is achieving reform by introducing reform incrementally, allowing the reduction in revenue to be managed over time.[60]

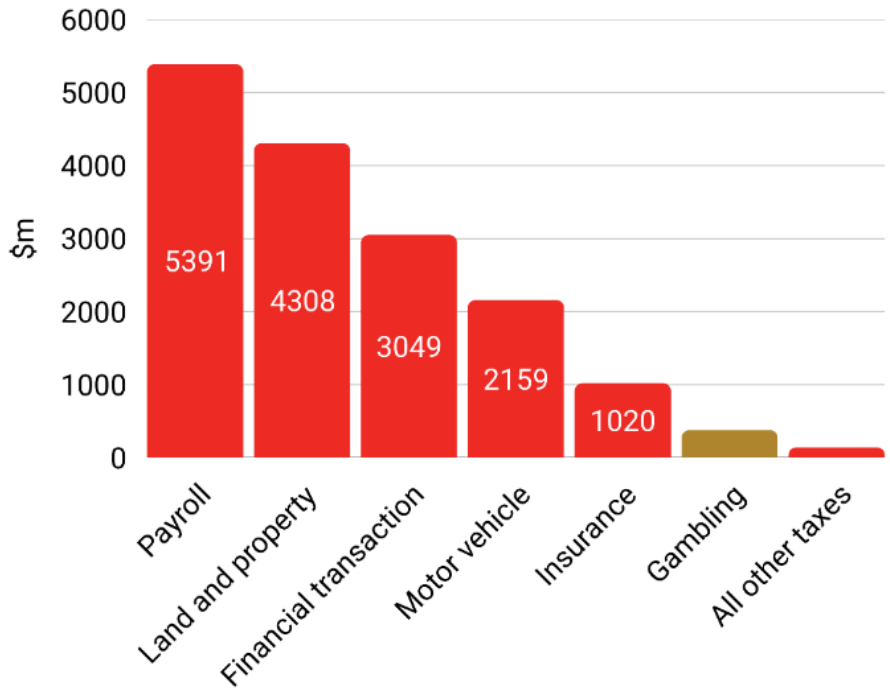
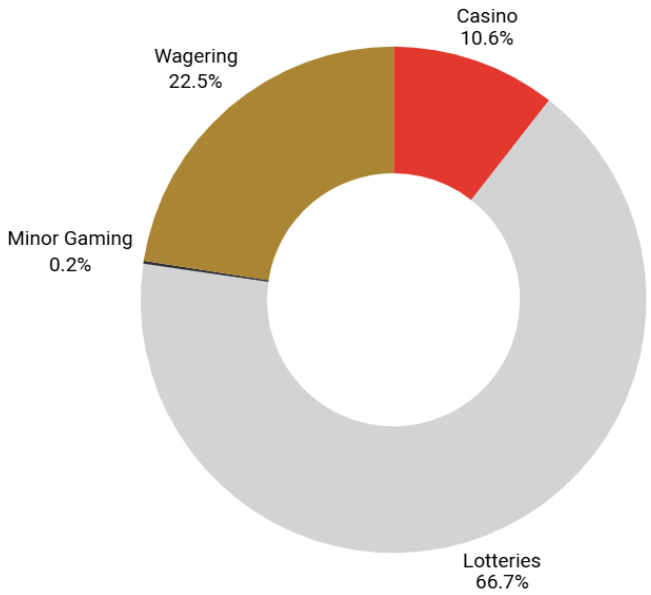


Figure 14: State and local government revenue (2023-2024) from various sources in WA ($mil)Source data ABS.[59]



Government revenue from gambling products exceeds half a billion dollars ($559 Million)

Figure 15: State government revenue from gambling products in WA 2023-24. Based on real government revenue from gambling. Source data[27]

In WA, gambling losses far exceed gambling tax revenue. See Figure 16.



Figure 16: Comparison of per capita losses and state and local government revenue via taxes from gambling products in WA 2023-24

*. *Gambling losses source data.[27]*

***Gambling tax source data,[59] adjusted to per capita data using ABS population of 3,030,000.2 in 2023-24.[56]*

Gambling products are not an ordinary commodity

In WA, gambling products have features that make them unlike most other commercially available harmful commodities, such as alcohol, ultra-processed food and tobacco.[19] Unlike these other commodities which also cause substantial health harm, gambling products are so

ubiquitous, they are the only legal product to have self-exclusion controls for individuals. This reinforces the need for stronger gambling product regulation to protect public health.[19]

There are no benefits to growing or maintaining the gambling product industry

Gambling taxes are regressive, contributing to cost-of-living pressures by reducing available funds, particularly for those experiencing the most disadvantage.[19, 61] Further, there is an opportunity cost to gambling products. The industry argues that gambling regulation liberalisation boosts jobs and economic activity and balances the harms from gambling, but this spending usually comes at the expense of other consumer spending.[62] Employment in the gambling industry may also result in a shift in employment from other – arguably more productive – economic sectors.[62, 63]

A staged decline in gambling product losses (expenditure) is the ideal goal – given the considerable spending on gambling products in WA and the levels of public concern relating to forms of gambling. When asked which form of gambling is the most harmful for concerned significant others, WA respondents were significantly higher on race gambling (31.1% vs 18.5% in the rest of Australia)[49].

Law reform opportunities

Price, proximity and time offer regulatory opportunities to reduce gambling product exposure and thus harm. Gambling products have unique features across ***price***, ***proximity*** and ***temporality***.[21]

- ***Price*** includes the taxes, subsidies and unit costs of a single gambling product.
- ***Proximity*** includes access to gambling in both physical locations and online.
- ***Temporality*** includes the time and age limits that apply to gambling products.

Price, proximity and temporality have been summarised elsewhere as 'accessibility'. See Figure 17.

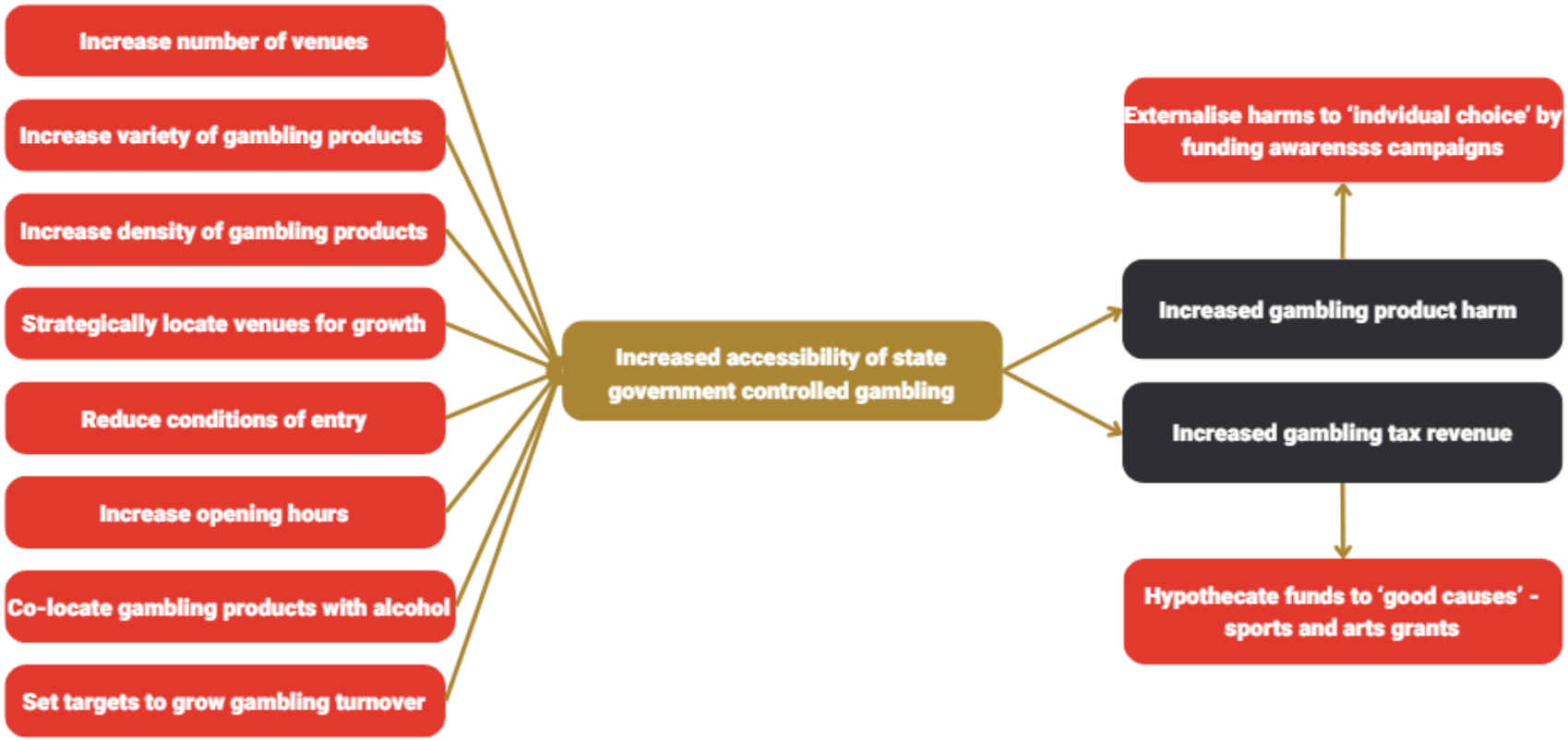


Figure 17: Roadmap for growth of gambling product harms through increasing accessibility. Red boxes highlight opportunities for reverse reform.

Price

Although there are fixed prices for single gambling products, an overall session of gambling does not have a fixed price because of the way that game structures and odds work. The true price of a gambling session is often unknown to the consumer[19] which sets gambling apart from other harmful product use.

Gambling has a unique price (economic) structure compared to other commodities in WA — with certain gambling taxes hypothecated as subsidies for gambling harm prevention and community grants.[64, 65] Hypothecating gambling revenues is characterised as primarily "a political tool to gain support for gambling, to silence criticism, and to move the focus away from the social costs of gambling to its tax benefits".[66]

Several state government funds relating to hypothecated gambling revenue and industry 'voluntary contributions' exist, including the Problem Gambling Support Fund (PGSF). This fund receives contributions from the gambling industry to support the activities of the Problem Gambling Support Services Committee (PGSSC).[65] This committee was established through the *Gaming and Wagering Commission Act WA (1987).*[67] The members of PGSSC include the gambling product industry (e.g., Crown Perth and WA Bookmakers Association) and representatives from the Mental Health Commission and Department of Communities. [64, 65]

Figure 18 provides an outline of selected stakeholders in gambling in WA – including their financial linkages between taxes, subsidies and grants. For example, Lotterywest provides community grants and TABtouch via Racing and Gaming WA provides funds to community sport.[64, 65]

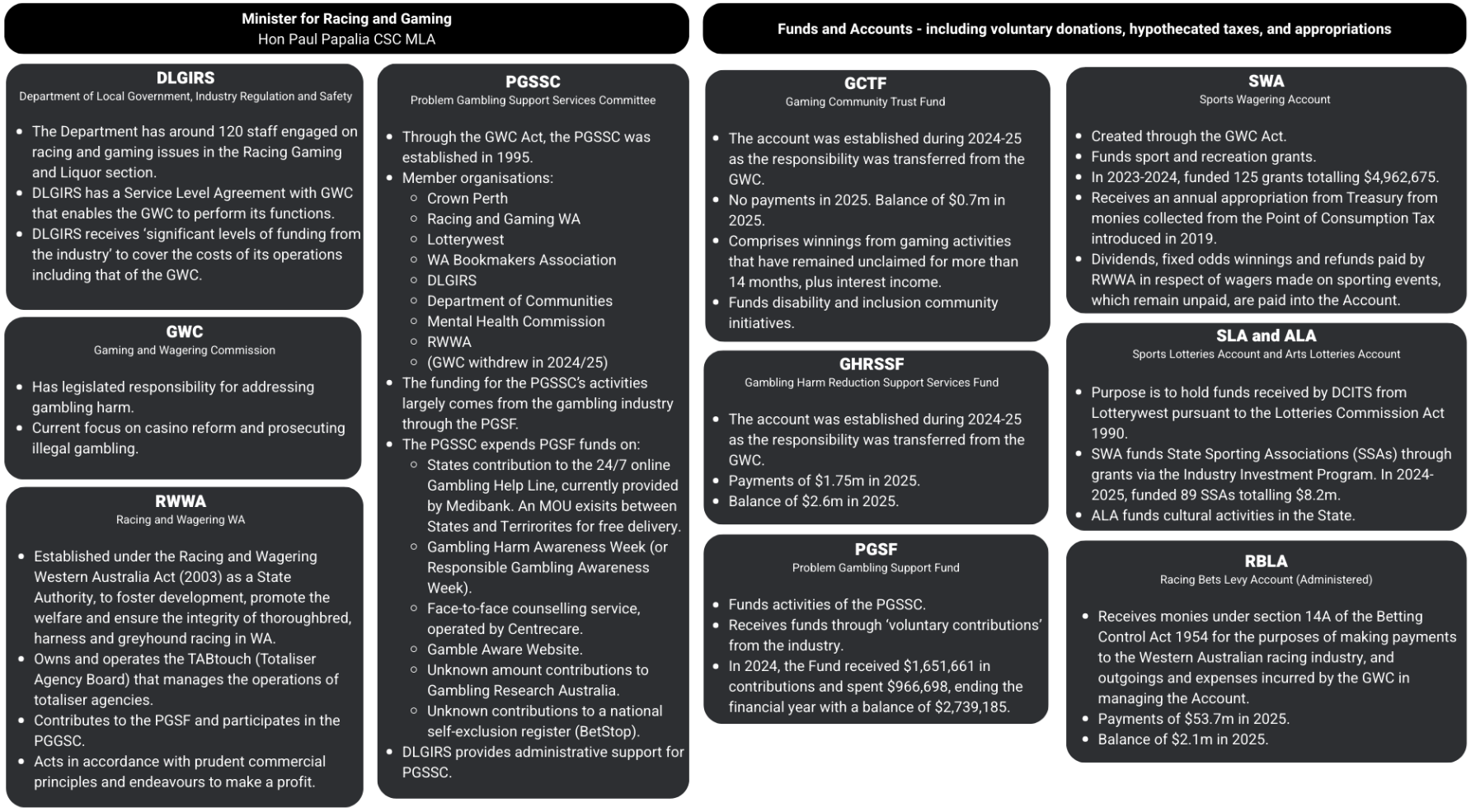


Figure 18: Government and commercial industry stakeholders in WA gambling and their financial relationships. Sources[64, 65]

Proximity

Physical proximity to gambling products is a key determinant of gambling behaviour. Unlike the rest of Australia, the WA community is somewhat protected from the harmful impacts of EGMs by restricting them to the Perth Casino.[27] This prevents a flood of EGMs in community settings, as is the case in other states such as New South Wales.

The state government operates two online apps that permit 24/7 access to gambling products: lotteries (Lotterywest) and sports and race betting (TABtouch). Both of these organisations also offer products in in-person products throughout WA.

Lotterywest has around 500 retail establishments.[7] Lotterywest sells lottery tickets and scratchcards, available throughout the day when shops with a permit to sell Lotterywest products are open.

TABtouch has around 300 outlets in WA across three types of in-venue models.[6, 58] One of these product types is a an electronic terminal that accepts cash. See Figure 19 for a photo of a TABtouch electronic terminal and venue.



Figure 19: TABtouch electronic terminal (left). TABtouch venue (right).

Photo Credit: Optus Stadium website. Photo adapted to black and white.

Temporality

Many gambling products can be played 24/7 (e.g., TABtouch) or for most hours of the day (e.g., Perth Casino). Opening hours presents a regulatory opportunity.

There is also a difference in the rate of loss between products (e.g., dollars per minute) and variability in the timing of outcomes following a gambling spend. For example, purchasing a gambling product on a greyhound race via TABtouch in a pub electronic terminal can be made using cash right up until the start of the race. This may produce an outcome within one minute (races are typically 40-50 seconds). This contrasts with buying a Saturday lottery ticket which may have days between the spend on the gambling product and the outcome.

Age limit for gambling in WA is 18 years, with the exception of Lotterywest scratch cards which can be purchased from the age of 16 years.[7] However, age verification is poorly enforced across some gambling products, particularly online, with one-third (30%) of 12-17 year olds admitting to gambling in the last year.[28]

Norway and Finland case studies: Setting loss limits for everyone.

Finland and Norway operate monopoly models, on the grounds that they can help to prevent fraud and money laundering, and channel proceeds to their host societies.[68] Finland has universal limits on how much can be gambled per day and per month to prevent "catastrophic" losses for online gambling.[69]

In Norway, restrictions on availability of EGMs occurred from 2006 to 2009 and included a ban on cash note acceptors and an initial temporary ban on EGMs, before a re-introduction of fewer and less aggressive machines under a state monopoly that requires users to register their gambling. [70-72] In doing so, Norway replaced harmful high-intensity slot machines[73] — similar to poker machines seen in many clubs, pubs and casinos in Australia — with machines that require users to register their gambling. Every Norwegian using an electronic gambling machines has to create a registered account, with maximum limits set on how much can be lost per day and per month, and the capacity to set a lower limit than the universal maximum.[71]

Through Norway's state-run EGM operators and registration system, they can make proactive phone calls to people who lose a lot of money. These people can then refer to social care and other support services. It has been referred to as a 'reverse VIP treatment'.[69]

Commercial determinants of health

The commercial determinants of health refers to the systems, practices, and pathways through which commercial actors drive health and equity.[1]

Corporations have a fiduciary responsibility to maximise profits for their shareholders.[19] The fiduciary imperative means commercial gambling organisations prioritise profits over public health.

The gambling ecosystem

While commercial gambling operators comprise the majority of the gambling industry, the broader commercial gambling industry (gambling ecosystem [19]) is intertwined with our major sporting codes, racing, local pubs and clubs, and with Australia's major television networks.[74]

The gambling industry also has a strong track record of political lobbying, public relations, political donations, funding research and setting research agendas, and other forms of direct and indirect influence to ensure minimal effective controls .[19, 74, 75]

Anticipating gambling industry response

The commercial gambling industry follows a corporate industry playbook of strategies to delay and deflect regulatory action that seeks to prevent and reduce gambling product harm.[20, 21, 74-80] Similar playbooks by other industries provide grounds for strong concern about commercial influences on gambling and gambling research.[79]

The following provides a non-exhaustive list of commonly used corporate industry tactics:

- **Denialism**. For example, despite compelling evidence to the contrary, the corporate gambling industry, often disputes a causal link between gambling machines and problem gambling"[81]
- **Post denialism.** A strategy that argues what is bad (e.g., unregulated gambling products) is actually good (e.g., for the economy, jobs, etc.).
- **Self-regulation.** Industry uses a smokescreen of "Corporate Social Responsibility" activities to divert attention from impactful regulations, providing alternate false solutions to impactful actions.[82, 83]
- **Alternate (unimpactful) solutions.** The gambling industry proposes alternate solutions such as individual responsibility and neoliberal arguments for freedom of business without regulation.[19, 74]
- **Delay due to 'lack of evidence'**. The commercial gambling industry purports the idea that gambling product harm is complex and that existing research does not provide sufficient grounds for interventions. Such a tactic serves to delay action. While evidence generation is important, it should not delay regulatory action to protect public health from gambling product harm.
- **Individual responsibility framing.** The gambling industry responds to gambling harm by referring to individual responsibility, rejecting industry-related causes of gambling harm such as advertising or problem products. [19, 84] This position is normalised through extensive advertising and creation of tag lines promoting the ineffective 'gamble responsibly' message.[24]
- **Donations.** The gambling industry often argues harms from gambling are offset by its voluntary contributions (donations) to good causes.[85] In Australia, donations to good causes are around 2% of revenues.[86]
- **Education programs.** This includes those that are run directly or indirectly by the relevant industry and related groups and often serve as a public relations exercuse by the industry[20]. There is little information available on any robust evaluations of such programs.
- **Fearmongering.** The industry has a track record of stoking community fears about unintended consequences of public health approaches to gambling product harms such as the creation of a black market and illicit gambling activity. A Grattan Institute report shows these fears are unfounded[87] and deflect from the risks associated with legal gambling.
- **Complexity**. Issues are labelled as complex despite clear evidence of simple, impactful regulatory solutions that reduce exposure to gambling, such as reducing access, proximity and density of gambling access and tightening age restrictions. Arguments around complexity include:
    - The problem affects a minority of the population and/or is declining.
    - The causes of gambling harm are complex, so we cannot blame a single product or product category; (keywords/phrases: 'demonisation'; 'no single solution'; 'no one size fits all').

- Consumption or use of the product makes only a small contribution to public health harms.
- Taxation and other population-level measures are too simple a solution to such a complex problem (key phrases: 'no one-size fits all'; 'no magic bullets').
- Claims that information, education and personal responsibility are the appropriate and/or most effective solutions[88]

Community sentiment towards gambling

In Australia, there are high levels of concern about the pervasiveness of gambling and gambling product harms and strong community support for protection against gambling product harm.[6, 89-92] In contrast, there are no grassroots movements demanding more availability of gambling, indicating an absence of community demand for gambling industry growth.[76]

A nationally representative sample of 1,765 Australian residents agreed there are '*too many opportunities for gambling nowadays*' (77%) and that gambling is '*dangerous for family life*' (68%).[93] In another similar survey, few Australians believe that it is appropriate for gambling companies to have commercial relationships with sport players, sporting clubs/organisations or media organisations.[94]

In another study of 455 Australian parents of children aged 11–17 years, more than two-thirds were concerned about the risks of gambling for their children (70%).[95]

A national survey of 1,003 Australians found that seven in 10 Australians (71%) agree that gambling ads on TV should be banned.[90] Just 7% of the WA sample disagreed with a ban on gambling advertising on television. [90]

Recommendations

Urgency

Swift action is essential to protect the WA community and is consistent with community expectations. While acknowledging that law reform takes time to develop, we suggest that a timeline for priority actions be set out. We have provided our priority recommendations below with immediate actions flagged in-text.

In line with repeated calls from the public health community for law reform on gambling harm prevention[78], and a global review of legislative trends,[96] we affirm the need for law reform and policy action to prevent gambling product harm.[97] Effective policy actions exist[98] and we should (and need to) learn from other public health areas (e.g., tobacco and alcohol control) that policy action is essential and that harmful industries should be removed from policymaking decisions on gambling harm prevention.[77, 78]

Harmful industry influence

1. To capitalise on Western Australia's leading position on gambling product harm control, establish and provide statutory funds to a **lead agency** for gambling product harm prevention in Western Australia, that is independent of industry influence and funding, with legislative and regulatory oversight of gambling product harm prevention and the funding of a comprehensive research program. This lead agency should also establish a broad alliance of support, independent of industry, to advocate for change to reduce gambling product harm and informed by a public health approach.
2. **Exclude the commercial gambling industry** from gambling product harm policy development and research. This approach should be based on the World Health Organization (WHO) Framework Convention for Tobacco Control (FCTC),[99] which has been adopted in 181 countries, including Australia.[99] Article 5.3 of the FCTC states, "In setting and implementing their public health policies with respect to tobacco control, Parties shall act to protect these policies from commercial and other vested interests of the tobacco industry in accordance with national law".[99]
3. **Ensure that laws prevent gambling product inducements**, such as free products and incentives to gamble, including at Perth Casino and TABtouch.
4. **Introduce regulations** to address algorithm and design features of games and marketing, such as regulating gambling product design features that increase harm, such as variable reward schedules, disguising losses as wins, and personalised marketing.

Electronic Gambling Machines

5. Maintain Western Australia's ban on **EGMs in communities**, restricting them to Perth Casino.
6. Pending state government legislation to introduce loss limits and pre-commitment, reduce the **maximum stake per gamble** on EGMs for example, to $1.[100] This is in line with a 2010 Productivity Commission recommendation that the maximum stake on poker machines be reduced from $10 to $1.[69, 100, 101]

Gambling product harm risk mitigation measures

7. Maintain Western Australia's restrictions on **brick-and-mortar gambling stores** not operated by TABtouch.
8. Reduce, then phase out **TABtouch electronic machines**, especially those in hotels, pubs and other venues that sell alcohol.
9. Strengthen resources for **services for people experiencing gambling product harm** (such as Centrecare).
10. Introduce mandatory **user registration** (also known as universal identification or 'single sign on'). Such a system would have strict privacy controls and could be delivered by a third-party authentication system via which gamblers can log in to the gambling mode they wish to use at any time (e.g., Perth Casino, TABtouch, Lotterywest). This would enable maximum loss limits, pre-commitment and reductions in maximum stakes across gambling modalities. Importantly, user registration should **not be linked to gambling company loyalty systems**. Furthermore, regulation should prohibit the use of gambling loyalty systems, consistent with prohibition on incentives to use gambling products more broadly.
11. Using this register of users, introduce regulation on **mandatory maximum loss limits** – a universally agreed reasonable amount of money that can be lost on EGMs and deposited into gambling accounts per month and year. These limits are designed to prevent catastrophic losses only and would have minimal impact on people who gamble in moderation. Voluntary pre-commitment schemes, such as those in Victoria,[72] have been found to be ineffective – partly because it is optional.[102]
12. Introduce regulation on **mandatory universal pre-commitment**, requiring users to set limits that are relevant to their circumstances, which are likely to be lower than the global maximum loss limits.
13. Regulate that all **gambling machine products become cashless/cardless at the point-of-gambling** (e.g., casino games, electronic gambling machines), linked to a pre-commitment system, with a requirement that all gamblers set a time and money limit on their gambling activity. Such a ban would not prohibit cash or debit card use but would require it to be converted to credit for use on the pre-commitment system.
14. An immediate opportunity with a simple mechanical change to EGMs and TABtouch terminals is to **remove banknote acceptors**, similar to South Australia and Tasmania.[69] Using these gambling products would require cash to be exchanged in-person at a manned counter.

Research

15. Introduce laws that require gambling companies to provide access to **de-identified raw data for use by gambling researchers** (independent of industry) to facilitate research, monitoring and surveillance.

Leadership

16. **Support the establishment of a national regulator** as well as the other recommendations in the Murphy report.[22] Just four (2%) gambling operators are registered in Western Australia. [30]

17. Explore a ban on gambling advertising on state-owned assets, such as public transport, similar to the 2018 ban on alcohol advertising on public transport assets.
18. Establish a **WA Parliamentary Friends of Gambling Product Harm Prevention** (or similar) that is independent of the gambling industry. Such groups have been established for gambling industry, for example, the Parliamentary Friends of Thoroughbred Racing is in part set up to "…celebrate the economic, cultural, and community benefits that thoroughbred racing delivers across metropolitan and regional WA".[103] A gambling product harm prevention group could raise the political importance of gambling harm prevention in WA and unite organisations with an interest in the health, social and economic impacts of gambling products.
19. Through the lead agency and engagement with the Parliamentary Friends Group, provide funds to implement a **Gambling Product Harm Prevention Strategy and Action Plan** that takes a public health approach for reducing gambling product harms in WA. This should outline specific and tangible policy actions that will be taken, including immediate urgent reforms, using a range of policy, regulatory and legislative (i.e. upstream) approaches.

Language and framing

20. State government framing should introduce a **cross-government framing guide** to remove all references to individual responsibility such as 'gamble responsibly'. Other ways gambling product harm is framed should also be reviewed. Appendix 1 provides a starting point.
21. Any **mandatory warnings and taglines** should be based on independent research (independent of commercial gambling industry and their funding) and comprehensive consultation, with appropriate independent evaluation. Such taglines would likely draw more parallels with tobacco product warnings that emphasise product harms and reduce victim blaming.[104]

Conclusion

Gambling product harm is not just a cost of living and economic issue, it is also a preventative health issue that impacts suicide, domestic and family violence, mental health and ambulance ramping. Western Australia already leads the nation in preventing gambling product losses — but we're still doing poorly when compared globally. By strengthening and accelerating law reform, we can minimise gambling product harm and tackle the big issues in relation to health and cost-of-living. Our 21 recommendations are focused on limiting gambling product harm and positioning Western Australia as a leader on gambling law reform.

Appendix

Table 1: A shift in terminology to support re-framing gambling product harm

Poor terminology/ commercial gambling industry framing	**Our terminology**	**Explanation**
Problem gambler Gambling addict Responsible gambling	Highest risk gambling People experiencing gambling product harm. People affected by gambling issues	Industry framing places all the blame with the individual and attributes no responsibility on the industry. It contributes to the stigmatisation of people experiencing gambling product harm and there is no strong evidence to show that it is effective in changing behaviour. The term 'problem gambling' is commonly used to describe the highest risk category of the Problem Gambling Severity Index, which is based on clinical criteria for addiction. Rather than problem gambling, use 'highest risk gambling', where possible, in reference to this category.[22]
Gambling harm	Gambling product harm	'Gambling harm' is ambiguous to the cause of harm. We instead adopt 'Gambling product harm' to emphasise the *product* is what causes the harm.
Players Playing	Users Using We use "people targeted by gambling products", where possible.	Industry framing as "playing" make gambling products sound fun and innocent.
Gaming	Gambling	Gaming implies fun, gambling has serious consequences and impacts.
Anti-gambling	Gambling reform organisation or advocate	Anti-gambling is factually incorrect, as gambling product harm prevention advocates (e.g., health promotion advocates) are *not* advocating for prohibition/ bans on gambling, but instead, regulatory reforms to protect people targeted by gambling products.
Vulnerable communities	Most stressed communities	People will not necessarily identify with being considered poor or disadvantaged but will often identify with being under stress. This allows us to describe their situation, without alienating them. Using the term 'vulnerable communities' also implies that gambling product harm is only associated with people experiencing disadvantage.

Victims of gambling products	People targeted by gambling products	The term "victim" is disempowering and contributes to the narrative of individual responsibility and blame. "Target" allows us to express the harm in a less patronising way and also explain that none of this happens by accident. If there is a target, there has to be a shooter, and that shooter deliberately wanted to cause harm. It is also expandable as a term, so we can eventually start to talk about poker machines targeting stressed families etc.
Gambling expenditure	Gambling losses	Expenditure implies gambling is something that can be budgeted for or controlled. However, when expenditure is used in reports, it means losses. Turnover is the term that refers to losses plus winnings.
Betting	Gambling	Betting is the industry term, along with 'punting', 'flutter' and other such terms.
Safer gambling	Relative harm from gambling products	No gambling products are safe. Terms such as "safer gambling" serve to promote gambling, rather than to prevent and reduce gambling product harms. All gambling products can be harmful, it is the degree of regulation on these harmful products that must be increased. For example, there is a relative difference in harm between electronic gambling machines that have mandatory pre-commitment and those that do not.
Expenditure	Losses	This is the total amount gambled, minus winnings. It is also referred to as gross gambling revenue; however, we will use the term losses.
Electronic gaming machines	Electronic gambling machines	Includes machines like poker machines in Australia, fixed-odds betting terminals (FOBTs) in the UK, interactive video terminals in Norway and video lottery terminals in Finland.

Guide adapted from Alliance for Gambling Reform[25] and NSW Government.[26]

References

1. Gilmore AB, Fabbri A, Baum F, Bertscher A, Bondy K, Chang H-J, et al. Defining and conceptualising the commercial determinants of health. The Lancet. 2023;401(10383):1194-213.

2. International Network of Health Promotion Foundations (INHPF). About INHPF. International Network of Health Promotion Foundations. Accessed 04/12/2025. Available from: https://inhpf.org/. 2025.

3. Schang LK, Czabanowska KM, Lin V. Securing funds for health promotion: lessons from health promotion foundations based on experiences from Austria, Australia, Germany, Hungary and Switzerland. Health Promotion International. 2012;27(2):295-305.

4. Healthway. 2024-25 Annual Report. Creating a healthier WA together. Accessed 28/10/2025. Available from: https://www.healthway.wa.gov.au/wp-content/uploads/Healthway-Annual_Report_DIGITAL-Final.pdf. 2025.

5. Western Australian Health Promotion Foundation (Healthway). Western Australian Health Promotion Foundation Act 2016. Portfolio: Minister for Preventative Health. Currency 01/09/2016. Accessed 28/10/2025. Available from: https://www.legislation.wa.gov.au/legislation/statutes.nsf/main_mrtitle_13742_homepage.html. 2016.

6. Racing and Wagering Western Australia. 2025 Annual Report. Accessed 13/11/2025. Available from: https://www.rwwa.com.au/docs/rwwalibraries/default-document-library/rwwa-annual-report-2024---2025.pdf?sfvrsn=a26d08bc_1. 2025.

7. Lotterywest. Annual Report. 2024-25. Accessed 14/11/2025. Available from: https://cdn.sanity.io/files/cabqvweh/production/04b2efb632f9e9a670a26a06be69ffcc2b906f42.pdf. 2025.

8. Holman CDAJ, Donovan RJ, Corti B. Evaluating projects funded by the Western Australian Health Promotion Foundation: a systematic approach. Health Promotion International. 1993;8(3):199-208.

9. Giles-Corti B, Clarkson JP, Donovan RJ, Frizzell SK, Carroll AM, Pikora T, et al. Creating Smoke-Free Environments in Recreational Settings. https://www.jstor.org/stable/45319793. Health Education & Behavior. 2001;28(3):341-51.

10. Sung B, Phau I, Cheah I, Teah K. Critical success factors of public health sponsorship in Australia. Health Promot Int. 2020;35(1):42-9.

11. Healthway. Strategic Plan 2024-2029 Creating a healthier Western Australia together. Accessed 24/04/2025. Available from: https://www.healthway.wa.gov.au/wp-content/uploads/Healthway-s-Strategic-Plan-Feb-2024-FINAL-version.pdf. 2024.

12. Sung B, Phau I, Cheah I, Teah K. Critical success factors of public health sponsorship in Australia. Health Promotion International. 2020;35(1):42-9.

13. Giles-Corti B, Donovan RJ, Frizzell S, Jalleh G, Clarkson J. Increasing the reach of health sponsorship: using a "sponsorship kit" to promote health. Am J Health Promot. 2000;15(2):126-9, iii.

14. Holman CDAJ, Donovan RJ, Corti B, Jalleh G, Frizzell SK, Carroll AM. Banning Tobacco Sponsorship: Replacing Tobacco with Health Messages and Creating Health-Promoting Environments. https://www.jstor.org/stable/20207286. Tobacco Control. 1997;6(2):115-21.

15. Holman CDAJ, Donovan RJ, Corti B, Jalleh G, Frizzell SK, Carroll AM. Evaluating projects funded by the Western Australian Health Promotion Foundation: first results. Health Promotion International. 1996;11(2):75-88.

16. Corti B, Holman CDJ, Donovan RJ, Frizzell SK, Carroll AM. Using sponsorship to create healthy environments for sport, racing and arts venues in Western Australia. Health Promotion International 10(3): 185-197. https://www.jstor.org/stable/45152256. 1995.

17. Healthway. Healthway Co-Suppporters Policy. P1-3. First adopted in 2004. Version approved 14/05/2025. Accessed 21/10/2025. Available from: https://www.healthway.wa.gov.au/wp-content/uploads/Co-Supporters-Policy-Effective-May-2025.pdf. 2025.

18. Healthway. Policy Position: Minimum Health Requirements. Last update: September 2024. Accessed 21/10/2025. Available from: https://www.healthway.wa.gov.au/wp-content/uploads/Minimum-Health-Requirements-Policy-September-2024-Intranet-Edition.pdf. 2024.

19. Wardle H, Degenhardt L, Marionneau V, Reith G, Livingstone C, Sparrow M, et al. The Lancet Public Health Commission on gambling. The Lancet Public Health. 2024;9(11):e950-e94.

20. van Schalkwyk MCI, Hawkins B, Petticrew M. The politics and fantasy of the gambling education discourse: An analysis of gambling industry-funded youth education programmes in the United Kingdom. SSM - Population Health. 2022;18:101122.

21. Ennis G. Dark PR: how corporate disinformation undermines our health and the environment. . Wakefield, Québec: Daraja Press; 2023.

22. Parliament of Australia. Murphy Report. You win some, you lose more. Online gambling and its impacts on those experiencing gambling harm. ISBN 978-1-76092-518-5. Canberra, Australia. Standing Committee on Social Policy and Legal Affairs. Published June 2023. Accessed 07/07/2025. Available from: https://www.aph.gov.au/Parliamentary_Business/Committees/House/Social_Policy_and_Legal_Affairs/Onlinegamblingimpacts/Report. 2023.

23. Livingstone C. The End of 'Responsible Gambling': Reinvigorating Gambling Studies. Critical Gambling Studies. 2023;4(2):1-14.

24. Marko S, Thomas S, Robinson K, Daube M. Gamblers' perceptions of responsibility for gambling harm: a critical qualitative inquiry. BMC Public Health. 2022;22.

25. Alliance for Gambling Reform. Quick Reference Language Guide September 2020. Accessed 30/10/2025. Available from: https://www.agr.org.au/_files/ugd/f3b93a_c2a93ad380fd43daae4b8d0e6ee8e4c2.pdf. 2020.

26. NSW Government. How we talk about gambling makes a difference. GambleAware NSW Government. Accessed 10/11/2025. Available

from: https://www.gambleaware.nsw.gov.au/for-professionals/for-media-professionals/using-safe-and-respectful-language. 2025.

27. Queensland Government Statistician's Office, Queensland Treasury. Australian Gambling Statistics, 40th edition, 1998–99 to 2023–24. State tables. Prepared by Queensland Government Statistician's Office, Queensland Treasury. ISSN: 1833-6337. Accessed 27/10/2025. Available from: https://www.qgso.qld.gov.au/issues/2646/australian-gambling-statistics-40th-edn-1998-99-2023-24-state-tables.pdf. 2025.

28. Saunders M, Harrington M. Teenage gambling in Australia. Rates of expenditure and participation among 12-19-year-olds. The Australia Institute. Accessed 28/04/2025. Available from: https://australiainstitute.org.au/wp-content/uploads/2025/04/P1786-Teenage-gambling-in-Australia-Web.pdf. 2025.

29. Browne M, Greer N, Rawat V, Rockloff M. A population-level metric for gambling-related harm. International Gambling Studies. 2017;17(2):163-75.

30. Australian Communications and Media Authority. Check if a gambling operator is legal. Accessed 11/11/2025. Available from: https://www.acma.gov.au/check-if-gambling-operator-legal. 2025.

31. Gabriel Tillman, Rohann Irving, Sethini Wickramasinghe, Tanvi Pappu, Mikayla Budinski, Nancy Greer, et al. National Gambling Prevalence Study Pilot 2024. Australian Institute of Family Studies. Published September 2025. Accessed 23/10/2025. Available from: https://aifs.gov.au/research/research-snapshots/national-gambling-prevalence-study-pilot-2024. 2025.

32. Rintoul A, Dwyer J, Millar C, Bugeja L, Nguyen H. Gambling-related suicide in Victoria, Australia: a population-based cross-sectional study. The Lancet Regional Health - Western Pacific. 2023;41:100903.

33. Dowling N, Suomi A, Jackson A, Lavis T, Patford J, Cockman S, et al. Problem Gambling and Intimate Partner Violence: A Systematic Review and Meta-Analysis. Trauma Violence Abuse. 2016;17(1):43-61.

34. Afifi TO, Brownridge DA, MacMillan H, Sareen J. The relationship of gambling to intimate partner violence and child maltreatment in a nationally representative sample. J Psychiatr Res. 2010;44(5):331-7.

35. Forsdike K, O'Sullivan G, Hooker L. Major sports events and domestic violence: A systematic review. Health Soc Care Community. 2022;30(6):e3670-e85.

36. Livingstone M. The association between State of Origin and assaults in two Australian states. Centre for Alcohol Policy Research School of Psychology and Public Health. Foundation for Alcohol Research and Education. La Trobe University. Published June 2018. Accessed 14/11/2025. Available from: https://fare.org.au/wp-content/uploads/The-association-between-State-of-Origin-and-assaults-in-two-Australian-states-noEM.pdf. 2018.

37. Andrew Frost. Insights from Literature. Sports and 'spikes': Do major sporting events increase violence in the home? Queensland Centre for Domestic and Family Violence Research. Published September 2018. Accessed 14/11/2025. Available from: https://noviolence.org.au/wp-content/uploads/2018/09/SAS.pdf. 2018.

38. Browne M, Langham E, Rawat V, Greer N, Li E, Rose J, et al. Assessing gambling-related harm in Victoria: a public health perspective, Victorian Responsible Gambling Foundation, Melbourne. Published April 2016. Accessed 27/10/2025. Available from: https://responsiblegambling.vic.gov.au/resources/publications/assessing-gambling-related-harm-in-victoria-a-public-health-perspective-69/. 2016.

39. Browne M, Greer N, Armstrong T, Doran C, Kinchin I, Langham E, et al. The social cost of gambling to Victoria. Victorian Responsible Gambling Foundation. Published November 2017. Accessed 14/11/2025. Available from: https://responsiblegambling.vic.gov.au/resources/publications/the-social-cost-of-gambling-to-victoria-121/. 2017.

40. Lorains FK, Cowlishaw S, Thomas SA. Prevalence of comorbid disorders in problem and pathological gambling: systematic review and meta-analysis of population surveys. Addiction. 2011;106(3):490-8.

41. Leino T, Torsheim T, Griffiths MD, Pallesen S. The relationship between substance use disorder and gambling disorder: A nationwide longitudinal health registry study. Scand J Public Health. 2023;51(1):28-34.

42. Vandenberg B, Livingstone C, Carter A, O'Brien K. Gambling and homelessness: A systematic review and meta-analysis of prevalence. Addictive Behaviors. 2022;125.

43. Wilkins R, Botha F, Laß I, Peyton K. The Household, Income and Labour Dynamics in Australia Survey: Selected Findings from Waves 1 to 22. The 19th Annual Statistical Report of the HILDA Survey. Melbourne Institute of Applied Economic and Social Research, The University of Melbourne. Accessed 12/11/2025. Available from: https://melbourneinstitute.unimelb.edu.au/__data/assets/pdf_file/0003/5229912/2024-HILDA-Statistical-Report.pdf. 2024.

44. Reith G, Wardle H, Gilmore I. Gambling harm: a global problem requiring global solutions. The Lancet. 2019;394(10205):1212-4.

45. Rintoul A, Livingstone C, Mellor A, Jolley D. Modelling vulnerability to gambling related harm: How disadvantage predicts gambling losses. Addiction Research and Theory. 2013;21:329-38.

46. Sulkunen P, Babor TF, Cisneros Örnberg J, Egerer M, Hellman M, Livingstone C, et al. Setting Limits: Gambling, Science and Public Policy—summary of results. Addiction. 2021;116(1):32-40.

47. Goodwin B, Browne M, Rockloff M, Rose J. A typical problem gambler affects six others. International Gambling Studies. 2017:1-20.

48. Hing N, Russell AMT, Browne M, Rockloff M, Greer N, Rawat V, et al. The second national study of interactive gambling in Australia (2019–20). Gambling Research Australia. Accessed 17/11/2025. Available from: https://webarchive.nla.gov.au/awa/20251028223853/https://www.gamblingresearch.org.au/publications/second-national-study-interactive-gambling-australia-2019-20. 2021.

49. Russell AMT, Browne M, Hing N, Rockloff M, Newall P, Dowling NA, et al. Electronic gaming machine accessibility and gambling problems: A natural policy experiment. Journal of Behavioral Addictions. 2023;12(3):721-32.

50. Mark Di Stefano, Samantha Hutchkinson. Australia's pokies addiction explained in four charts. Australian Financial Review. Published 13/02/2023. Accessed 27/10/2025. Available from: https://www.afr.com/companies/games-and-wagering/what-will-happen-if-pokies-go-cashless-20221212-p5c5os 2023.

51. Office AT. Foreign currency exchange rates for the year ending 31 December 2022. Foreign currency equivalent to $1 Aust. Last updated 11/01/2023. Accessed 27/10/2025. Available from: https://www.ato.gov.au/tax-rates-and-codes/foreign-exchange-rates-annual-2022-calendar-year. 2023.

52. Compare the Market. What is the average cost of car insurance in Australia? Based on the findings of Compare the Market's survey, where 1,501 respondents were asked how much they spent per month on car insurance, the average cost of car insurance in Australia is $101.70 a month,* or $1,220.40 per year. Accessed 17/11/2025. Available from: https://www.comparethemarket.com.au/car-insurance/average-cost-of-car-insurance/. 2025.

53. Equity Economics. Gambling in Australia's cost-of-living crisis. Published March 2025. Accessed 17/11/2025. Available from: https://www.equityeconomics.com.au/report-archive/gambling-in-australias-cost-of-living-crisis-the-black-hole-in-household-budgets. 2025.

54. Department of Local Government Industry Regulation and Safety. Video lottery terminals policy. Policy: Guidance on the issuing of video lottery terminal (VLT) permits to sporting organisations/clubs, community/charitable organisations and local hotel based sporting/community associations. Last amended 25 May 2021. Accessed 14/11/2025. Available from: https://www.dlgsc.wa.gov.au/department/publications/publication/video-lottery-terminals-policy. 2023.

55. Department of Local Government IRaS. Two-up policy. Policy: The Gaming and Wagering Commission Act 1987 (the Act) provides for the issue of a Two-up permit to country race clubs and other organisations, which are located outside of a 100km radius of Crown Perth. Last amended: 3 February 2021. Accessed 14/11/2025. Available from: https://www.dlgsc.wa.gov.au/department/publications/publication/two-up-policy. 2025.

56. Australian Bureau of Statistics. National, state and territory population. Annual population change at 31 March 2025, by State. Released 18/09/2025. Accessed 28/10/2025. Available from: https://www.abs.gov.au/statistics/people/population/national-state-and-territory-population/latest-release. 2025.

57. Matt Garrick, Jack Hislop. Calls for national gambling watchdog grow amid NT conflict allegations. ABC News. Published Wednesday 8th October, 2025. Accessed 28/10/2025. Available from: https://www.abc.net.au/news/2025-10-08/government-reviews-conflict-allegations-against-nt-gambling-body/105863006. 2025.

58. TABtouch. Find a TAB. Accessed 13/11/2025. Available from: https://www.tabtouch.com.au/find-a-tab. 2025.

59. Australian Bureau of Statistics. Taxation Revenue, Australia. Reference period 2023-24 financial year. Table 1-10, Taxatation Revenue, Australia Data Download. Statistics about taxation revenue collected by the various levels of government in Australia. Released 22/04/2025. Next release 21/04/2026. Accessed 28/10/2025. Available from: https://www.abs.gov.au/statistics/economy/government/taxation-revenue-australia/latest-release#data-downloads. 2025.

60. Nikkinen J, Marionneau V. On the efficiency of Nordic state-controlled gambling companies. Nordic Studies on Alcohol and Drugs. 2020;38(3):212-26.

61. Kohler D. On the Regressivity of Gambling Taxes in Switzerland. Swiss Journal of Economics and Statistics. 2016;152(3):193-208.

62. Productivity Commission. Gambling. Report no. 50. Canberra: Australia. Published 26/02/2010. Accessed 18/11/2025. Available from: https://assets.pc.gov.au/inquiries/completed/gambling-2010/report/gambling-report-volume1.pdf. 2010.

63. South Australian Centre For Economic Studies. Study of the impact of caps on electronic gaming machines. Published May 2005. Accessed 18/11/2025. Available from: https://www.adelaide.edu.au/saces/ua/media/33/study-of-the-impact-of-caps-on-electronic-gaming-machines.pdf. 2005.

64. Western Australian Council of Social Service (WACOSS). Path Forward for Reducing Gambling Harm in WA. A Scoping Study. Supported by Healthway. Published September 2025. Accessed 12/09/2025. Available from: Healthway Internal Document. . 2025.

65. Department of Local Government Sport and Cultural Industries. Annual Report 2024-25. Accessed 14/11/2025. Available from: https://www.cits.wa.gov.au/department/publications/publication/department-of-local-government-sport-and-cultural-industries-annual-report-2024-25. 2025.

66. Marionneau V, Nikkinen J, Egerer M. Introduction. In: Nikkinen J, Marionneau V, Egerer M, editors. The Global Gambling Industry: Structures, Tactics, and Networks of Impact. Wiesbaden: Springer Fachmedien Wiesbaden; 2022. p. 1-8.

67. Government of Western Australia. Gaming and Wagering Commission Act 1987. Assent date: 8/10/1987. Currency start: 6/02/2025. Accessed 14/11/2025. Available from: https://www.legislation.wa.gov.au/legislation/statutes.nsf/main_mrtitle_373_homepage.html. 1987.

68. Nikkinen J. Funding of gambling studies and its impact on research. Nordisk Alkohol Nark. 2019;36(6):491-5.

69. Angela Rintoul. Modernising harm prevention for gambling in Australia: International lessons for public health policy and improved regulation of gambling. 2018 Churchill Fellowship. Awarded by The Winston Churchill Memorial Trust. Report by Churchill Fellow. Accessed 30/10/2025. Available from: https://www.churchilltrust.com.au/fellow/angela-rintoul-vic-2018/. 2018.

70. Engebø J, Torsheim T, Pallesen S. Regulatory Measures' Effect on Gambling Participation: Experiences From Norway. Front Psychiatry. 2021;12:672471.

71. Rossow I, Hansen MB. Gambling and gambling policy in Norway—an exceptional case. Addiction. 2016;111(4):593-8.

72. Rintoul A, Thomas A. Pre-commitment systems for electronic gambling machines Preventing harm and improving consumer protection. Australian Institute of Family Studies. Accessed 06/01/2025. Available from: https://aifs.gov.au/resources/policy-and-practice-papers/pre-commitment-systems-electronic-gambling-machines2017.

73. Lund I. Gambling Behaviour and the Prevalence of Gambling Problems in Adult EGM Gamblers when EGMs are Banned. A Natural Experiment. Journal of Gambling Studies. 2009;25(2):215-25.

74. Beresford Q. Hooked: Inside the Murky World of Australia's Gambling Industry. Sydney, Australia: NewSouth Publishing; 2025.

75. Inga Ting, Nathanael Scott, Katia Shatoba, Alex Palmer, Michael Workman, Anna Freeland, et al. Jackpot: How the gambling industry cashed in on political donations. ABC News. 2021. Accessed 23/10/2025. Available from: https://www.abc.net.au/news/2021-10-14/howthe-gambling-industry-cashed-in-on-political-donations/100509026. 2021.

76. Adams PJ. Ways Industry Pursues Influence with Policymakers. In: Nikkinen J, Marionneau V, Egerer M, editors. The Global Gambling Industry: Structures, Tactics, and Networks of Impact. Wiesbaden: Springer Fachmedien Wiesbaden; 2022. p. 199-215.

77. Thomas S, McCarthy S, Pitt H, Arnot G, Randle M, Daube M. 'Industry still has too loud a voice': expert views on government policy consultations about gambling marketing. Health Promot International. 2025;40(4).

78. Thomas SL, Crawford G, Daube M, Pitt H, Hallett J, McCarthy S, et al. Time for policies on gambling to benefit health - not the gambling industry. Health Promotion Journal of Australia. 2023;34(2):267-71.

79. Cowlishaw S, Thomas SL. Industry interests in gambling research: Lessons learned from other forms of hazardous consumption. Addictive Behaviors. 2018;78:101-6.

80. Royce B, Crawford G, Francis L, Thomas S, Hallett J. Exploring Perspectives Towards the Gambling Industry and Its Marketing Strategies Among Young People in Western Australia. Health Promotion Journal of Australia. 2025;36(2):e955.

81. John Woodhouse. Fixed odds betting terminals. Briefing Paper Number 06946. Publsihed 15/10/2019. Accessed 30/10/2025. Available from: https://researchbriefings.files.parliament.uk/documents/SN06946/SN06946.pdf 2019.

82. Thomas SL, Bestman A, Pitt H, Cassidy R, McCarthy S, Nyemcsok C, et al. Young people's awareness of the timing and placement of gambling advertising on traditional and social media platforms: a study of 11-16-year-olds in Australia. Harm Reduct J. 2018;15(1):51.

83. Australian Communications and Media Authority. Gambling advertising in sports coverage: Australian Government; 2018. Accessed 23/10/2025. Available from: https://www.acma.gov.au/gambling-advertising-sports-coverage. 2018.

84. Chater N, Loewenstein G. The i-frame and the s-frame: How focusing on individual-level solutions has led behavioral public policy astray. Behavioral and Brain Sciences. 2023;46:e147.

85. Francis L, Livingstone C, Rintoul A. Analysis of EGM licensing decisions by the gambling regulator, Victoria, Australia. International Gambling Studies. 2017;17(1):65-86.

86. Francis L, Livingstone C. Gambling's community contributions: does the community benefit? Addiction Research & Theory. 2019;28(5):365-78.

87. Aruna Sathanapally, Kate Griffiths, Elizabeth Baldwin. A better bet: How Australia should prevent gambling harm. Grattan Institute. Published September 2024. Accessed 30/10/2025. Available from: https://grattan.edu.au/report/a-better-bet-how-australia-should-prevent-gambling-harm/. 2024.

88. Petticrew M, Katikireddi SV, Knai C, Cassidy R, Maani Hessari N, Thomas J, et al. 'Nothing can be done until everything is done': the use of complexity arguments by food, beverage, alcohol and gambling industries. J Epidemiol Community Health. 2017;71(11):1078-83.

89. Wesley Mission. Community Attitudes to Poker Machines and Gambling Reform. Analysis Report nr. 5. July 2025 © 5th edition. Accessed 30/10/2025. Available from: https://www.wesleymission.org.au/hubfs/Gambling-Harm/Community%20Attitudes%20to%20Poker%20Machines%20and%20Gambling%20Reform%20Report%205.pdf. 2025.

90. The Australia Institute. Polling Research: Give Junk Food & Gambling Ads the Punt. Published August 2022. Accessed 10/11/2025. Available from: https://australiainstitute.org.au/wp-content/uploads/2022/08/Polling-Advertising-on-TV-Web-1.pdf. 2022.

91. Bestman A, Thomas SL, Randle M, Pitt H, Daube M. Attitudes towards community gambling venues and support for regulatory reform: an online panel study of residents in New South Wales, Australia. Harm Reduction Journal. 2018;15(1):15.

92. Thomas SL, Randle M, Bestman A, Pitt H, Bowe SJ, Cowlishaw S, et al. Public attitudes towards gambling product harm and harm reduction strategies: an online study of 16–88 year olds in Victoria, Australia. Harm Reduction Journal. 2017;14(1):49.

93. Rebecca Jenkinson, Cailem Murray Boyle, Kei Sakata, Nancy Greer, Uma Jatkar, Brian Vandenberg. Gambling participation and experience of harm in Australia. Australian Institute of Family Studies. Published March 2023. Accessed 27/10/2025. Available from: https://aifs.gov.au/research/research-snapshots/gambling-participation-and-experience-harm-australia. 2023.

94. Rebecca Jenkinson, Cailem Murray Boyle, Kei Sakata, Nancy Greer, Uma Jatkar, Brian Vandenberg. Community attitudes towards sports and race betting advertising in Australia. Australia. Melbourne: Australian Gambling Research Centre, Australian Institute of Family Studies. Published March 2023. Accessed 13/11/2025. Available from: https://aifs.gov.au/research/research-snapshots/community-attitudes-towards-sports-and-race-betting-advertising. 2023.

95. Pitt H, McCarthy S, Hume E, Arnot G, Thomas S. Australian parents' perceptions of the risks posed by harmful products to the health of children. Health Promotion International. 2024;39(6).

96. Ukhova D, Marionneau V, Nikkinen J, Wardle H. Public health approaches to gambling: a global review of legislative trends. The Lancet Public Health. 2024;9(1):e57-e67.

97. Wardle H, Reith G, Langham E, Rogers RD. Gambling and public health: we need policy action to prevent harm. BMJ. 2019;365:l1807.

98. Livingstone C, Rintoul A, de Lacy-Vawdon C, Borland R, Dietze P, Jenkinson R, et al. Identifying effective policy interventions to prevent gambling-related harm. Victorian Responsible Gambling Foundation, Melbourne. Accessed 30/10/2025. Available from: https://responsiblegambling.vic.gov.au/documents/640/Livingstone-identifying-effective-policy-interventions-June-2019.pdf. 2019.

99. World Health Organization. WHO Framework Convention on Tobacco Control. Accessed 12/06/2025. Available from: http://www.who.int/fctc/en/. 2012.

100. Productivity Commission Australian Government. Productivity Commission. Inquiry Report Gambling Volume 1 and

Volume 2. No. 50, 26. Published February 2010. Accessed 30/10/2025. Available from: https://assets.pc.gov.au/inquiries/completed/gambling-2010/report/gambling-report-volume1.pdf and https://assets.pc.gov.au/inquiries/completed/gambling-2010/report/gambling-report-volume2.pdf and https://www.pc.gov.au/inquiries-and-research/gambling-2010/report/. 2010.

101. Victorian Gambling and Casino Control Commission. Australian/New Zealand Gaming Machine National Standard 2016. Accessed 30/10/2025. Available from: https://web.archive.org/web/20221020111215/https://www.vgccc.vic.gov.au/sites/default/files/Australian_New_Zealand_Gaming_Machine_National_Standard_2016.PDF. 2016.

102. Steve Whetton, Michael O'Neil, Paul Delfabbro, Kerry Sproston, Suraya Abdul Halim, Tania Dey, et al. Evaluation of YourPlay: final report. Published by South Australian Centre for Economic Studies, University of Adelaide. Commissioned by Victorian Department of Justice and Community Safety. Published March 2019. Accessed 30/10/2025. https://apo.org.au/sites/default/files/resource-files/2020-02/apo-nid277096.pdf. 2020.

103. Parliament of Western Australia. Parliamentary Friendship Groups. Parliamentary Friendship Groups are informal groups established by Members of the Parliament of Western Australia to raise awareness of, or increase liaison with, a particular group, organisation or issue. These groups are not formal entities of the Parliament. Accessed 04/12/2025. Available from: https://www.parliament.wa.gov.au/WebCMS/webcms.nsf/content/parliamentary-friendship-groups. 2025.

104. Hall & Partners Australia. Gambling Tagline Research. Phase 2: Implementation and Market Testing. Melbourne, Australia: Department of Social Service. Accessed 23/10/2025. Available from: https://www.dss.gov.au/system/files/resources/phase-ii-dss-gambling-tagline-testing-and-implementation-publishable-hall-and-partners-report-2022.pdf. 2022.