

RESEARCH REPORT

Experiences of venue-based EGM gamblers during COVID-19 lockdowns and restrictions: Did they return to venues to gamble or substitute alternate activities?

January 2023





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Conflict of interest declaration

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Experiences of venue-based EGM gamblers during COVID-19 lockdowns and restrictions: Did they return to venues to gamble or substitute alternate activities?

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Executive summary

Purpose of study

This study investigated the experiences of venue-based EGM gamblers during COVID-19 ('COVID') lockdowns and restrictions in Victoria and their return to EGM venues in the most recent 12 months.

For the purpose of the study, venue-based EGM gamblers were Victorian adults aged 18 years and older, who gambled on pokies or electronic gaming machines (EGMs) at a club, pub or the casino in the 12 months prior to the commencement of the COVID-19 pandemic in Australia (i.e., prior to March 2020).

Major topics examined in the study

A diverse range of topics was explored in the study to fully understand the experiences of venue-based EGM gamblers during Victorian COVID lockdowns and restrictions (when venues were closed).

This period was particularly long in Victoria, as metropolitan parts of the state spent over 250 days in lockdown from March 2020 to October 2021 due to COVID-19. In addition, a range of restrictions were also applied to gaming venues from late 2021 to early 2022.

To better understand venue-based EGM gambler experiences, the study investigated the non-gambling related activities undertaken during COVID lockdowns and restrictions (e.g., leisure activities, home schooling of children), the gambling activities undertaken online, the psychological and financial impacts of COVID, the perceived positive and negative impacts of EGM venue closures, EGM gambler coping and gambling urges and how these experiences influenced gambler return to EGM venues in the most recent 12 months.

A special topic of focus was also to explore whether any activities undertaken during COVID lockdowns and restrictions have replaced gambling activities of venue-based EGM gamblers and how their gambling has changed since COVID-19.

Research methodologies

Following a literature review, two methods were undertaken to address the study research questions:

- ⇒ Qualitative depth interviews with Victorian venue-based EGM gamblers (n=30)
- ⇒ A quantitative online panel survey of Victorian venue-based EGM gamblers (n=683) (defined as gambling on EGMs at pubs, clubs or the casino in the 12 months pre-COVID).

The sample included 251 Non-problem gamblers, 77 Low risk gamblers, 122 Moderate risk gamblers and 233 Problem gamblers.

Major findings

1. What alternate activities did venue-based EGM gamblers do during COVID lockdowns and restrictions?

- The activities that venue-based EGM gamblers most frequently took part in during COVID lockdowns and restrictions were using the internet for leisure (92.2 per cent), watching TV, movies and videos (91.8 per cent) and undertaking chores or work around the home not involving physical activity (e.g., cooking) (83.9 per cent). In addition, 79.6 per cent socialised with family and friends and 72.8 per cent did hobbies or leisure activities of a non-physical nature.
- Moderate risk and problem gamblers showed a number of activity patterns that differed from non-problem gamblers. In particular, moderate risk and problem gamblers were more frequently engaged in playing video games during lockdowns and restrictions (60.6 per cent and 76.2 per cent participated in video games, compared to only 44.7 per cent of non-problem gamblers) and also participated more frequently in sport/resistance training/mind body exercise (e.g., in the case of problem gamblers completing activities 'sometimes/often/always', results were 68.1 per cent for sport/70.6 per cent for resistance training/67.8 per cent for mind body exercise, compared to 15.5 per cent / 35.4 per cent / 24.9 per cent for non-problem gamblers for the same three activities).
- The top five activities commonly reported by venue-based EGM gamblers as positively impacting health and wellbeing during the period when venues were closed included watching TV, movies and videos (25.7 per cent), interacting with pets or animals (24.3 per cent), home schooling and caring for children (23.2 per cent), doing cardiovascular exercise (e.g., walking, running) (excluding sports) (22.3 per cent) and doing physically demanding work around the home (e.g., gardening, renovations, DIY) (20.7 per cent).
- A greater proportion of problem gamblers reported a positive impact from very solitary 'screen-based' activities than other risk segments (e.g., watching TV, movies and videos). While it is unclear why these activities had a positive impact, it is possible that screen-based activities may offer problem gamblers some level of 'escapism', similar to EGMs.

2. What gambling did venue-based EGM gamblers do during COVID lockdowns and restrictions?

- The highest-participation gambling activities during COVID lockdowns and restrictions were lottery tickets from a shop or online (72.8 per cent), betting on horse, harness racing or greyhounds online (56.8 per cent), Scratch tickets from a shop or online (53.4 per cent), betting on sports online (46.6 per cent) and informal private betting for money - like playing cards at home (44.1 per cent).
- Compared to non-problem gamblers, moderate risk and problem gamblers reported significantly higher participation in all gambling activities during COVID lockdowns and restrictions.
- EGM gambling online during COVID lockdowns and restrictions was undertaken amongst venue-based EGM gamblers by 10.1 per cent of non-problem gamblers, 20.5 per cent of low risk gamblers, 31.1 per cent of moderate risk gamblers and by 85.5 per cent of problem gamblers.

3. What financial and health impacts due to COVID were experienced by venue-based EGM gamblers?

- 38.4 per cent of venue-based EGM gamblers reported debt stress and 42.1 per cent reported financial distress. Higher gambling risk segments were more financially impacted by COVID and especially problem gamblers.
- Nearly half of venue-based EGM gamblers (46.4 per cent) spent their financial stimulus on gambling. This was also more commonly reported by problem gamblers (61.2 per cent).

4. What were the psychological effects of COVID on venue-based EGM gamblers?

- Overall, problem-focused coping was generally higher than emotion-focused coping during COVID lockdowns and restrictions amongst venue-based EGM gamblers. This suggests that overall, most venue-based EGM gamblers tried to deal with the pandemic using positive coping strategies.
- Problem-focused coping was also higher for all risk segments of gamblers, apart from problem gamblers. Maladaptive coping strategies such as alcohol consumption were also higher in moderate risk gamblers and smoking was higher in problem gamblers during lockdowns and restrictions.
- Use of emotion focused coping was associated with COVID-related financial distress, even after controlling for risk for problem gambling (partial correlation – $r=.25$, $p<.005$).

This suggests that the financially distressed cohort used emotion-based coping to deal with the emotional turmoil presented by the pandemic. However, there was no strong tendency for this cohort to gamble online during lockdowns and restrictions (although some increased table game play online was observed for this cohort).

5. What proportion and profile of venue-based EGM gamblers returned to venues?

- Overall, 68 per cent of venue-based EGM gamblers reported returning to Victorian venues to gamble on EGMs in the most recent 12 months. A significantly higher proportion of problem gamblers (83.2 per cent) reported returning to venues than any of the other gambling risk segments.
- A significantly higher proportion of venue-based EGM gamblers returning to EGM venues were male (63.9 per cent), males aged 18-34 years (30.1 per cent of those returning to venues versus 11.3 per cent of those who did not return) and a significantly lower proportion were females aged 35-49 years (9.6 per cent of those returning to venues versus 16.5 per cent for those who did not return) and females aged 50 or older (11.9 per cent of those returning to venues versus 22.9 per cent for those who did not return).
- When probable mental illness was analysed by gender, a significantly higher proportion of females returning to EGM venues (19.7 per cent) had a probable serious mental illness (had a Kessler 6 score of 19-30), when compared to females not returning to venues (only 5.9 per cent) ($p<.05$).

This may suggest that venue-based EGM gambling post-COVID may be used as a coping mechanism for some EGM gamblers and especially females with a probable serious mental illness prior to COVID.

- A significantly higher proportion of EGM gamblers with substance use disorders also returned to venues (21.7 per cent versus 13.2 per cent for those who did not return), as did EGM gamblers with personality disorders (16.0 per cent versus 9.4 per cent for those who did not return).
- It is similarly noteworthy that 61 per cent of returning problem gamblers classified into pathway three in the Pathways Model (a cohort that experiences high levels of impulsivity, risk-taking, antisocial traits with respect to their gambling) (Nower et al., 2021). Returning venue-based EGM gamblers were also less likely to be in the behaviourally-conditioned pathway (i.e., the pathway with the least comorbidity) (compared to those who did not return).

This may suggest that the returning problem gambling cohort has higher comorbidity than (pre-COVID) problem gamblers who did not return.

6. What were positive and negative effects of EGM venue closure on venue-based EGM gamblers?

Positive effects of EGM venue closures

- Just over half of venue-based EGM gamblers (51.2 per cent) reported that EGM venue closures had been positive. A significantly higher percentage of problem gamblers (65.5 per cent) and moderate risk gamblers (59 per cent) reported positive effects, compared to low risk (46.8 per cent) and non-problem gamblers (32.2 per cent).
- Problem gamblers reported their top positive effect as venue closures had encouraged them to find new activities to keep busy (34.2 per cent).

This may reflect some recognition by the segment that their leisure was very much focused on gambling. Improvement in mental health similarly featured in the top five positive effects for moderate risk and problem gamblers, yet not low risk and non-problem gamblers.

Negative effects of EGM venue closures

- Only 20.7 per cent of venue-based EGM gamblers reported negative effects from venue closures. A significantly higher proportion of problem gamblers (42.6 per cent) and moderate risk gamblers (10.8 per cent) reported negative effects, compared to non-problem gamblers (4.5 per cent).
- Moderate risk and problem gamblers mentioned missing the excitement of free spins, features and wins and boredom in the top two negative effects.

7. Why did venue-based EGM gamblers return or not return to venues?

Reasons why venue-based EGM gamblers returned to venues

- Top overall reasons why venue-based EGM gamblers went back to EGM gambling included enjoying pokies, free spins and features (41.5 per cent), enjoying social contact associated with pokies venues (35.1 per cent), it was something to do when they were bored (34.8 per cent) and playing pokies after enjoying food at the venue (33.4 per cent).

- The top three reasons for problem gamblers included enjoying pokies/free spins/features (41 per cent), something to do to when they were bored (34.5 per cent) and liking to gamble for extra money (33.3 per cent). Moderate risk gamblers reported returning to venues because they enjoyed pokies/free spins/features (53 per cent), it was something to do when they were bored (48.5 per cent) and to enjoy social contact (38.7 per cent).

This highlights that gambling for problem and moderate gamblers is not only about gambling, but is also because they have few other interests to defeat boredom.

Reasons why some venue-based EGM gamblers did not return to venues

- The very top reason for all risk segments related to wanting to avoid public places since COVID (45.6 per cent of problem gamblers, 54.2 per cent of moderate risk gamblers, 72.4 per cent of low risk gamblers and 47.5 per cent of non-problem gamblers).
- The next most common reasons for problem gamblers were that many pokies were now not available/shutdown to accommodate social distancing (35.9 per cent), pokies were no longer enjoyable (35.1 per cent) and because COVID had led the gambler to re-evaluate how they spend their leisure time (28.6 per cent).

This highlights that some problem gamblers have re-evaluated pokies gambling following the COVID lockdown and restriction periods associated with venue closure.

8. How did gambling participation of venue-based EGM gamblers change since COVID?

- EGM gambling participation was 100 per cent pre-COVID in venue-based EGM gamblers (the basis for study participation), then participation declined to 43.8 per cent during COVID lockdowns and restrictions and rebounded to 76.3 per cent participation in the most recent 12 months. This suggests that participation in EGM gambling declined overall as a result of COVID-19 (a decrease of 23.7 per cent from pre-COVID to the most recent past 12 months).
- In terms of participation by risk segment, a large proportion of problem gamblers (85.5 per cent) maintained EGM gambling participation during COVID lockdowns and restrictions (i.e., gambled online) and most had resumed EGM gambling in the most recent 12 months (96.4 per cent). This was only an overall decline of 3.6 per cent in participation for problem gamblers. In comparison, non-problem gamblers declined dramatically to only 10.1 per cent participation during COVID lockdowns and restrictions and 58.8 per cent had resumed gambling in the most recent 12 months.
- Compared to their pre-COVID frequency of gambling, 45.8 per cent of venue-based EGM gamblers decreased their EGM gambling frequency, 37.2 per cent stayed at the same EGM gambling frequency and 17 per cent increased their EGM gambling frequency. Increases in EGM gambling frequency from pre-COVID to the most recent 12 months were largest in problem gamblers (34.3 per cent increased) and smallest in non-problem gamblers (only 4.1 per cent increased).
- A range of other changes in gambling participation were observed in venue-based EGM gamblers.

Most notably:

- Wagering (betting on horses/harness racing and greyhounds) overall declined 5.1 per cent since pre-COVID.
- Sports betting overall declined 2.9 per cent since pre-COVID.

- Table game participation declined 9.4 per cent from pre-COVID.
- In terms of participation frequency, it is notable that, compared to pre-COVID, problem gamblers (A) largely maintained their wagering participation (down only 0.6 per cent), yet 31.9 per cent of this group increased wagering frequency, (B) largely maintained their sports betting participation (down only 1.6 per cent), yet 27.4 per cent increased their sports betting frequency and (C) problem gamblers had a small decrease in their table game participation (down only 3.3 per cent), yet 35 per cent increased their table game betting frequency.

This highlights that, while participation in these modes of gambling in problem gamblers has fallen very marginally (if at all), around one third of problem gamblers are now gambling more intensively (frequently) on these modes of gambling since pre-COVID.

9. How did psychological distress, gambling urges, risk and harm in venue-based EGM gamblers change since COVID?

Changes in gambling urges from pre-COVID to the most recent 12 months

- The urge to gamble for venue-based EGM gamblers did not vary much from pre-COVID, to during lockdowns and restrictions to the most recent 12 months for all risk segments, but it was significantly higher in problem and moderate risk gamblers.

Changes in psychological distress from pre-COVID to the most recent 12 months

- Overall, 17.4 per cent of venue-based EGM gamblers had a probable serious mental illness in the 12 months prior to COVID. During COVID lockdowns and restrictions, this increased to 24.7 per cent of venue-based EGM gamblers (or nearly one in four gamblers). During the most recent 12 months, this declined to 20 per cent. This represented an overall change of 2.6 per cent from the 12 months before COVID to the most recent past 12 months.

This may suggest a period of stabilisation of mental health following lockdowns and restrictions.

- When compared to the 12 months pre-COVID, an overall increase in the proportion of venue-based gamblers experiencing probable serious mental illness was observed for problem gamblers (an increase of 1.4 per cent), moderate risk gamblers (an increase of 8.5 per cent) and low risk gamblers (an increase of 4.7 per cent), while non-problem gamblers remained relatively stable (only an increase of 0.2 per cent).

This may reflect the psychological distress caused by COVID in some segments and that many changes have occurred to work and society. Moreover, it highlights that more gamblers at-risk may be likely to experience a probable mental illness than in the past.

Changes in risk for problem gambling from pre-COVID to the most recent 12 months

- Overall, shifts in risk segment from pre-COVID to the more recent 12 months suggest very little change in problem gamblers and non-problem gamblers. However, low risk and moderate risk gamblers experienced considerable change in their risk for problem gambling.
- Reflecting this, 94 per cent of problem gamblers, 58 per cent of moderate risk gamblers, 60.8 per cent of low risk gamblers and 91.2 per cent of non-problem gamblers remained in their pre-COVID gambling risk segment in the most recent 12 months.

Changes in gambling harm from pre-COVID to the most recent 12 months

- For the entire cohort, gambling harm (including those reporting very few negative effects, some negative effects and many negative impacts) decreased only two per cent from pre-COVID to post-COVID.
- However, when individual changes in the proportions of gamblers experiencing harm were analysed, 15.1 per cent decreased, 70.1 per cent had no change and 14.8 per cent increased in their reported harm.
- Changes in harm by risk segment also highlighted that 29 per cent of problem gamblers increased in harm, as did 12.1 per cent of moderate risk gamblers, 4.8 per cent of low risk gamblers and three per cent of non-problem gamblers.

This illustrates that, while overall cohort harm remained fairly consistent across time, around 14.8 per cent of venue-based EGM gamblers experienced an increase in harm and an overall increase in harm was quite common in problem gamblers (with almost one in three experiencing an increase in harm).

10. What activities undertaken during COVID lockdowns and restrictions have replaced EGM gambling?

Proportion of venue-based EGM gamblers replacing EGM gambling with another activity

- 66.6 per cent of venue-based EGM gamblers who reported undertaking some activities during COVID lockdowns and restrictions (when venues were closed) had actually replaced some part or all of their EGM gambling with those activities (and were still undertaking those activities up to March-April 2022, the period of the survey).
- The activities reported by a higher proportion of venue-based EGM gamblers as having replaced some or all of their EGM gambling were TV, movies and videos (35.8 per cent), using the internet for leisure (29.9 per cent), chores or work around the home not involving physical activity (19.7 per cent), playing video games (18.8 per cent), hobbies or leisure activities of a non-physical nature (18.1 per cent) and doing physically demanding work around the home (16.2 per cent).
- It is also of note that hobbies or leisure activities of a non-physical nature replaced some or all of EGM gambling in 24.4 per cent of problem gamblers, 23.6 per cent of moderate risk gamblers, 12 per cent of low risk gamblers and 9.9 per cent of non-problem gamblers.
- It is also noteworthy that a higher proportion of problem gamblers replaced their EGM gambling with all, but two activities, relative to non-problem gamblers. The exceptions were socialising with family or friends and doing cardiovascular exercise (where there was no significant difference between groups). The same trend applied to moderate risk gamblers (compared to non-problem gamblers) for all, but one activity (socialising with family and friends).
- The major reason for not continuing lockdown activities was simply 'boredom' or the availability of other activities once society re-opened.

Whether venue-based EGM gamblers found a more balanced approach to EGM gambling

- Around 75 per cent of venue-based EGM gamblers reflected that doing activities during COVID lockdowns and restrictions had helped them find a more balanced approach to EGM gambling when venues re-opened.
- This was also reported by 95 per cent of problem gamblers, 86.4 per cent of moderate risk gamblers, 66 per cent of low risk gamblers and 49 per cent of non-problem gamblers (based on responses of 'Somewhat/quite a lot/significantly').

11. Are venue-based EGM gamblers interested in recreational activities to support prevention and early intervention of gambling harm?

- When at-risk gamblers were asked about their interest in working with a recreation officer to identify free or low-cost recreational activities that meet their needs, 43.4 per cent reported interest.
- Problem gamblers were significantly more interested in such a service (60.1 per cent were interested), compared to low risk (13.6 per cent) and moderate risk gamblers (20 per cent). This suggests that such a service may have perceived value to problem gamblers.
- Activities of most interest were exercise programs to build strength and fitness (81.6 per cent), cooking, food, and nutrition programs (80.3 per cent), groups for social trips, lunches or hanging out (76.6 per cent) and gardening and environment activities (76.4 per cent).

12. Did any leisure or gambling activities undertaken during COVID lockdowns and restrictions have any lasting effects?

- Multivariate analysis showed that increasing cardiovascular activity during COVID lockdowns and restrictions (when venues were closed) had a very small, but statistically significant (positive) effect in helping venue-based EGM gamblers take a more balanced approach to gambling when venues re-opened.
- Otherwise, specific leisure activities did not individually predict psychological distress, gambling urges, intentions to reduce or stop gambling or changes in risk for problem gambling / changes in gambling harm (from pre-COVID to the most recent 12 months).
- This may suggest that, while new activities have replaced some level of EGM gambling, it is not possible to link any specific activity undertaken to gambling behaviour, risk or harm.

It may also reflect that changes that have occurred due to gamblers doing different activities have produced change of a more *psychological nature* (i.e., the time has given gamblers an opportunity to reflect on their EGM gambling and replace it with other activities) and are not specifically due to any single activity.

- However, this provides *some* evidence that undertaking increased cardiovascular activity during lockdowns and restrictions has been sustained by *some* venue-based EGM gamblers (at least up until March to April 2022). Although it should once again be noted that the effect was only small.
- Other multivariate analyses revealed that engaging in horse/harness or greyhound race betting online when venues were closed and experiencing psychological distress during COVID lockdowns and restrictions predicted an increase in risk for problem gambling from pre-COVID to the most recent 12 months.

This may reflect the high accessibility of online wagering to the community at this time and their increased vulnerability due to experiencing high psychological distress from the pandemic.

Conclusions

In conclusion, this study has shown that:

- EGM venue closure has been positive for many venue-based EGM gamblers with many benefits identified.
- When venues re-opened, 68 per cent of venue-based EGM gamblers reported returning to venues.
- Three quarters of venue-based EGM gamblers found that doing alternative activities during COVID lockdowns and restrictions had helped them find a more balanced approach to EGM gambling when venues re-opened.
- Increasing cardiovascular activity during COVID lockdowns and restrictions (over and above the regular amount) had a very small, but statistically significant (and positive) effect in helping venue-based EGM gamblers take a more balanced approach to gambling when venues re-opened.
- Alternative activities have generally led venue-based EGM gamblers to re-evaluate their gambling and two-thirds have now replaced some or all of their EGM gambling with other activities. This has occurred across all at-risk gamblers and particularly in problem gamblers.
- The cohort of venue-based EGM gamblers that returned to venues is now likely to be gambling more intensively on EGMs than in the past. This also extends to wagering, sports betting and table game betting.
- Venue-based EGM gamblers currently gambling on EGMs in venues may have more comorbidity now than pre-COVID. A reasonable proportion of this returning cohort in particular may have clinically significant addiction and may require more specialised services and supports to reduce gambling harm.
- Increased gambling harm has been reported by 29 per cent of problem gamblers, in spite of cohort level harm decreasing two per cent since pre-COVID.
- Findings highlight the potential benefit of programs to reduce harm using alternative activities and the potential for strategies to reduce harm associated with online wagering during stressful community events such as COVID.

Background

Purpose of study

This study investigated the experiences of venue-based EGM gamblers during COVID-19 ('COVID') lockdowns and restrictions in Victoria and their return to EGM venues in the most recent 12 months.

For the purpose of the study, venue-based EGM gamblers were Victorian adults aged 18 years and older, who gambled on pokies or electronic gaming machines (EGMs) at a club, pub or the casino in the 12 months prior to the commencement of the COVID-19 pandemic in Australia (i.e., prior to March 2020).

Major topics examined in the study

A diverse range of topics was explored in the study to fully understand the experiences of venue-based EGM gamblers during Victorian COVID lockdowns and restrictions (when venues were closed).

This period was particularly long in Victoria, as metropolitan parts of the state spent over 250 days in lockdown from March 2020 to October 2021 due to COVID-19. In addition, a range of restrictions were also applied to gaming venues from late 2021 to early 2022.

To better understand venue-based EGM gambler experiences, the study investigated the non-gambling related activities undertaken during COVID lockdowns and restrictions (e.g., leisure activities, home schooling of children), the gambling activities undertaken online, the psychological and financial impacts of COVID, the perceived positive and negative impacts of EGM venue closures, EGM gambler coping and gambling urges and how these experiences influenced gambler return to EGM venues in the most recent 12 months.

A special topic of focus was also to explore whether any activities undertaken during COVID lockdowns and restrictions have replaced gambling activities of venue-based EGM gamblers and how their gambling has changed since COVID-19.

Relevance of the study to VRGF programs

As a historically unprecedented event, COVID presented a unique opportunity for a 'natural' experiment of forced abstinence from gambling on EGMs.

Based on estimates that 70 to 80 per cent of those experiencing harm from gambling may experience harm principally due to EGM use (Livingstone, 2018), understanding the activities of venue-based EGM gamblers during COVID lockdowns and restrictions is of great value and interest.

In particular, it presented an opportunity to understand the value of abstinence for venue-based EGM gamblers, the potential for alternative activities (other than gambling) to improve mental health and wellbeing and to understand how venue-based EGM gamblers may adjust their venue-based gambling based on these experiences.

Indirectly, this may also inform the development of strategies and programs for the Victorian Responsible Gambling Foundation (VRGF) including strategies to support gamblers to reduce reliance on gambling and to support gamblers experiencing harm to recover from gambling during periods of abstinence (e.g., messages and support tools to sustain commitments to reducing or stopping gambling).

Impacts of COVID-19 on gambling in Victoria

COVID-19 led to the closure of gambling venues in Victoria from March 2020. Victorians in Metropolitan areas spent a total of 262 days in lockdown and there were many periods following each lockdown where gaming venues were either limited in operation, or were partially or fully closed due to social distancing requirements or due to limited patronage. As a result of venue closures, gamblers relying on gambling for leisure were presented with a unique opportunity to pursue other leisure activities and interests.

However, as the psychological distress due to COVID was extremely high in Victoria during lockdowns and restrictions (Economic Impacts report - City of Melbourne during August 2020), many Victorians reported difficulties coping with this event. This also provided an opportunity to understand the coping strategies used by venue-based EGM gamblers during this period and in particular, their use of problem-focused or emotion-focused coping and any maladaptive coping behaviours (e.g., large online gambling, increased alcohol consumption etc.).

Use of problem- versus emotion-focused coping has been identified as a key factor in determining overall coping during the COVID pandemic (Di Monte et al., 2020). Problem-focused coping, or use of an active coping style, involves proactively developing solutions to problems. In comparison, emotion-focused coping involves a passive type of coping and may involve unhealthy behaviours such as drinking, over-eating or smoking (e.g., Kim et al, 2010).

A further focus of the study involved exploring venue-based EGM gambler commitments to reducing or stopping gambling during COVID lockdowns and restrictions. This is of interest, given research that shows that gamblers can make more rational decisions about gambling away from the gambling environment (Schottler Consulting, 2010).

The COVID-19 pandemic is widely regarded as one of the largest global economic events, with Victoria acknowledged as the Australian state experiencing the greatest impacts (Australian Bureau of Statistics, 2020). Given this, the study examined the psychological and financial distress caused by COVID and the impacts on gambler return to EGM venues.

This is of great interest, given research that shows that harm from gambling can sometimes occur due to financial pressure (e.g., gambling to raise money to pay for loans or household expenses) and psychological distress (e.g., Hakansson et al., 2020).

Gambling available during the Victorian COVID lockdowns and restrictions

During the most stringent COVID lockdowns and restrictions in Victoria, all EGM venues were closed including the casino, pubs and clubs. Horse/harness/greyhound wagering was, however, still available on an ongoing basis online and sports betting also available through online apps and web sites (although most sports were not open to public spectators at the time).

In addition, lottery tickets and scratch tickets could still be purchased through land based outlets (e.g., newsagents) that were open during restriction periods and lottery tickets were also available through major lottery web sites. Even following re-opening of EGM venues, many venues were operating below full capacity due to COVID restrictions relating to social distancing (e.g., every second EGM was turned off). This meant that most gambling venues were not in full operation until around early March 2022.

Literature review

To develop a research design for the current study, the first activity involved a review of literature. Meta-analyses, systematic reviews and other high-quality peer-reviewed research were examined as part of this review, along with relevant grey literature. This included a review of major research clearinghouses (e.g., VRGF web site, GREO) and major journals (e.g., Gambling Research, Addiction, International Gambling Studies and Journal of Gambling Studies). Following is a brief review of the literature used to shape the research design.

Impacts of COVID-19 on the community

Many studies within Australia and internationally have examined the impact of the COVID-19 pandemic on the community. Studies have examined impacts of the pandemic on mental health and wellbeing, financial impacts and impacts on specific cohorts within the community. This broadly reflects that many different variables and factors have influenced community experiences during the pandemic.

A study by Fisher et al (2020) quantified the population prevalence of clinically significant symptoms of depression and anxiety amongst adults in Australia during the first month of COVID-19 restrictions. Data was collected from 13,289 participants via an anonymous online survey. Results showed that mental health problems were at least twice as prevalent as in non-pandemic periods.

A small number of studies identified specific impacts of COVID-19 on the Victorian community. A study by VicHealth (2020) examined the impact of the first lockdown on the health and wellbeing of Victorians. Two thousand Victorian adults were surveyed via an online panel from 31 May to 8 June, 2020.

Financial and employment impacts of the pandemic were some of the more notable effects explored in the Vic Health study (2020). Results showed that 24 per cent of Victorians experienced financial hardship during the first lockdown, compared to 17 per cent prior to the pandemic. Impacts were also higher in those aged 25-34 (44 per cent).

In relation to employment impacts in the Vic Health study (2020), 40 per cent of respondents reported reduced work hours, 17 per cent had pay reduced, 10 per cent had to take unpaid leave and 10 per cent lost their job. Young women aged 18-24 were also found to be 2.5 times more likely to lose their job and people with a disability were twice as likely.

Overall Victorian employment impacts were documented in the Economic Impacts report by City of Melbourne during August 2020. This reported that monthly job losses in Victoria were three times higher than those of the 1990s recession. During April 2020, Victoria lost 128,000 jobs, compared to only 38,000 in March 1991 (the largest single month job reduction in Victoria during the 1990s recession).

Psychological distress about potential job loss or related potential financial impacts was similarly a reported impact. In total, 29 per cent of respondents were worried about job prospects and for some groups, this figure was much higher (e.g., for already unemployed Victorians, it was 60 per cent, for Victorians aged 25-34, it was 50 per cent, for Victorians aged 18-24 it was 40 per cent and for Victorians who spoke a language other than English at home, it was 40 per cent). In addition, 17 per cent of Victorians were worried about not having enough money to buy food (compared to 9 per cent in February 2020).

Results similarly showed a range of psychological impacts. Around 16 per cent of Victorians experienced high psychological distress and this was higher for certain groups (e.g., for people aged 18-24 it was 23 per cent, for people with a disability it was 29 per cent, for people on JobSeeker it was 26 per cent and for people from bushfire affected communities it was 40 per cent).

The Victorian Mental Illness Awareness Council (VMIAC), the peak Victorian non-government organisation for people who have experience with a mental illness or emotional distress, additionally reported from a survey of 175 respondents that 75 per cent reported a decline in mental health due to COVID-19.

Females (79 per cent) similarly reported poorer mental health than males, and more referenced suicidal thoughts, suicide attempts and self-harm. The highest risk age group was found to be under 35-year-olds with a mental illness.

VMIAC also conducted a second survey during August 2020 and found that 75 per cent of respondents felt their mental health was even *worse* in the second wave of the pandemic, compared to the first.

Literature on impacts of COVID-19 specifically highlights that:

- The COVID-19 pandemic has brought significant financial hardship to many people and has led many people to experience high levels of psychological distress.
- Compared to other states and territories, Victoria has been more adversely affected by the pandemic due to longer periods of lockdown.
- Many population groups have been more adversely impacted by the pandemic including young people (18-34 years), people on JobSeeker and JobKeeper, people on low incomes, people with disabilities, people speaking languages other than English, people living alone, people from bushfire affected areas or financially vulnerable communities and people with pre-existing mental health disorders.

Role of coping strategies during the COVID-19 pandemic

Coping is a term used to generally describe the way individuals manage stress (e.g., Dunn et al, 2015). In spite of wide recognition of the importance of 'coping' with stressors in day-to-day life, still very little is understood about the factors associated with positive coping in the context of major stressors.

The original work of Folkman and Lazarus (1984) proposing a transactional theory of stress and coping provides some insight into approaches to coping following stressful events. According to the authors, coping in response to stressors can be either *problem-focused* or *emotion-focused*, or a combination of both.

Problem-focused coping, or use of an active coping style, involves proactively developing solutions to problems. In comparison, emotion-focused coping involves a passive type of coping and may involve behaviours such as drinking, over-eating or smoking to avoid problems (e.g., Kim et al, 2010). The controllability of events has also been proposed to affect coping strategies, with emotion-focused coping being more likely to be used for events outside an individual's control (Folkman and Lazarus, 1980).

The importance of effective coping strategies in the context of major stressors has been found to be linked to health and wellbeing. In particular, Tripathy et al. (2019) found that, if effective coping strategies are not developed, stress can have negative physiological and psychological effects. Physiological effects can include changes in cardiorespiratory function, skin temperature, muscle tension, and stress hormones (e.g., glucocorticoids), while psychological effects can include anxiety and psychological distress (Mendelson, 2013).

A study by Di Monte et al (2020) found that emotion-focused coping - including avoidance – was linked to higher levels of emotional exhaustion, while problem-focused coping was associated with lower levels of depersonalisation and higher scores on personal accomplishment.

Kar et al (2020) identified the coping strategies needed to improve mental health during the pandemic. While only a descriptive review, coping strategies identified as being helpful to mental health included activities such as music, reading, positive thinking, creative activities, prayer and exercise.

Together, findings of research highlight that ineffective coping styles and particularly emotion-focused coping may be linked to poor mental health and higher psychological distress during the pandemic.

Literature on coping strategies during COVID-19 highlights that:

- Coping can be either problem-focused or emotion-focused, or a combination of both.
- Emotion focused coping and avoidance behaviour - has been found to be associated with higher levels of psychological distress during COVID-19.
- Involvement in leisure activities has been found to help people cope with stressful events.

Role of physical and leisure activities during the COVID-19 pandemic

In addition to the literature on coping strategies, a range of studies have examined how physical activity and health promoting behaviours have benefitted populations during the COVID-19 pandemic. As highlighted by Stanton et al (2020), the pandemic has enforced dramatic changes to daily living, in addition to health impacts. These includes changes in physical activity, sleep, smoking and alcohol use.

Based on literature showing that physical activity is related to lower psychological distress (e.g., Ashdown-Franks et al, 2019), the commencement or continuation of physically active pursuits during the pandemic was hypothesized by Stanton et al (2020) to be associated with lower psychological distress. Conversely, pursuit of poor health behaviours - such as drinking and smoking - may be associated with poor mental health.

To investigate these issues, Stanton et al (2020) conducted an online survey of 1491 respondents. Findings of the study confirmed expected trends. Results showed psychological distress was associated with negative changes to health behaviours.

Findings highlighted the protective role of physical activity in promoting positive mental health during the pandemic. In addition, as a fair proportion of the population decreased their activity, findings highlighted the need for strategies to encourage physical activity as a means of maintaining mental health.

While less studied compared to physical activity, few studies have examined changes in leisure behaviour during periods of COVID-19 confinement. A study by Bourdas and Zacharakis (2020), however, examined changes in leisure and sporting activities during COVID-19 in Greece. Findings showed a decline in daily physical activity relating to occupational, transportation and sporting activities, although an 18.8 per cent increase was observed for leisure activities during periods of lockdown.

However, this increased activity did not make up for the reduction of physical activity in other domains. While the authors highlighted that this raised concern for long term health impacts within the population, no specific associations with mental health or wellbeing were examined.

Literature on physical activity and leisure activity during COVID-19 highlights that:

- While there may be some protective effects of physical and leisure activities during the COVID pandemic, precise impacts remain unknown.

Gambling substitution during the COVID-19 pandemic

Online gambling during COVID-19 lockdowns and restrictions also presents a further alternative 'activity' that can be undertaken by gamblers when venues were closed. Hakansson et al (2020) proposed that COVID-19 had potential to worsen both mental health and gambling, along with other addictive behaviours (e.g., video gaming, pornography viewing). This was attributed to financial impacts of the pandemic.

In addition, research has shown that previous financial recessions have exacerbated gambling problems and that women and men have both been affected (e.g., Women were found to be impacted in the Greek study by Economou et al 2019 and men were found to be impacted after turning to online gambling in an Icelandic study by Olasen et al, 2015).

Gainsbury et al (2020) conducted an online survey of 764 participants to assess changes in gambling participation since the shutdown of land-based gambling venues in Australia. Nearly three in four participants reported spending *less time* gambling during the shutdown and 11 per cent increased their time gambling since the shutdown.

Of the group reporting substantial increases in their gambling frequency, 17 per cent were problem gamblers and 38 per cent were moderate risk gamblers. Moreover, 10 per cent reported severe distress and 35 per cent reported moderate distress. Around 25 per cent also had experienced financial difficulties attributed to COVID-19 impacts.

Other results showed that only one per cent of respondents gambled online for the first time ever during the shutdown, highlighting that very few new 'online' gamblers had probably emerged as a result of COVID-19. Participants with higher severity gambling problems were similarly more likely to increase their gambling spend.

In relation to gambling problems, the majority of participants reporting past year gambling indicated that their problems had *decreased* during the shutdown.

Gambler intentions to return to gambling were also explored. Findings suggested that 23 per cent expected to decrease their online gambling once the shutdown was lifted and 27 per cent expected to decrease their land-based gambling once the shutdown was lifted.

Literature on gambling and gambling activity substitution during the COVID-19 pandemic highlights that:

- COVID-19 may have potential to worsen both mental health, gambling and other addictive behaviours (e.g., video gaming).
- Financial recessions have potential to exacerbate gambling problems.
- Shutdowns of venues may improve gambling problems, however, moderate risk and problem gamblers may be over-represented in cohorts that *increase* their gambling.

Key research questions

In the context of literature reviewed, specific research questions of interest in this study were as follows:

- ⇒ What alternate activities did venue-based EGM gamblers do during COVID lockdowns and restrictions?
- ⇒ What gambling did venue-based EGM gamblers do during COVID lockdowns and restrictions?
- ⇒ What financial and health impacts due to COVID were experienced by venue-based EGM gamblers?
- ⇒ What were the psychological effects of COVID on venue-based EGM gamblers?
- ⇒ What proportion and profile of venue-based EGM gamblers returned to venues?
- ⇒ What were positive and negative effects of EGM venue closure on venue-based EGM gamblers?
- ⇒ Why did venue-based EGM gamblers return or not return to venues?
- ⇒ How did gambling participation of venue-based EGM gamblers change since COVID?
- ⇒ How did psychological distress, gambling urges, risk and harm in venue-based EGM gamblers change since COVID?
- ⇒ What activities undertaken during COVID lockdowns and restrictions have replaced EGM gambling?
- ⇒ Are venue-based EGM gamblers interested in recreational activities to support prevention and early intervention of gambling harm?
- ⇒ Did any leisure or gambling activities undertaken during COVID lockdowns and restrictions have any lasting effects?

Approach

Ethics approval

An ethics application was submitted for approval prior to research commencement. The Bellberry Human Research Ethics Committee (HREC) reviewed and approved the study on 9 July 2021 in accordance with the *National Statement on Ethical Conduct in Human Research (2007)*.

After completion of the qualitative research, the project was placed on hold due to the extended lockdowns and restrictions in Victoria during 2021. As a result, one line in the quantitative survey needed to be updated to reflect the new dates of the lockdowns and restrictions, as referenced in the survey. The slightly updated version of the survey was then re-submitted to HREC for approval, which was granted on 17 March 2022.

Research methodologies

Following the literature review, two methods were undertaken to address the study research questions:

- ⇒ Qualitative depth interviews with Victorian venue-based EGM gamblers (n=30)
- ⇒ A quantitative online panel survey of Victorian venue-based EGM gamblers (n=683)

The sample included 251 Non-problem gamblers, 77 Low risk gamblers, 122 Moderate risk gamblers and 233 Problem gamblers.

Qualitative research

A total of 30 one-hour qualitative depth interviews were conducted with venue-based EGM gamblers in August 2021. Interviews were conducted via Zoom webinar software or where preferred by the participant, by telephone. A discussion guide was developed in consultation with VRGF (Appendix A). Victorian gamblers were recruited from a consumer panel and a screening questionnaire was used to ensure that the sample included different types of Victorian gamblers such as:

<ul style="list-style-type: none">• EGM gamblers (All participants)• Table game players• Sports/race punters• Non-problem and low risk gamblers• Moderate risk and Problem gamblers• Older and younger gamblers	<ul style="list-style-type: none">• Males and females• Indigenous gamblers• Gamblers of CALD backgrounds• Metropolitan and regional gamblers• Gamblers who had and had not returned to EGM venues since they re-opened.
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Potential interview participants were provided with written information about the research via email prior to completing the screening questionnaire. This was to ensure that participants were fully aware of the nature of topics discussed so that they had the option to opt-out of screening, should any of the questions be triggering.

Participants were asked to sign a consent form prior to proceeding with the screening questionnaire, to acknowledge that they consented to take part in the study and that they had read, understood and accepted the information and possible risks of the study as described in the HREC-approved Participant Information Sheet.

A further re-checking process was carried out with each interview participant immediately prior to commencement of the interview, to ensure that participants were aware they were not obliged to answer any questions they were uncomfortable with, and that they were free to withdraw from the interview at any point if they found that the content impacted them in any way. No participants withdrew.

The aim of the qualitative research was to understand the impacts of COVID on various aspects of the lives of venue-based EGM gamblers, the activities undertaken during COVID restrictions and their effects on psychological distress, urge to gamble and gambling participation once EGM venues re-opened.

Interview participants received a \$80 e-gift shopping voucher for their time. Qualitative interview notes were entered into NVIVO qualitative analysis package for thematic analysis.

Key topics covered during qualitative interviews included:

- ⇒ In which ways life had changed since the COVID pandemic
- ⇒ What financial stimulus was received during the pandemic
- ⇒ Coping strategies used during the pandemic
- ⇒ Perceived positive and negative effects of EGM venue closures
- ⇒ How gamblers kept busy during COVID lockdowns and restrictions
- ⇒ Any maladaptive health behaviours or issues coping during COVID lockdowns and restrictions
- ⇒ How activities during lockdowns and restrictions influenced mental health and the urge to gamble
- ⇒ Other forms of gambling pursued during COVID lockdowns and restrictions
- ⇒ Whether there were plans to reduce or stop gambling made during lockdowns and restrictions
- ⇒ Why gamblers did or did not return to EGM venues, when they re-opened
- ⇒ Whether activities undertaken during lockdowns and restrictions were continued and had replaced some of the prior EGM venue gambling or gambling generally
- ⇒ Interest in future activity programs to help gamblers reduce reliance on gambling

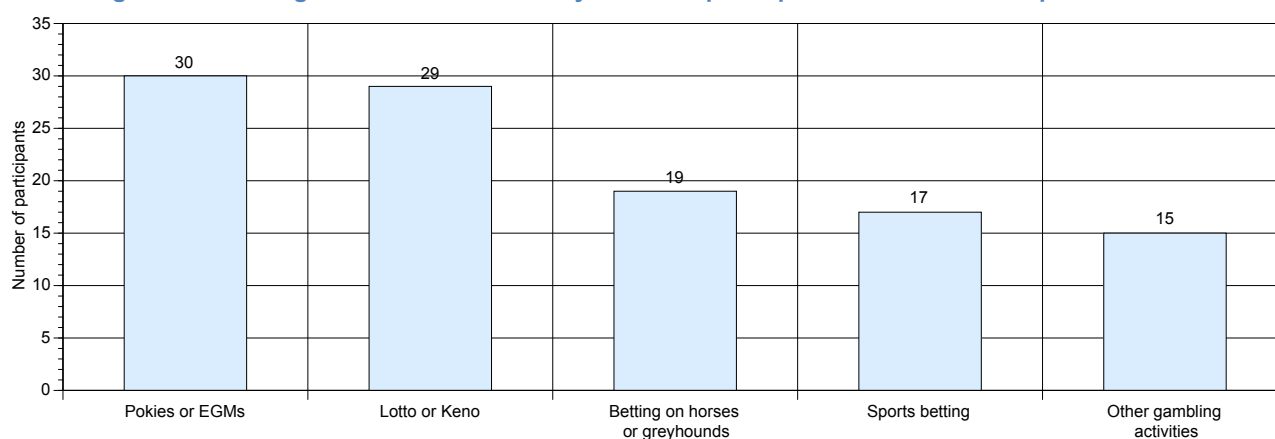
The demographic profile of interview participants is in Table 1. The number of participants who engaged in the various types of gambling activities prior to COVID is in Figure 1.

Table 1. Demographic details of qualitative interview participants

Gender	Age	PGSI segment (Score) in the 12 months pre-COVID	Suburb	Employment status
Female	30-39 years	NPG (0)	Keilor Downs	Working full-time
Female	30-39 years	NPG (0)	Scoresby	Working full-time
Female	60-69 years	NPG (0)	Croydon	Retired / semi-retired
Male	40-49 years	NPG (0)	Maidstone	Working full-time
Male	40-49 years	NPG (0)	St Kilda East	Working full-time
Male	60-69 years	NPG (0)	Box hill south	Working part-time / casually
Female	30-39 years	LR (1)	Ferntree Gully	Working full-time
Female	40-49 years	LR (1)	Mitcham	Working part-time / casually

Gender	Age	PGSI segment (Score) in the 12 months pre-COVID	Suburb	Employment status
Male	30-39 years	LR (1)	Melbourne	Self-employed
Female	50-59 years	LR (1)	Mulgrave	Home / caring duties
Female	40-49 years	LR (1)	Hawthorn	Working full-time
Female	30-39 years	MR (3)	Melbourne	Self-employed
Male	40-49 years	MR (3)	Malvern East	Working full-time
Male	30-39 years	MR (3)	Abbotsford	Self-employed
Male	30-39 years	MR (3)	Mulgrave	Working full-time
Female	60-69 years	MR (4)	Viewbank	Retired / semi-retired
Female	50-59 years	MR (4)	Delacombe	Stay at home parent / partner
Male	50-59 years	MR (4)	Melbourne CBD	Working full-time
Female	50-59 years	MR (5)	Creswick	Working part-time / casually
Male	18-29 years	MR (6)	Narre Warren	Working full-time
Female	40-49 years	MR (7)	North Geelong	Studying
Male	50-59 years	PG (8)	Noble Park	Working full-time
Male	50-59 years	PG (10)	Montmorency	Self-employed
Male	60-69 years	PG (10)	Ballarat	Working part-time / casually
Male	50-59 years	PG (13)	Mt Waverley	Working full-time
Male	40-49 years	PG (13)	Brunswick	Working full-time
Female	40-49 years	PG (14)	Glen Waverley	Working part-time / casually
Male	30-39 years	PG (17)	Dandenong north	Working full-time
Female	60-69 years	PG (20)	South Melbourne	Working full-time
Female	50-59 years	PG (22)	Mt Waverley	Working part-time / casually

Figure 1. Gambling activities undertaken by interview participants in the 12 months prior to COVID



Quantitative research

The quantitative research phase was postponed until March 2022 due to the extended period of COVID lockdowns and restrictions in Victoria. This was critical, given the principal objective of the study was to examine venue-based EGM gambler return to gambling venues. Given that venues re-opened in October 2021, it was also important to conduct the survey at a date several months after EGM gambler behaviours had re-established to allow sufficient time to EGM gamblers to return to venues and resume their patterns of gambling.

An online survey (Appendix B) was conducted in two stages:

- **Stage 1 screening survey** – During this stage, n=2000 Victorian adults on a commercial research panel completed a 6-minute screening survey of their gambling activities and locations (e.g., clubs, pubs, casino, TAB etc.) before COVID-19 restrictions and venue closures and following venue re-opening.

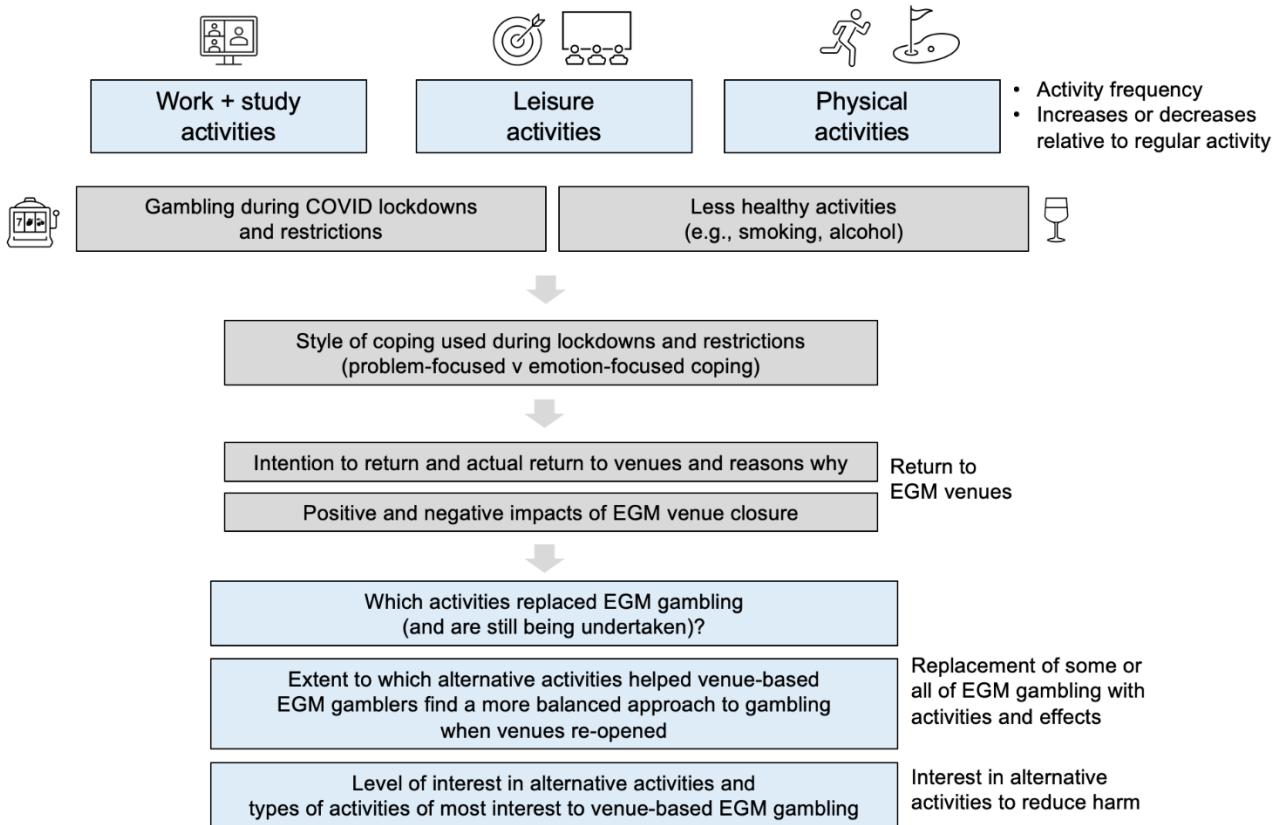
Quotas for age, gender and Victorian region were used, so that the sample more closely reflected the Victorian population (though it should of course be noted that online panels are never a source of fully representative data). To more closely reflect the Victorian population, the data set was also weighted based on age, gender and regions of Victoria, so that weights could be carried across to the second stage venue-based EGM gambler sample.

- **Stage 2 survey of venue-based EGM gamblers** – During this stage, a 20-minute survey was conducted with n=683 EGM gamblers from the above screening sample who had gambled on EGMs in the 12 months prior to COVID-19 in a Victorian EGM venue (i.e., in a club, pub or in the casino) (i.e., 12 months prior to March 2020).

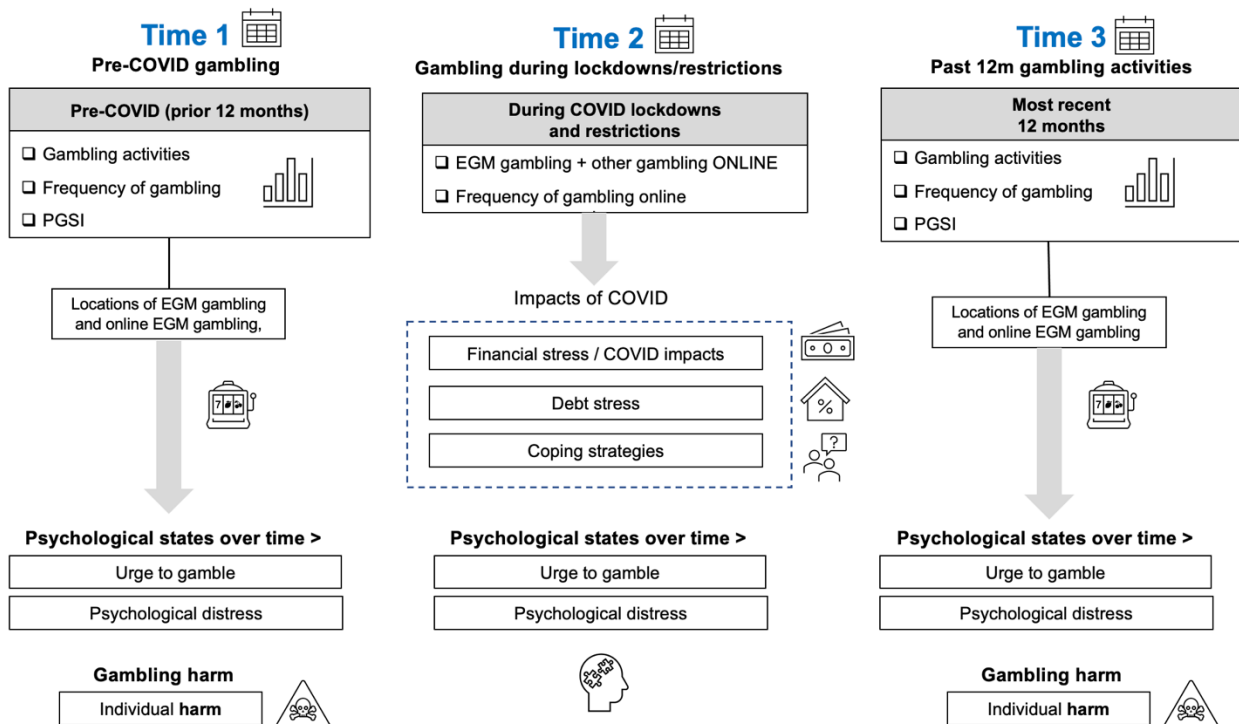
Prior to completion of the survey, in line with ethics procedures, participants were provided with written information about the nature of the research and the types of topics the survey covered. Participants were required to indicate consent on the online survey tool to the content of the Participant Information and Consent Form approved by ethics.

Major variables examined in the quantitative study are summarised in the following conceptual framework.

Alternative activities undertaken during COVID lockdowns and restrictions



Measurement of changes in gambling, gambling risk, harm and psychological states over time



Data analysis

SPSS 27 was used for data analysis with first stage weights from the screening survey used in data analysis for the venue-based EGM gambler cohort.

To explore the main study research questions, data tables were generated based on z-tests for proportions or t-tests for mean differences with significant differences indicated through APA-style notations (significant testing additionally included pair-wise comparisons).

Statistical significance testing was conducted between groups of interest in the study (e.g., non-problem compared to problem gamblers). Results with the same letter within a row in a table are not statistically different, while different letters alongside results indicate a statistically significant difference between groups of $p < .05$. As such, unless otherwise indicated, all results with different letter notations are significantly different to $p < .05$.

In addition to testing of significant differences, exploratory linear multivariate analyses (e.g., step-wise regression) were undertaken to identify statistically significant predictors of a number of outcomes (dependent variables). These included changes in risk for problem gambling, changes in gambling harm and similar outcomes.

This was also used to examine whether any leisure activities undertaken during COVID lockdowns and restrictions had any lasting effects on survey respondents (e.g., whether they had increased in risk for problem gambling from pre-COVID to the most recent 12 months). In some analyses, partial correlations were additionally used to identify the extent that particular variables uniquely accounted for variance in other variables (i.e., partial correlations provide the unique predictive power of a given variable).

Results

Results are presented in line with the key research questions:

- What alternate activities did venue-based EGM gamblers do during COVID lockdowns and restrictions?
- What gambling did venue-based EGM gamblers do during COVID lockdowns and restrictions?
- What financial and health impacts due to COVID were experienced by venue-based EGM gamblers?
- What were the psychological effects of COVID on venue-based EGM gamblers?
- What proportion and profile of venue-based EGM gamblers returned to venues?
- What were positive and negative effects of EGM venue closure on venue-based EGM gamblers?
- Why did venue-based EGM gamblers return or not return to venues?
- How did gambling participation of venue-based EGM gamblers change since COVID?
- How did psychological distress, gambling urges, risk and harm in venue-based EGM gamblers change since COVID?
- What activities undertaken during COVID lockdowns and restrictions have replaced EGM gambling?
- Are venue-based EGM gamblers interested in recreational activities to support prevention and early intervention of gambling harm?
- Did any leisure or gambling activities undertaken during COVID lockdowns and restrictions have any lasting effects?

1. What alternate activities did venue-based EGM gamblers do during COVID lockdowns and restrictions?

The activities that venue-based EGM gamblers most frequently took part in during COVID lockdowns and restrictions were using the internet for leisure (92.2 per cent), watching TV, movies and videos (91.8 per cent) and undertaking chores or work around the home not involving physical activity (e.g., cooking) (83.9 per cent) (Figure 2). In addition, 79.6 per cent socialised with family and friends and 72.8 per cent did hobbies or leisure activities of a non-physical nature.

No differences in activity patterns were observed for low risk gamblers, compared to non-problem gamblers. However, moderate risk and problem gamblers showed a number of activity patterns that differed from non-problem gamblers.

Moderate risk and problem gamblers were *more frequently* engaged in playing video games during lockdowns and restrictions (60.6 per cent and 76.2 per cent participated in video games, compared to only 44.7 per cent of non-problem gamblers) and also participated more frequently in sport/resistance training/mind body exercise (e.g., in the case of problem gamblers completing activities 'sometimes/often/always', results were 68.1 per cent for sport/70.6 per cent for resistance training/67.8 per cent for mind body exercise, compared to 15.5 per cent/35.4 per cent/24.9 per cent for non-problem gamblers for the same three activities).

The top five activities commonly reported by venue-based EGM gamblers as positively impacting health and wellbeing during the period when venues were closed included watching TV, movies and videos (25.7 per cent), interacting with pets or animals (24.3 per cent), home schooling and caring for children (23.2 per cent), doing cardiovascular exercise (e.g., walking, running) (excluding sports) (22.3 per cent) and doing physically demanding work around the home (e.g., gardening, renovations, DIY) (20.7 per cent).

Problem gamblers were the only risk segment that did not mention cardiovascular exercise in the top five activities that had the most positive impact on health and wellbeing. In particular, only 5.6 per cent of problem gamblers identified cardiovascular exercise as having a positive impact on health and wellbeing and this was significantly lower than all other risk segments.

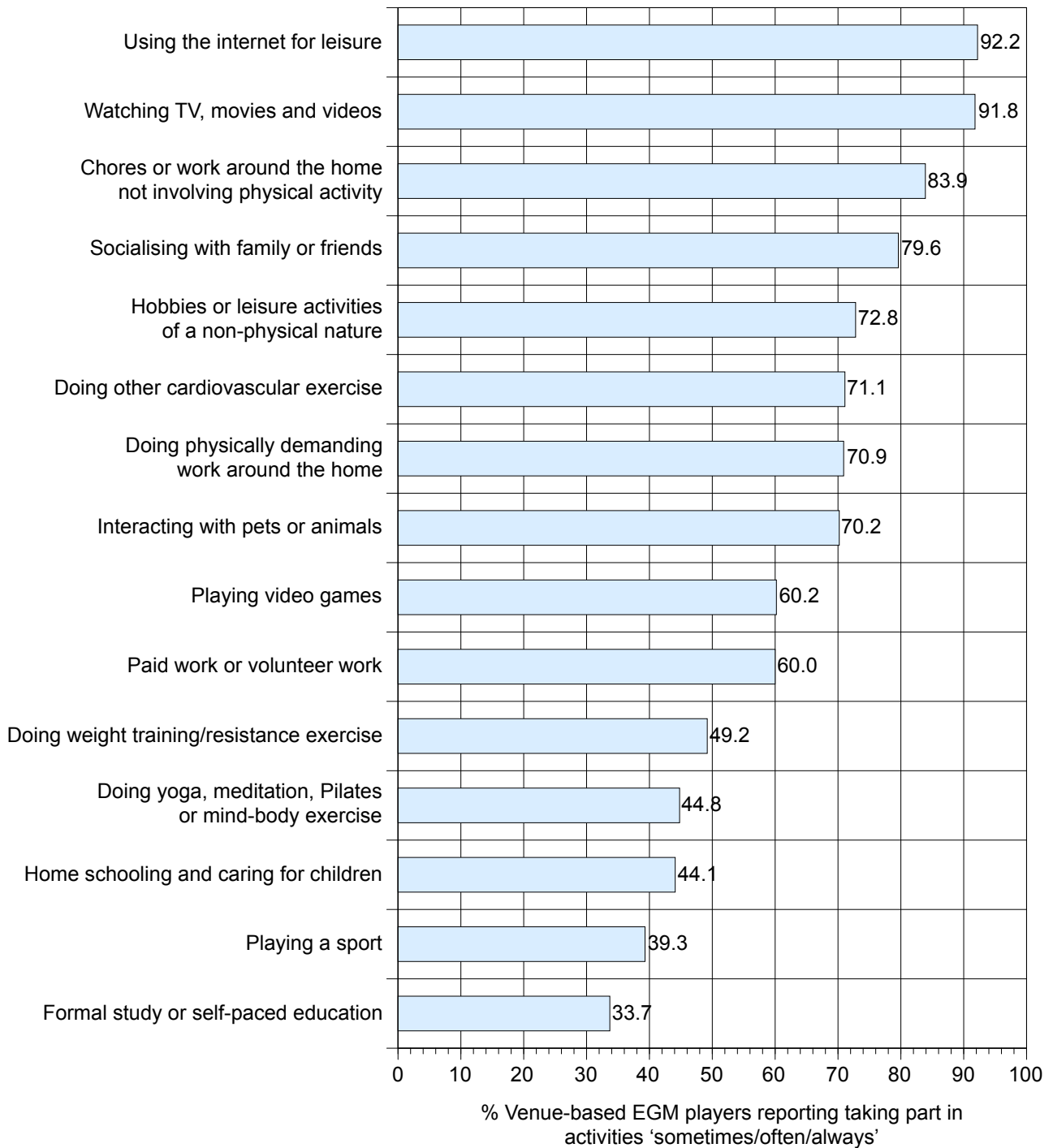
A greater proportion of problem gamblers reported a positive impact from very solitary 'screen-based' activities than other risk segments (e.g., watching TV, movies and videos). While it is unclear why these activities had a positive impact, it is possible that screen-based activities may offer problem gamblers some level of 'escapism', similar to EGMs.

In particular, there was a positive bivariate correlation between video gaming and psychological distress experienced by problem gamblers during the lockdowns and restrictions ($r=.14$, $p<.05$). A similar bivariate trend was observed for moderate risk gamblers (although noting that $r=.17$, $p=.05$). This raises the possibility that video games may have been used as a coping strategy.

When asked about the impact of activities during lockdowns and restrictions on their gambling urges, problem gamblers were less likely compared to non-problem gamblers (40.3 per cent) to report that 'none' of the measured activities reduced their gambling urges (only 3.8 per cent), as were moderate risk gamblers (12.3 per cent).

This may suggest that activities do indeed have an impact on gambling urges for higher risk segments.

Figure 2. Non-gambling activities of venue-based EGM gamblers during COVID lockdowns and restrictions – Results by risk for problem gambling (during the 12 months before COVID) (N=683, March – April 2022)



Question: During COVID lockdowns and restrictions (when pokies were closed), how often did you do the following activities? Scale: 1=Never, 2=Rarely, 3=Sometimes, 4=Often, 5=Always). Base: Venue-based EGM gamblers during the 12 months before COVID. Weighted results. Note that socialising with family and friends included virtual socialising by phone and video.

Qualitative interviews with venue-based EGM gamblers revealed similar findings. Home improvement activities and physical exercise were very popular in participants taking part in qualitative interviews. Use of the internet led some participants to enjoy learning new activities, such as learning from documentaries and learning another language.

Verbatims illustrating the types of activities enjoyed by qualitative interview participants included:

- *I got addicted to games on the computer. (Problem gambler)*
- *I try to put more time and effort back into the house, especially DIY jobs around the house. (Problem gambler)*
- *We learned to play board games. (Problem gambler)*
- *I used to walk 20-25 kilometres a day. (Non-problem gambler)*
- *I do a bit of yoga – through an apple fitness app on my Apple Watch. I'd taken it up from the start of COVID – it's meant to be good for you, so I thought I'd give it a go. (Moderate risk gambler)*
- *I do quite a lot of baking to break the boredom. (Low risk gambler)*
- *I used online games as an escape. (Moderate risk gambler)*

2. What gambling did venue-based EGM gamblers do during COVID lockdowns and restrictions?

The highest-participation gambling activities during COVID lockdowns and restrictions were lottery tickets from a shop or online (72.8 per cent), betting on horse, harness racing or greyhounds online (56.8 per cent), Scratch tickets from a shop or online (53.4 per cent), betting on sports online (46.6 per cent) and informal private betting for money - like playing cards at home (44.1 per cent).

Compared to non-problem gamblers, moderate risk and problem gamblers reported significantly higher participation in all gambling activities during COVID lockdowns and restrictions, virtually all of which were undertaken online ($p < .05$) (Refer Box 1 to Box 4 for top gambling activities by risk segment and Figure 3).

EGM gambling online during COVID lockdowns and restrictions was undertaken amongst venue-based EGM gamblers by 10.1 per cent of non-problem gamblers, 20.5 per cent of low risk gamblers, 31.1 per cent of moderate risk gamblers and by 85.5 per cent of problem gamblers.

The top gambling activity participation changes from pre-COVID to during COVID lockdowns and restrictions for venue-based EGM gamblers were pokies or electronic gaming machine participation (decreased 56.2 per cent), table game betting (decreased 16.1 per cent), keno (decreased 13.6 per cent), scratch tickets (decreased 11.9 per cent) and Australian lotteries (decreased 11.1 per cent) (Figure 4).

Problem gamblers reported the smallest decrease in gambling participation during COVID lockdowns and restrictions of all risk segments (Figure 5).

Box 1. Gambling activities during COVID lockdowns and restrictions – problem gamblers

The top gambling activities during COVID lockdowns and restrictions included:

- Betting on horse, harness racing or greyhounds online (89 per cent)
- Buying a ticket in Australian lotteries, such as Tattsлото, Oz Lotto, Powerball or Pools from a shop or online (87.6 per cent)
- Buying Scratch tickets from a shop or online (86.4 per cent)
- Pokies or electronic gaming machines online (85.5 per cent)
- Betting on sports online - like AFL or cricket (85.2 per cent)

Box 2. Gambling activities during COVID lockdowns and restrictions – moderate risk gamblers

The top gambling activities during COVID lockdowns and restrictions included:

- Buying a ticket in Australian lotteries, such as Tattsлото, Oz Lotto, Powerball or Pools from a shop or ONLINE (74.9 per cent)
- Betting on horse, harness racing or greyhounds online (50.3 per cent)
- Buying Scratch tickets from a shop or online (42.8 per cent)
- Betting on sports online - like AFL or cricket (35.4 per cent)
- Pokies or electronic gaming machines online (31.1 per cent)

Box 3. Gambling activities during COVID lockdowns and restrictions – low risk gamblers

The top gambling activities during COVID lockdowns and restrictions included:

- Buying a ticket in Australian lotteries, such as Tattsлото, Oz Lotto, Powerball or Pools from a shop or online (57.4 per cent)
- Betting on horse, harness racing or greyhounds online (42.2 per cent)
- Buying Scratch tickets from a shop or online (35.3 per cent)
- Informal private betting for money - like playing cards at home (25.7 per cent)
- Betting on sports online - like AFL or cricket (22.7 per cent)

Box 4. Gambling activities during COVID lockdowns and restrictions – non-problem gamblers

The top gambling activities during COVID lockdowns and restrictions included:

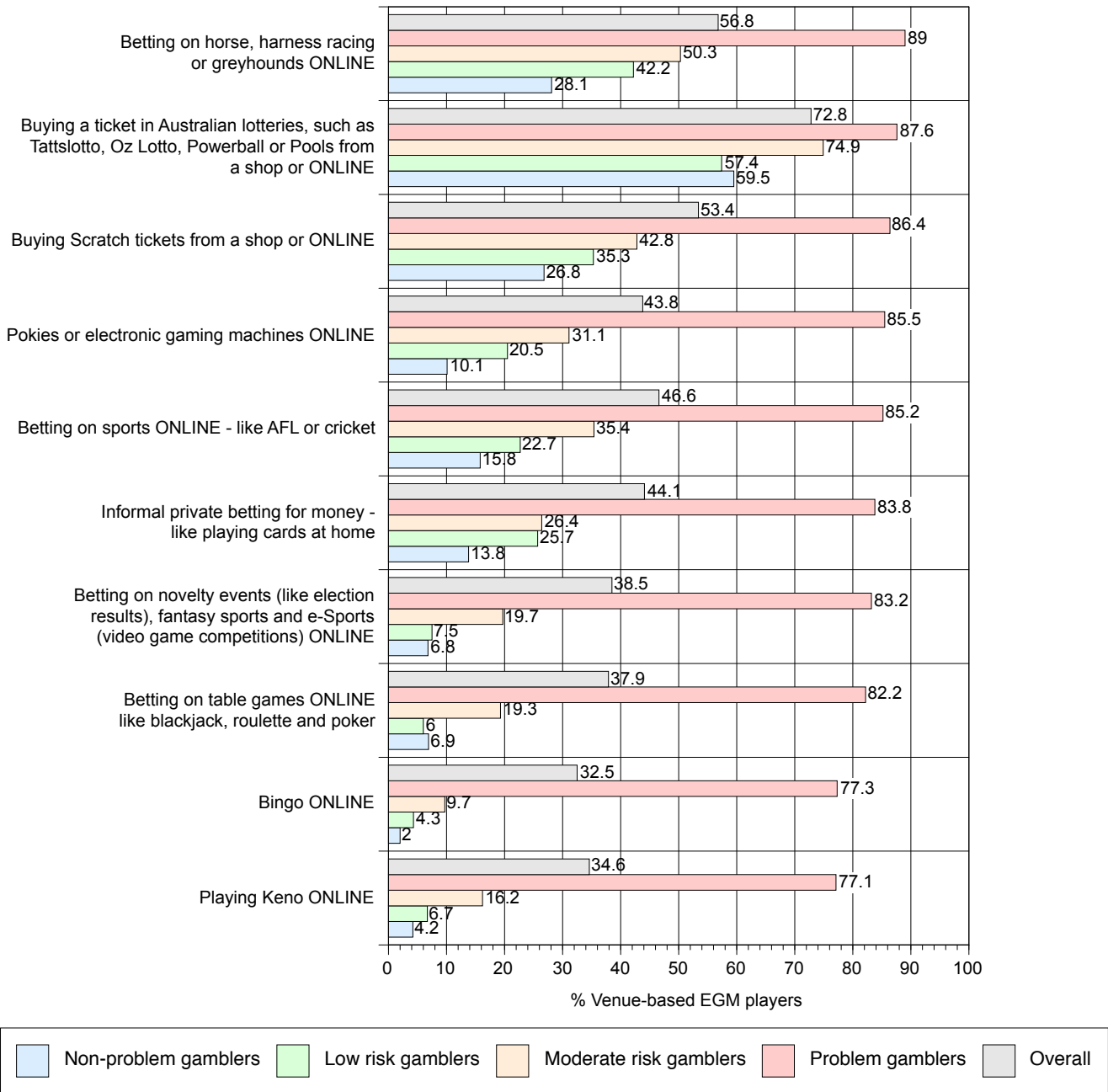
- Buying a ticket in Australian lotteries, such as Tattsлото, Oz Lotto, Powerball or Pools from a shop or online (59.5 per cent)
- Betting on horse, harness racing or greyhounds online (28.1 per cent)
- Buying Scratch tickets from a shop or online (26.8 per cent)
- Betting on sports online - like AFL or cricket (15.8 per cent)
- Informal private betting for money - like playing cards at home (13.8 per cent)

Reflecting the observed trend for problem gamblers, a number of venue-based EGM gamblers who were problem gamblers reported in qualitative interviews engaging in online EGM gambling during COVID lockdowns and restrictions, highlighting the greater convenience and ease of access to online EGMs.

Illustrative verbatims included:

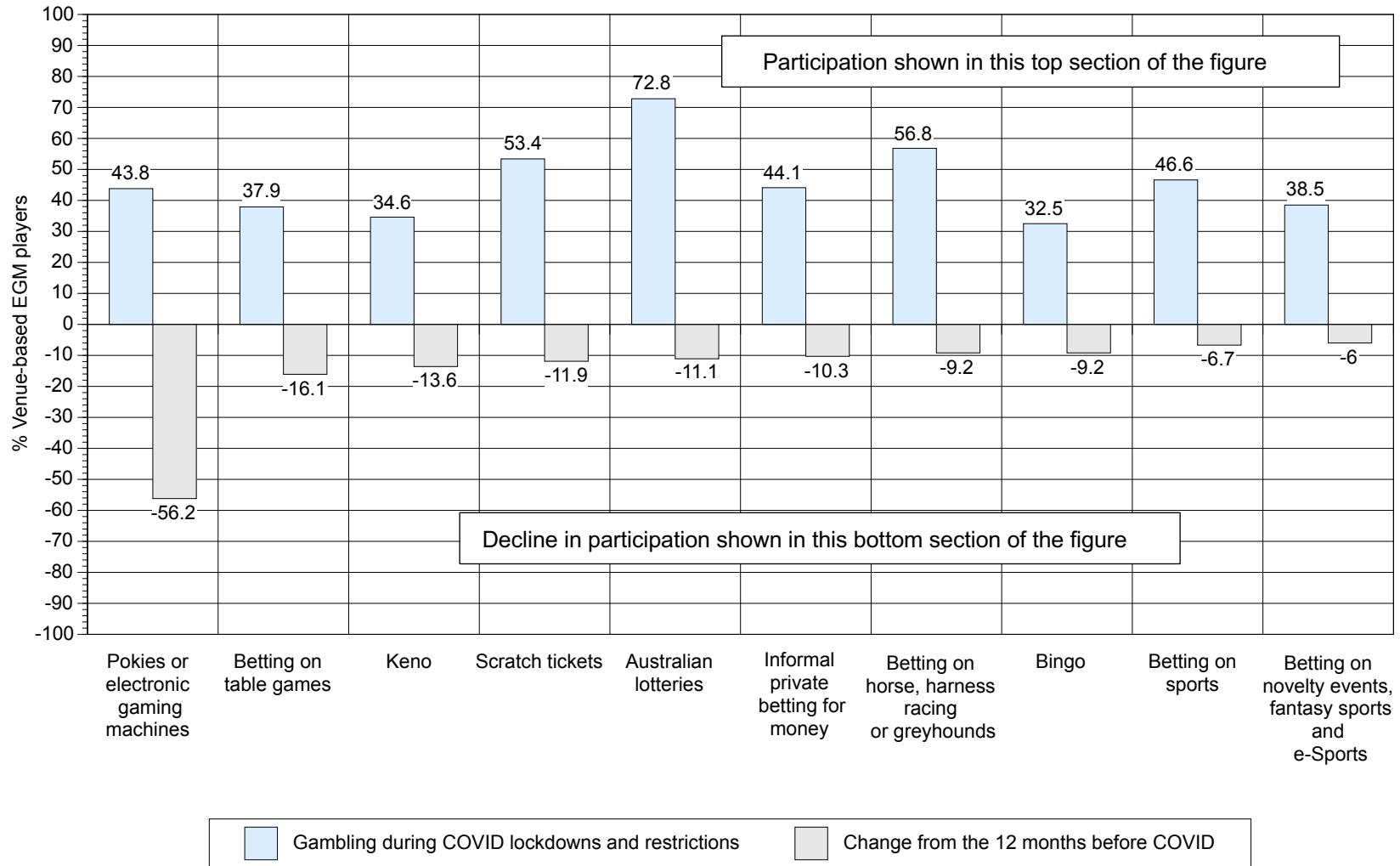
- *I was able to still do it on my computer or phone, so it did not really impact me that much. I got a bit lazy, so I prefer to do it on my phone now, rather than going out. (Problem gambler)*
- *I'm spending a little more with pokies online, as I can't have friends and the social aspect and the drinking. (Problem gambler)*
- *It's definitely more time and money - due to the convenience. At least 25 per cent more. (Problem gambler)*

Figure 3. Gambling activities of venue-based EGM gamblers during COVID lockdowns and restrictions - Results by risk for problem gambling (during the 12 months before COVID) (N=683, March – April 2022)



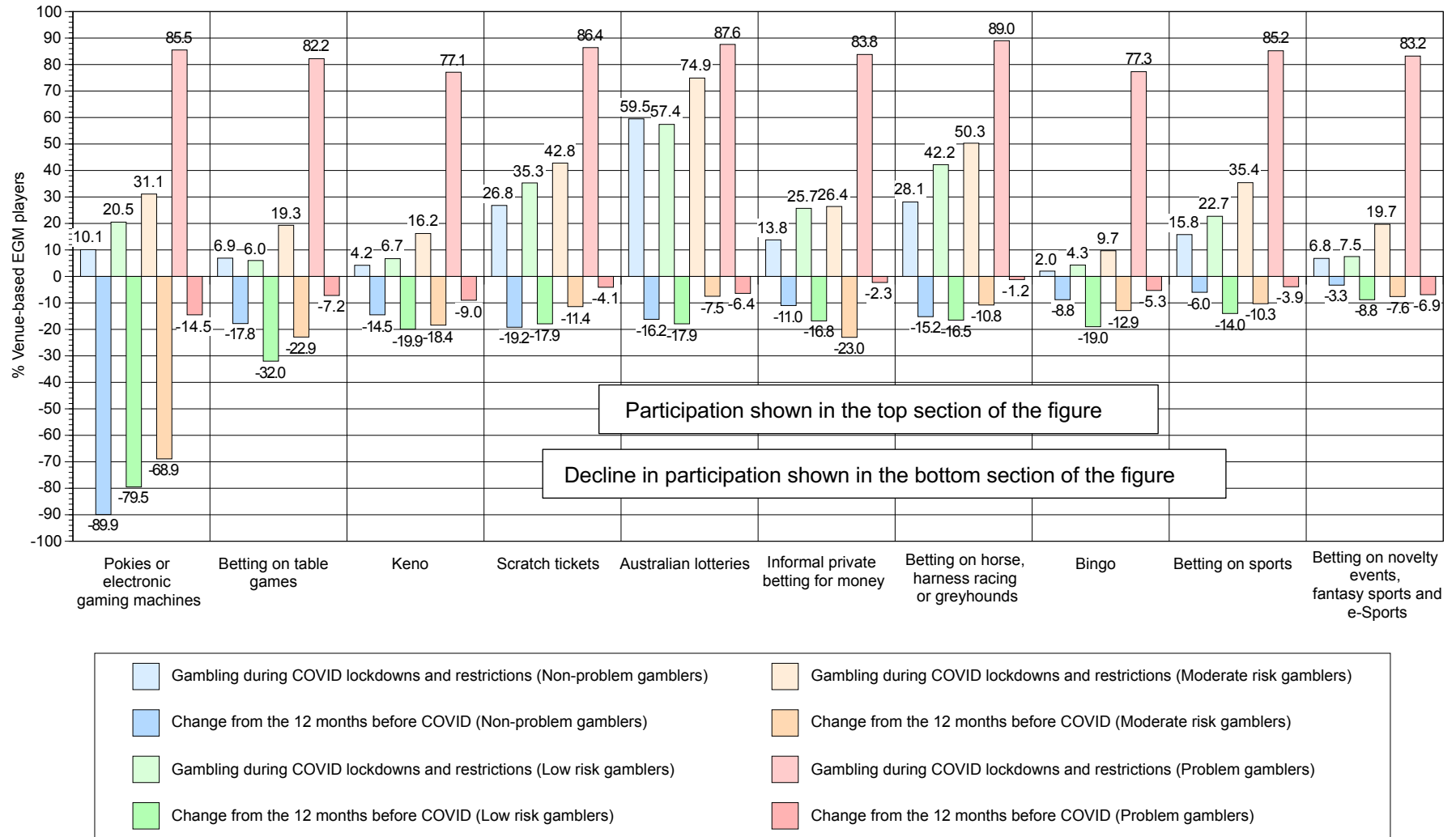
Question: Victorian pokies venues have been closed from time to time due to COVID lockdowns or restrictions. This included an initial long shut down period of six months from March to October 2020 and various other lockdowns and restrictions during February 2021 and from May to October 2021. During COVID lockdowns and restrictions in Victoria (when pokies venues were closed), how often did you spend money on the following gambling activities? Base: Venue-based EGM gamblers during the 12 months before COVID. Weighted results.

Figure 4. Change in gambling activity participation of venue-based EGM gamblers in the 12 months before COVID-19 to during COVID lockdowns and restrictions (N=683, March – April 2022)



Question: Victorian pokies venues have been closed from time to time due to COVID lockdowns or restrictions. This included an initial long shut down period of six months from March to October 2020 and various other lockdowns and restrictions during February 2021 and from May to October 2021. During COVID lockdowns and restrictions in Victoria (when pokies venues were closed), how often did you spend money on the following gambling activities? Base: Venue-based EGM gamblers during the 12 months before COVID. Weighted result

Figure 5. Change in gambling activity participation of venue-based EGM gamblers in the 12 months before COVID-19 to during COVID lockdowns and restrictions - Results by risk for problem gambling (during the 12 months before COVID) (N=683, March – April 2022)



Question: Victorian pokies venues have been closed from time to time due to COVID lockdowns or restrictions. This included an initial long shut down period of six months from March to October 2020 and various other lockdowns and restrictions during February 2021 and from May to October 2021. During COVID lockdowns and restrictions in Victoria (when pokies venues were closed), how often did you spend money on the following gambling activities? Base: Venue-based EGM gamblers during the 12 months before COVID. Weighted results.

3. What financial and health impacts due to COVID were experienced by venue-based EGM gamblers?

Overall, in relation to COVID financial stimulus, 19.9 per cent of venue-based EGM gamblers received JobKeeper, 16.8 per cent received JobSeeker, 15.3 per cent withdrew money from superannuation and 4.9 per cent received Victorian Government small business assistance grants or funding.

Overall, 38.4 per cent of venue-based EGM gamblers reported debt stress (Figure 6) and 42.2 per cent reported financial distress (Figure 7). It is similarly noteworthy that venue-based EGM gamblers experiencing somewhat or very severe financial distress due to COVID were significantly more likely to gamble on table games online during lockdowns and restrictions, after controlling for pre-COVID risk for problem gambling. However, the association was small (partial correlation - $r=.10$, $p=.01$).

Venue-based EGM gamblers experiencing somewhat or very severe financial distress were additionally no more likely to gamble on any of the main four gambling activities in the most recent 12 months (i.e., EGMs, wagering, sports, table games), after controlling for pre-COVID risk for problem gambling (although a very small significant partial correlation with sports betting emerged, the r value was small at $r=.08$, $p<.05$).

When the association between financial distress and coping strategies was explored, findings showed that use of emotion focused coping was associated with financial distress, even after controlling for risk for problem gambling (partial correlation - $r=.25$, $p<.005$). A similar trend emerged for turning to activities that were not good for health and wellbeing (e.g., increased use of alcohol, smoking, over-eating) (partial correlation - $r=.25$, $p<.005$).

This suggests that this cohort may have used emotion-based coping to deal with the emotional turmoil presented by the pandemic.

Further reflecting this, after controlling for risk for problem gambling, they experienced higher psychological distress during lockdowns and restrictions (partial correlation - $r=.22$, $p<.001$), though did not experience increased gambling urges nor changes in gambling harm from pre-COVID to the most recent 12 months, nor had any higher participation in the four main types of gambling post-COVID (i.e., EGMs, wagering, sports betting and table game betting).

This may suggest that, while their distress was high, as a general rule, it was not associated with gambling activity (apart from the result pertaining to online table games during COVID lockdowns and restrictions).

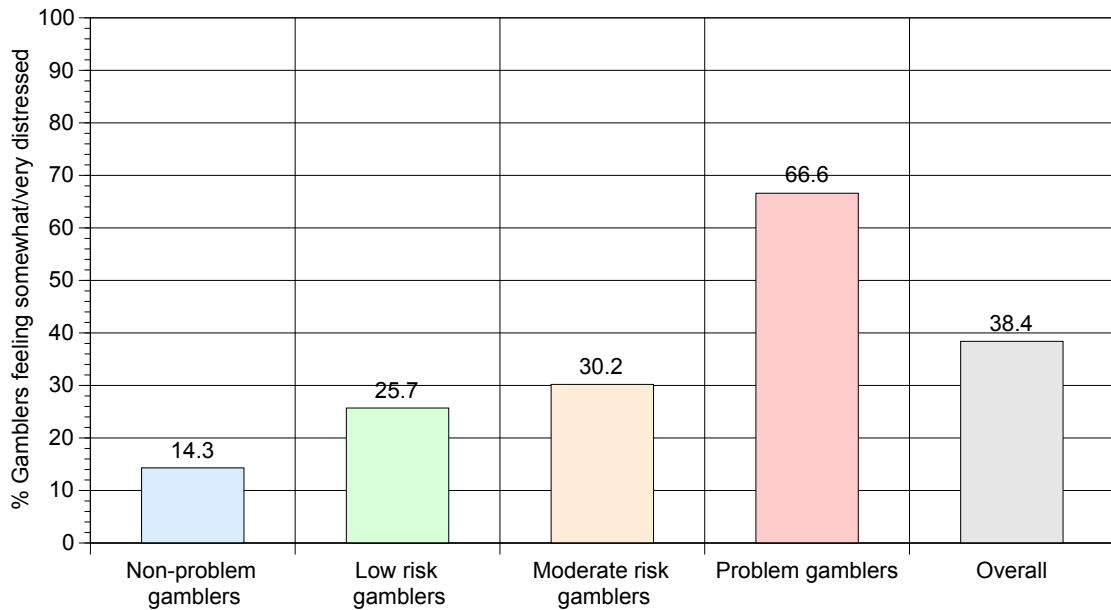
Overall, in relation to job and work impacts, 18.1 per cent lost their job completely, 34.8 per cent had reduced work hours or pay, or were stood down, 31.7 per cent were in a business impacted financially by COVID and 28.4 per cent worked in essential jobs during COVID.

Higher gambling risk segments were more financially impacted by COVID and especially problem gamblers. In addition, nearly half of venue-based EGM gamblers (46.4 per cent) spent their financial stimulus on gambling. This was also more commonly reported by problem gamblers (61.2 per cent).

Reflecting the financial impacts, a significantly higher proportion of problem gamblers:

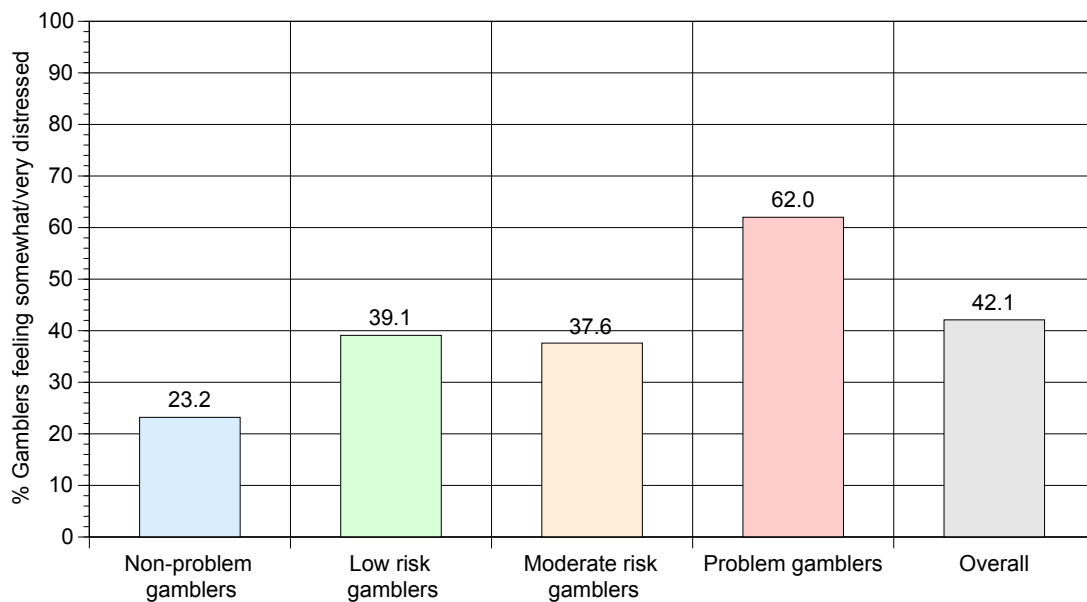
- Received JobKeeper (27.5 per cent), relative to non-problem gamblers (14.3 per cent) and low risk gamblers (11.9 per cent).
- Received JobSeeker (30.7 per cent), compared to other risk segments (7.7 per cent for non-problem gamblers, 8.8 per cent for low risk gamblers and 8.6 per cent for moderate risk gamblers).
- Took money out of super (23.3 per cent), compared to non-problem gamblers (7.1 per cent), and low risk gamblers (10.6 per cent).
- Reported receiving business assistance or grants funding (10.8 per cent), compared to other risk segments (0.3 per cent for non-problem gamblers, 2.5 per cent for low risk gamblers and 2.4 per cent for moderate risk gamblers).
- Reported being somewhat or very distressed by debts (66.7 per cent), compared to non-problem gamblers (14.3 per cent), low risk gamblers (25.8 per cent) and moderate risk gamblers (30.2 per cent).
- Reported feeling somewhat or very stressed with their overall financial situation (62 per cent), compared to 23.2 per cent of non-problem gamblers, 39.1 per cent of low risk gamblers and 37.6 per cent of moderate risk gamblers.
- Reported losing their job completely (35.5 per cent), compared to 4.6 per cent of non-problem gamblers, 8.6 per cent of low risk gamblers and 11.3 per cent of moderate risk gamblers.
- Reported reduced work hours, pay or being stood down from a job (51.3 per cent), compared to 21.6 per cent (each) of non-problem gamblers and low risk gamblers and 31.9 per cent of moderate risk gamblers.
- Reported having a business financially impacted by COVID (48.3 per cent), compared to 19.2 per cent of non-problem gamblers, 20.9 per cent of low risk gamblers and 25.4 per cent of moderate risk gamblers.

Figure 6. Proportion of venue-based EGM gamblers that felt debt-related distress during COVID lockdowns and restrictions - Results by risk for problem gambling (during the 12 months before COVID) (N=683, March – April 2022)



Question: During COVID lockdowns and restrictions (when pokies venues were closed) (A) How distressed did you feel about your ability to pay debts, loans or mortgages? Base: Venue-based EGM gamblers during the 12 months before COVID. Weighted results.

Figure 7. Proportion of venue-based EGM gamblers that felt distressed about their overall financial situation during COVID lockdowns and restrictions - Results by risk for problem gambling (during the 12 months before COVID) (N=683, March – April 2022)



Question: During COVID lockdowns and restrictions (when pokies venues were closed) (B) How distressed did you feel about your overall financial situation? Base: Venue-based EGM gamblers during the 12 months before COVID. Weighted results.

Qualitative interviews with EGM gamblers highlighted that many higher risk segments turned to online gambling during COVID lockdowns and restrictions. Sports betting apps and online EGMs were particularly popular. Some gamblers reported taking up new gambling activities for the first time, or increasing their participation in particular types of online gambling.

Illustrative verbatims included:

- *I've gotten into watching sport since the pandemic – now I'm watching more sports and gambling on it. (Moderate risk gambler)*
- *I probably do more on TAB and Sportsbet now. (Problem gambler)*
- *It was three-four weeks after lockdown, I went into the online pokies full on. (Problem gambler)*
- *The depression of being locked up all the time - it's made me gamble more online. You're so bored, you end up playing them. (Problem gambler)*
- *I think the online gambling replaced my pokies venue gambling. I had more free time and went online to sports bet. (Problem gambler)*
- *I never bet on greyhounds until COVID - now I bet three or times times per week. (Non-problem gambler)*
- *I started taking up other gambling habits – buying more Tatts lotto tickets, almost weekly. (Non-problem gambler)*
- *I went into sports betting into the second week of the big lockdown. At the time, my housemate was doing it and said I should do it. It was the footy and cricket. It made me think about the pokies and it reinforced the desire to gamble. I think I was also thinking of making money for financial security (Moderate risk gambler).*

4. What were the psychological effects of COVID on venue-based EGM gamblers?

Overall, problem-focused coping was generally higher than emotion-focused coping during the COVID lockdowns and restrictions amongst venue-based EGM gamblers (means=3.1-3.2 versus means=2.6-2.7) (1=Never, 5=Always). This suggests that overall, most venue-based EGM gamblers tried to deal with the pandemic using positive coping strategies.

Problem-focused coping was also higher for all risk segments of gamblers, apart from problem gamblers. Problem gamblers had the highest mean rating for finding it difficult to make plans, as they were emotionally overwhelmed (mean=3.4) and turning to activities that were not good for health and wellbeing (mean=3.3) (1=Never, 5=Always).

Results generally highlighted that problem gamblers had more difficulty coping with COVID lockdowns and restrictions and struggled to use problem-focused coping to deal with emotional impacts of the pandemic.

In relation to unhealthy behaviours undertaken during COVID lockdowns and restrictions, 19.9 per cent of venue-based EGM gamblers increased their alcohol consumption, 10.3 per cent increased their smoking and 28 per cent increased their consumption of junk food or less healthy food (Figure 8).

In addition, a significantly higher proportion of moderate risk gamblers (25.6 per cent) increased their alcohol consumption, compared to non-problem gamblers (16.6 per cent) and a significantly higher proportion of both moderate (13.1 per cent) and problem gamblers (14.6 per cent) increased their cigarette or cigar smoking during COVID, compared to non-problem gamblers (4.7 per cent).

Comments from qualitative interviews with venue-based EGM gamblers illustrated the difficulty that some experienced with coping during COVID lockdowns and restrictions. Anecdotally, higher risk gamblers also tended to report higher use of emotion-focused coping:

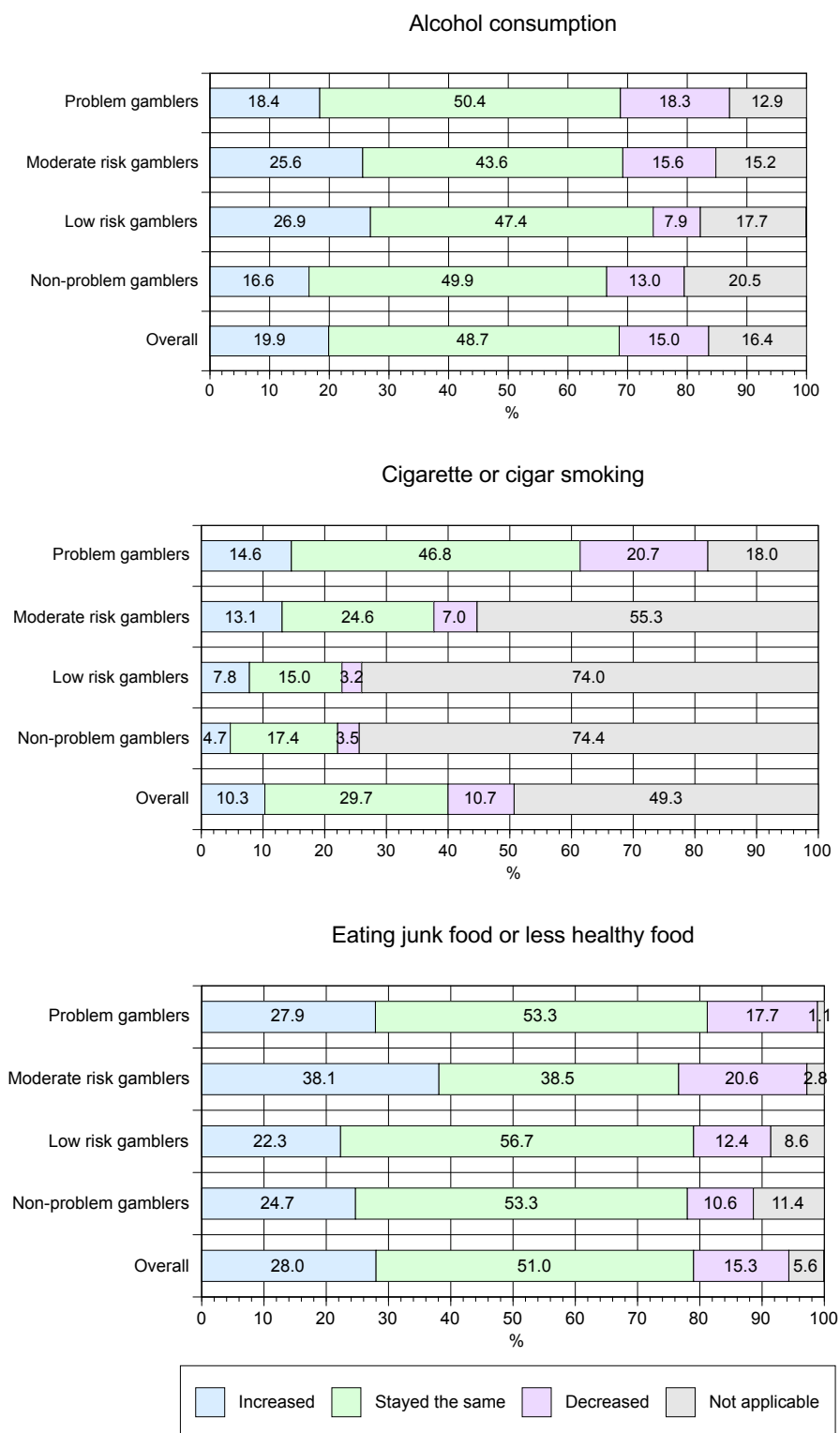
- *I haven't used any coping strategies, as I haven't dealt with it well. I don't want to burden people with my issues. I need some coping mechanisms, especially at night - it's just because problems seem bigger in bed. (Problem gambler)*
- *During the lockdowns, I did try to continue with exercise overall, but I found it hard to cope. (Problem gambler)*
- *I think I've been gambling, as it lifts the spirits and I'm chasing the win as well. (Moderate risk gambler)*
- *Eating chocolate has taken my mind off things. (Moderate risk gambler)*
- *Dan Murphy's was my coping strategy. I did drink more than usual. (Problem gambler)*
- *Last year I got up, ate and went back to bed after TV. I got into a really bad routine. (Problem gambler)*

Qualitative interviews also revealed that some EGM gamblers did adopt effective problem-focused coping strategies. Engaging in a regular exercise routine, maintaining communication with friends and family, and getting involved in home improvement activities were some of the most commonly mentioned strategies.

Comments reflecting the use of problem-focused strategies included:

- *I painted the whole outside of the house last year. I cut down trees. I did 2 hours per day. (Problem gambler)*
- *I like to be productive – I'd write a list, so I could see that I'd achieved something. (Moderate risk gambler)*
- *We were making sure that we made an effort to get out each day for a walk or bike ride and go a different way to change it up a bit. (Moderate risk gambler)*
- *I walked the dogs twice a day. (Non-problem gambler)*
- *I have had counselling – so I think that has helped. (Problem gambler)*
- *Overall, I think physical activity has been up there with the biggest coping mechanism and communications with friends – like the Zoom chats. (Moderate risk gambler)*
- *I always looked for something physical to do like walking or mowing the lawn to keep on track. (Moderate risk gambler)*
- *I had a good strategy to deal with my front garden and I started pulling everything out to cut it back and re-propagating and it's come back really nice. (Non-problem gambler)*
- *I found that meditation was very useful – I did the morning classes daily at 8am for 30 minutes – it was a free class. It was run through Facebook and it was open for anyone to join. That was my main coping strategy. (Low risk gambler)*

Figure 8. Health impacts on venue-based EGM gamblers during COVID lockdowns and restrictions - Results by risk for problem gambling (during the 12 months before COVID) (N=683, March – April 2022)



Question: During COVID lockdowns and restrictions (when pokies venues were closed), did your... (A) Alcohol consumption (B) Cigarette or cigar smoking (C) Eating junk food or less healthy food 1. Increase 2. Stay the same 3. Decrease. Base: Venue-based EGM gamblers during the 12 months before COVID. Weighted results.

5. What proportion and profile of venue-based EGM gamblers returned to venues?

Overall, 68 per cent of venue-based EGM gamblers reported returning to Victorian EGM venues in the most recent 12 months (Figure 9).

A significantly higher proportion of problem gamblers (83.2 per cent) reported returning to venues than any of the other gambling risk segments ($p < .05$). Differences in the proportions of venue-based EGM gamblers returning for non-problem, low risk and moderate risk segments were not statistically different.

A significantly higher proportion of venue-based EGM gamblers returning to EGM venues were male (63.9 per cent), males aged 18-34 years (30.1 per cent of those returning to venues versus 11.3 per cent of those who did not return) and a significantly lower proportion were females aged 35-49 years (9.6 per cent of those returning to venues versus 16.5 per cent for those who did not return) and females aged 50 or older (11.9 per cent of those returning to venues versus 22.9 per cent for those who did not return) (Table 2).

A significantly higher proportion of EGM gamblers with substance use disorders returned to venues (21.7 per cent versus 13.2 per cent for those who did not return), as did EGM gamblers with personality disorders (16.0 per cent versus 9.4 per cent for those who did not return).

Around 20.5 per cent of venue-based EGM gamblers returning to EGM venues had a probable serious mental illness (based on a Kessler 6 score of 19-30) versus only 10.9 per cent of those who did not return.

When probable mental illness was analysed by gender (based on a Kessler 6 score of 19-30), one in five venue-based EGM gamblers returning to venues had a probable serious mental illness (20.9 per cent of males, 19.7 per cent of females).

However, when analysed by gender, a significantly higher proportion of females returning to EGM venues (19.7 per cent) had a probable serious mental illness (had a Kessler 6 score of 19-30), compared to females not returning to venues (only 5.9 per cent) ($p < .05$).

This may suggest that venue-based EGM gambling post-COVID may be used as a coping mechanism for some EGM gamblers and especially females who experienced a probable serious mental illness prior to COVID.

It is similarly noteworthy that 61 per cent of returning problem gamblers classified into pathway three in the Pathways Model (a cohort that experiences high levels of impulsivity, risk-taking, antisocial traits) (Nower et al., 2021). Returning venue-based EGM gamblers were also less likely to be in the behaviourally-conditioned pathway (i.e., the pathway with the least comorbidity), compared to those who did not return.

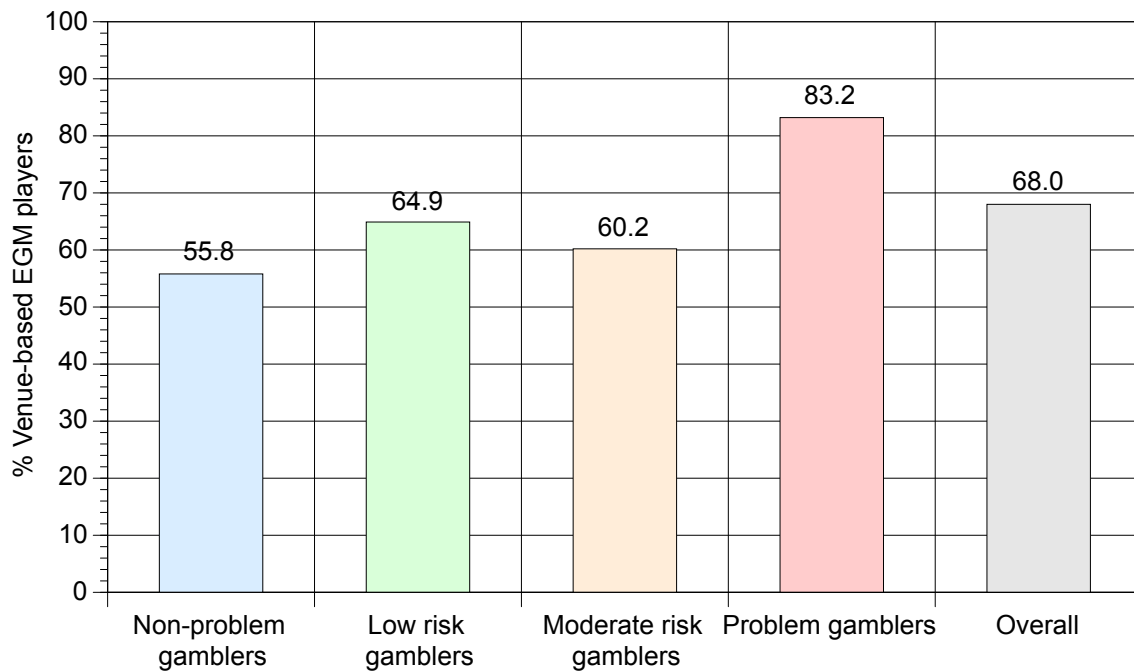
This may suggest that the returning problem gambling cohort has higher comorbidity than problem gamblers who did not return.

Qualitative interviews with EGM gamblers supported the finding that a higher proportion of problem gamblers returned to venues than other risk segments. Many reported wanting to go back as quickly as possible. In comparison, many of the non-problem gamblers often reported indifference about going back to venues.

Comments included:

- *Yes, I went two or three times because it's close to home. Sometimes I did it at lunch time. It's a habit like going for coffee. (Problem gambler)*
- *I went back the next day after the casino opened - we went with friends to the pokies. (Problem gambler)*

Figure 9. Proportion of venue-based EGM gamblers returning to gambling venues when they re-opened – Results by risk for problem gambling (during the 12 months before COVID) (N=683, March-April 2022)



*Question: How often have you spent any money on the following gambling activities for two time periods:
 (A) During the 12 months BEFORE COVID (March 2019 to February 2020) / (B) In the most recent past 12 months.
 Base: Venue-based EGM gamblers during the 12 months before COVID. Weighted results.*

Table 2. Demographic profile of venue-based EGM gamblers returning or not returning to EGM venues in the past 12 months (N=683, March-April 2022)

Demographic category	Response	Venue-based EGM gamblers returning to EGM venues (n=449)	Venue-based EGM gamblers not returning to EGM venues (n=234)
		% Venue-based EGM gamblers	
Gender	Male	63.9b	41.8a
	Female	36.1b	58.2a
	Other gender	0.0	0.0
Age x Gender	Male 18-34	30.1b	11.3a
	Male 35-49	18.4a	14.6a
	Male 50+	15.5a	15.9a
	Female 18-34	14.6a	18.9a
	Female 35-49	9.6b	16.5a
	Female 50+	11.9b	22.9a
Cultural background	LOTE	8.0a	9.9a
	Aboriginal	8.5a	6.0a
	Torres Strait Islander	2.1a	0.0

Demographic category	Response	Venue-based EGM gamblers returning to EGM venues (n=449)	Venue-based EGM gamblers not returning to EGM venues (n=234)
		% Venue-based EGM gamblers	
Mental health conditions	Experience of anxiety, mood, substance use, personality disorders	48.1a	50.1a
	Anxiety disorders	40.4a	37.4a
	Mood disorders	30.4a	34.0a
	Substance use disorders	21.7b	13.2a
	Personality disorders	16.0b	9.4a
Kessler 6 ratings during the 12 months before COVID	% Venue-based EGM gamblers		
	Probable serious mental illness (Kessler 6 score of 19-30)	20.5b	10.9a
	Mean rating <i>How often did you feel as follows? (1= Not at all to 5 = All of the time)</i>		
	Nervous	2.4b (SD=1.2)	2.0a (SD=1.1)
	Hopeless	2.2b (SD=1.2)	1.9a (SD=1.1)
	Restless or fidgety	2.3b (SD=1.2)	2.0a (SD=1.1)
	So depressed that nothing could cheer you up	2.3b (SD=1.2)	1.8a (SD=1.0)
	That everything was an effort	2.4b (SD=1.2)	2.0a (SD=1.1)
Mental illness x gender (based on Kessler 6 ratings during the 12 months before COVID.	% Venue-based EGM gamblers		
	Males with probable serious mental illness (Kessler 6 score of 19-30)	20.9a	17.8a
	Females with probable serious mental illness (Kessler 6 score of 19-30)	19.7b	5.9a
	Other gender with probable serious mental illness (Kessler 6 score of 19-30)	0.0	0.0
Overall negative impacts of gambling during	No negative impacts	37.2b	64.5a
	Very few negative impacts	33.4b	22.1a
	Some negative impacts	23.5b	12.7a

Demographic category	Response	Venue-based EGM gamblers returning to EGM venues (n=449)	Venue-based EGM gamblers not returning to EGM venues (n=234)
		% Venue-based EGM gamblers	
the 12 months before COVID	Many negative impacts	5.9b	0.8a
Pathway of the venue-based EGM gambler (pre-COVID PGs)	Behaviourally conditioned to gamble	38.3a	46.0b
	Emotionally conditioned to gamble	0.7b	1.2a
n=191 returning PGs, n=42 non-returning PGs	Emotionally conditioned to gamble, with addiction / antisocial pathologies	61.0b	52.8b

Base: Venue-based EGM gamblers during the 12 months before COVID. Weighted results.

6. What were positive and negative effects of EGM venue closure on venue-based EGM gamblers?

Positive effects of EGM venue closure

Closure of gambling venues could potentially have a range of positive effects for higher-risk gamblers, given that access to gambling is effectively restricted. In particular, a systematic review by Fernandez and Griffiths (2020) found some evidence that short-term abstinence can have potential benefits to many problematic addictive behaviours. For this reason, venue-based EGM gamblers were asked to report if they had experienced any positive or negative effects of EGM venue closures.

Just over half of venue-based EGM gamblers (51.2 per cent) reported that EGM venue closures had been positive.

A significantly higher percentage of problem gamblers (65.5 per cent) and moderate risk gamblers (59 per cent) reported positive effects, compared to low risk (46.8 per cent) and non-problem gamblers (32.2 per cent).

Around 37.5 per cent of venue-based EGM gamblers reported that venue closure had the positive effect of encouraging the gambler to find new activities to keep busy, 36.2 per cent reported having more money to spend on other leisure activities, 32.7 per cent reported that venue closure reduced their interest in EGM gambling, 30.7 per cent reported having more money to spend on essential items and 30.3 per cent reported having more free time to spend with family and friends (Figure 10).

Problem gamblers reported their top positive effect as venue closures had encouraged them to find new activities to keep busy (34.2 per cent). This may reflect some recognition by the segment that their leisure was very much focused on gambling. The top positive effects by risk segment are in Box 5 to Box 8.

EGM venue closures reducing interest in EGM gambling featured in the top five positive effects for non-problem, low risk and moderate risk gamblers, yet not in the top five for problem gamblers. This may reflect their greater interest and involvement in gambling.

Improvement in mental health similarly featured in the top five positive effects for moderate risk and problem gamblers, yet not low risk and non-problem gamblers.

Qualitative interviews with venue-based EGM gamblers revealed that venue closures did indeed have a range of positive effects, with the most commonly mentioned benefit being 'saving money'. Spending time on other recreational pursuits was also mentioned as a common benefit. Some higher risk venue-based EGM gamblers commented that venue closures provided an opportunity to have a forced break from gambling and to break or reduce their gambling habit.

Comments included:

- *I thought this could be a chance to break the cycle of chasing a loss. So I saw it as a good time to give up or reduce. That was the most positive effect. (Problem gambler)*
- *I had a fraction of relief when I heard they were closing – I wrestle with myself having had a previous gambling issue. So it was a good thing they were closed, as I did not get tempted. I thought it's just something I don't have to worry about now – I don't have to make any decisions about playing. (Moderate risk gambler)*
- *I've saved more than I ever have in my life and bought a car. It's opened my eyes to what I actually was spending. (Problem gambler)*

- *There are no accidental \$200 mistakes, but there's a new pair of shoes instead – I have better things to show for my money. (Problem gambler)*
- *Mentally I think it's good – there's no pressure or urge anymore. It's a benefit because you can constantly find new ways to look after yourself in a better way. It's challenged me to find ways to improve my life. I've taken up the bike riding and walking. (Moderate risk gambler)*

Negative effects of EGM venue closure

Only 20.7 per cent of venue-based EGM gamblers reported negative effects from venue closures.

A significantly higher proportion of problem gamblers (42.6 per cent) and moderate risk gamblers (10.8 per cent) reported negative effects, compared to non-problem gamblers (4.5 per cent).

The top overall specific negative effects reported included boredom (40.1 per cent), missing the excitement of free spins, features and winning (36.3 per cent), missing the social interaction (36.1 per cent), not being able to chase losses (31.5 per cent) and not being able to win extra money on pokies to buy things they wanted (27.8 per cent) (Figure 11).

Moderate risk and problem gamblers mentioned missing the excitement of free spins, features and wins and boredom in the top two negative effects. Negative effects by risk segment are also in Box 9 to Box 12.

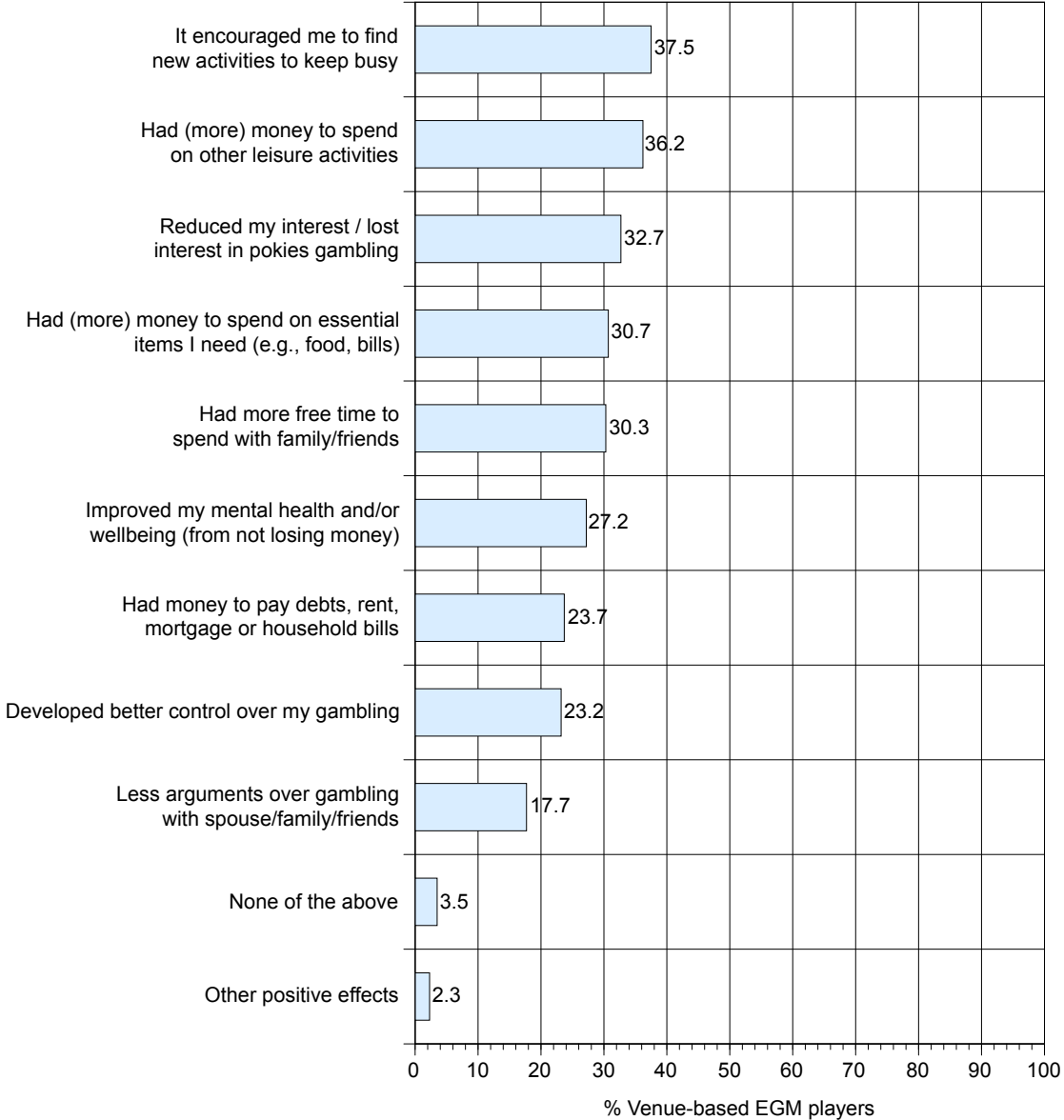
A significantly higher proportion of problem gamblers (39.3 per cent) reported a negative effect as missing the excitement of free spins, features and winning on pokies games, compared to non-problem gamblers (7.4 per cent).

Qualitative interviews with venue-based EGM gamblers highlighted that lack of social interaction was one of the main perceived negative impacts of venue closures. Many also reported that they missed the whole experience of going to a venue – including the food, drinks, music, atmosphere and the enjoyment of playing the pokies. Some venue-based EGM gamblers additionally commented that venue closures had been negative because it had led them to spend more on online gambling.

Comments included:

- *The best places are the gaming joints - they're much cheaper than the local high street. Gambling is part of the entertainment of the night. It's 50-50 - I miss the gambling and the social side of it. I do miss the pokies. (Problem gambler)*
- *Sometimes I'd spend more than I should, but now I spend more gambling online. At least before I was having a nice meal and a nice time. I could get an all-you-can-eat meal for \$20 then play the pokies. I like to do that, to sit down and relax, and hopefully win something. (Problem gambler)*
- *If I went to a venue I'd spend less. I spend more on my phone because it's easier to transfer more funds into your account if you run out of money. If I go to the pokies, I have a prepared amount of cash. (Problem gambler)*
- *I have no social activity - it dried up all of that. You don't see the people you'd only see at the venue. (Problem gambler)*
- *Missing out on social interaction, being on my own was a negative. Winning or losing - whatever it was, it was my space. (Problem gambler)*

Figure 10. Positive effects of venue closures on venue-based EGM gamblers (N=353, March – April 2022)



Question: Which of the following positive effects did you experience? Base: Venue-based EGM gamblers during the 12 months before COVID that responded 'yes' to the question 'Did the closure of pokies venues due to COVID lockdowns or restrictions have any positive effects for you?' Weighted results.

Box 5. Top positive effects of venue closure due to COVID lockdowns and restrictions - problem gamblers

- It encouraged me to find new activities to keep busy (34.2 per cent)
- Had more free time to spend with family/friends (34.0 per cent)
- Had (more) money to spend on essential items I need (e.g., food, bills) (33.1 per cent)
- Improved my mental health and/or wellbeing (from not losing money) (32.8 per cent)
- Less arguments over gambling with spouse/family/friends (32.1 per cent)

Box 6. Top positive effects of venue closure due to COVID lockdowns and restrictions – moderate risk gamblers

- Had (more) money to spend on other leisure activities (54.7 per cent)
- It encouraged me to find new activities to keep busy (53.6 per cent)
- Reduced my interest / lost interest in pokies gambling (52.8 per cent)
- Had more free time to spend with family/friends (42.8 per cent)
- Improved my mental health and/or wellbeing (from not losing money) (39.7 per cent)

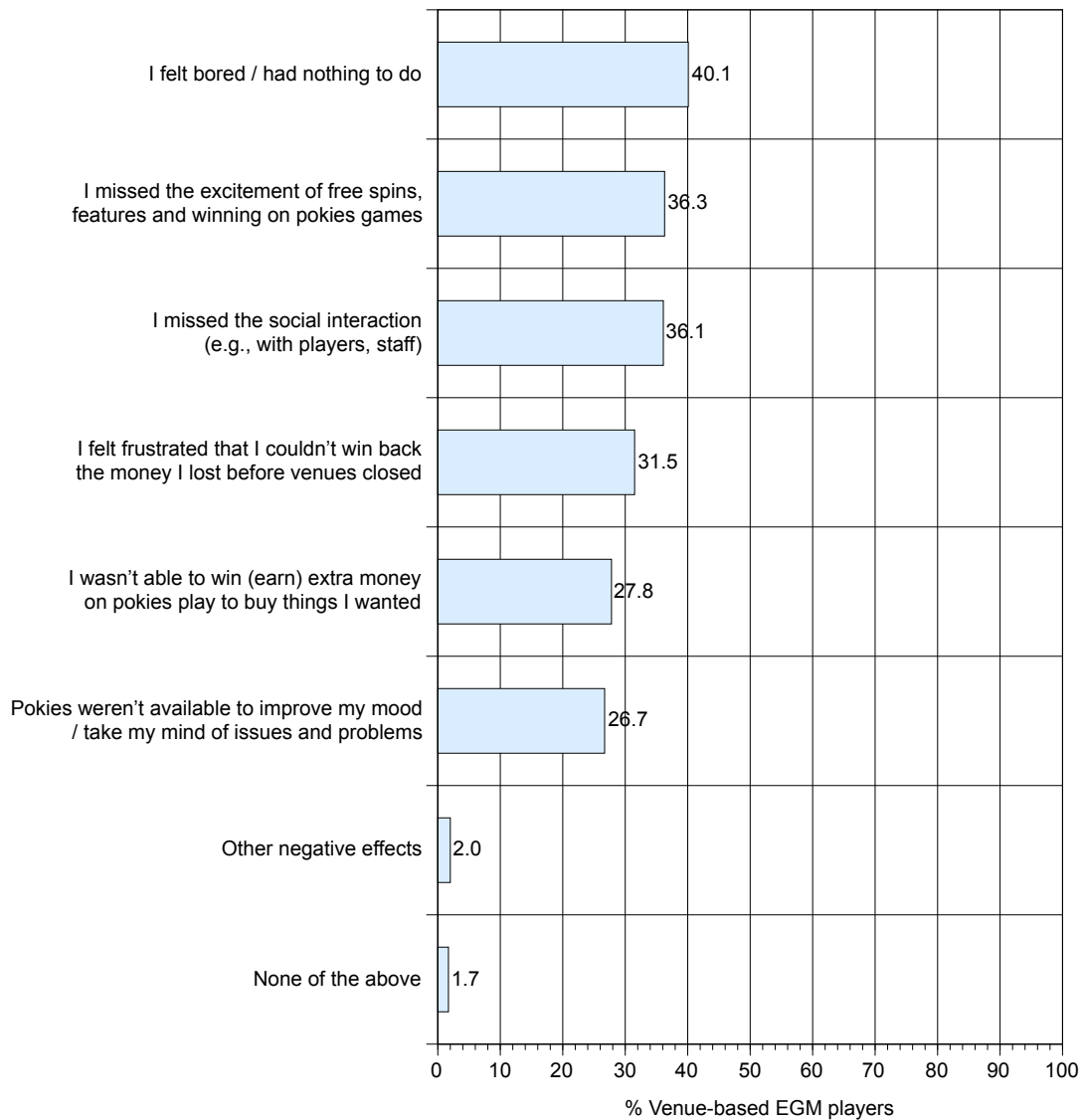
Box 7. Top positive effects of venue closure due to COVID lockdowns and restrictions – low risk gamblers

- Had (more) money to spend on other leisure activities – 45.5 per cent
- It encouraged me to find new activities to keep busy - 43.5 per cent
- Reduced my interest / lost interest in pokies gambling - 38.8 per cent
- Had (more) money to spend on essential items I need (e.g., food, bills) - 29.6 per cent
- Developed better control over my gambling - 18.5 per cent

Box 8. Top positive effects of venue closure due to COVID lockdowns and restrictions – non-problem gamblers

- Had (more) money to spend on other leisure activities - 37.3 per cent
- Reduced my interest / lost interest in pokies gambling - 28.6 per cent
- It encouraged me to find new activities to keep busy - 27.5 per cent
- Had (more) money to spend on essential items I need (e.g., food, bills) - 18.8 per cent
- Had more free time to spend with family/friends - 17 per cent

Figure 11. Negative effects of venue closures on venue-based EGM gamblers (N=139, March – April 2022)



Question: Which of the following negative effects did you experience? Base: Venue-based EGM gamblers during the 12 months before COVID that responded 'yes' to the question 'Did the closure of Victorian gaming (pokies) venues due to COVID have any negative effects for you?' Weighted results.

Box 9. Top negative effects of venue closure due to COVID lockdowns and restrictions - problem gamblers

- I missed the excitement of free spins / features and winning on pokies games - 39.3 per cent
- I felt bored / had nothing to do - 38.3 per cent
- I missed the social interaction (e.g., with players, staff) - 35.8 per cent
- I felt frustrated that I couldn't win the money I lost before venues closed - 32.6 per cent
- Pokies weren't available to improve my mood / take my mind of issues and problems - 32.2 per cent

Box 10. Top negative effects of venue closure due to COVID lockdowns and restrictions – moderate risk gamblers

- I felt bored / had nothing to do - 53.4 per cent
- I missed the excitement of free spins, features and winning on pokies games - 39.2 per cent
- I missed the social interaction (e.g., with players, staff) - 30.8 per cent
- I wasn't able to win (earn) extra money on pokies play to buy things I wanted - 30.2 per cent
- I felt frustrated that I couldn't win back the money I lost before venues closed - 28.6 per cent

Box 11. Top negative effects of venue closure due to COVID lockdowns and restrictions – low risk gamblers

- I missed the social interaction (e.g., with players, staff) - 71.8 per cent
- I felt bored / had nothing to do - 57.9 per cent
- I missed the excitement of free spins, features and winning on pokies games - 22.4 per cent

Box 12. Top negative effects of venue closure due to COVID lockdowns and restrictions – non-problem gamblers

- I felt frustrated that I couldn't win back the money I lost before venues closed - 42.1 per cent
- I felt bored / had nothing to do - 32.1 per cent
- Other negative effects - 27.2 per cent
- I missed the social interaction (e.g., with players, staff) - 25.5 per cent
- I wasn't able to win (earn) extra money on pokies play to buy things I wanted – 21 per cent

7. Why did venue-based EGM gamblers return or not return to venues?

Reasons why venue-based EGM gamblers returned to venues

Top overall reasons why venue-based EGM gamblers went back to EGM gambling included enjoying pokies, free spins and features (41.5 per cent), enjoying social contact associated with pokies venues (35.1 per cent), it was something to do when they were bored (34.8 per cent) and playing pokies after enjoying food at the venue (33.4 per cent) (Figure 12).

The top three reasons for problem gamblers included enjoying pokies/free spins/features (41 per cent), something to do to when they were bored (34.5 per cent) and liking to gamble for extra money (33.3 per cent). Moderate risk gamblers reported returning to venues because they enjoyed pokies/free spins/features (53 per cent), it was something to do when they were bored (48.5 per cent) and to enjoy social contact (38.7 per cent). Reasons for return by risk segment are also in Box 13 to Box 16.

This highlights that gambling for problem and moderate gamblers is not only about gambling, but is also because they have few other interests to defeat boredom.

Qualitative interviews with EGM gamblers highlighted that the enjoyment of social contact and the experience of an outing were major reasons for returning to venues. Comments included:

- *I like catching up with friends that I haven't seen for a while. (Problem gambler)*
- *I went back for the social side and the pokies. (Problem gambler)*
- *When I went back, it's like getting out of jail. The fun of gambling and the social reasons were why I went back. (Problem gambler)*
- *I was just bored from staying at home. (Moderate risk gambler)*

Reasons why some venue-based EGM gamblers did not return to venues

The top reasons for non-return to venues by venue-based EGM gamblers were to avoid public places since COVID (51.3 per cent), not wanting to spend the money / cannot afford it / being careful with finances (40.3 per cent) and that COVID led EGM gamblers to re-evaluate their leisure time (31.2 per cent). It is also noteworthy that 30.3 per cent reported that pokies were no longer enjoyable (Figure 13).

The very top reason for all risk segments related to wanting to avoid public places since COVID (45.6 per cent of problem gamblers, 54.2 per cent of moderate risk gamblers, 72.4 per cent of low risk gamblers and 47.5 per cent of non-problem gamblers).

The next most common reasons for problem gamblers were that many pokies were now not available/shutdown to accommodate social distancing (35.9 per cent), pokies were no longer enjoyable (35.1 per cent) and because COVID had led the gambler to re-evaluate how they spend their leisure time (28.6 per cent).

This highlights that some problem gamblers have re-evaluated EGM gambling following the COVID lockdown and restriction periods associated with venue closure.

Qualitative interviews with venue-based EGM gamblers supported the finding that concerns about contracting COVID were indeed a major reason some did not return to venues. Comments included:

- *We don't go into the community as much for fear of COVID. (Moderate risk gambler)*
- *I was mindful that people would be touching the pokies. It did put me off a bit. You worry about whether it's clean. (Moderate risk gambler)*
- *I was worried about catching COVID, so I didn't go – even when the availability was there. (Problem gambler)*

Some venue-based EGM gamblers were also deterred from going to venues due to the COVID safety measures that had been implemented. It was felt by some that these measures had made the experience of being at the venue less satisfying and enjoyable. Comments included:

- *It was too confusing – I didn't bother with it. You couldn't sit where you wanted to. People have their favourite machines – if I can't use the machine I want, I couldn't be bothered. (Problem gambler)*
- *I had always planned to return to the Crown and the pub – I was monitoring to some degree whether it would open. Then I thought 'Masks - I can't be bothered', so I just moved on. (Moderate risk gambler)*
- *It's not the germs or disease that's keeping me away. It's more so the atmosphere change. It wasn't that good going back. (Low risk gambler)*
- *Social distancing in pokies is ridiculous. If you're with friends, it limits the social interaction of it because we like to play together. They'd come and tell us we can't stand around the one machine, so we had to spread out and do our own thing. (Problem gambler)*

Some venue-based EGM gamblers commented that they had made a conscious decision not to return to EGMs as the period of closure had made them realise how much money they could save, or spend on other things, by not gambling on EGMs.

Some who had been financially impacted by COVID commented that they did not return due to the uncertainty of whether COVID would impact their finances again in the future and were therefore being more cautious with their money. Comments included:

- *It was a conscious decision once I started seeing how much money I was saving in lockdown. I didn't even really want to go there at all. (Problem gambler)*
- *I think financial issues will be pretty significant in stopping me coming back. It's on the top of your mind. (Moderate risk gambler)*
- *I like to get something else of more value for the moment – like clothes or the house. (Moderate risk gambler)*
- *I have a greater awareness that money isn't as secure as it was. You just don't know what's around the corner. We no longer assume that what we had will always be there once COVID ends. (Moderate risk gambler)*
- *After COVID, pokies has just disappeared – it's out of sight, out of mind. (Moderate risk gambler)*

Some EGM gamblers also mentioned that they now had a preference for other social or recreational activities. Comments included:

- *We now do catch ups at the local park and that's a kid-focused activity now. I now ride to the park. (Moderate risk gambler)*
- *My new habit will be the riding – especially in spring and summer. I've learned from COVID, we need to adapt to change – you can break a habit and you may need to change again. (Moderate risk gambler)*
- *It'll be eating out with friends and listening to podcasts on investment. (Moderate risk gambler)*

Intentions to return to venues during COVID lockdowns and restrictions

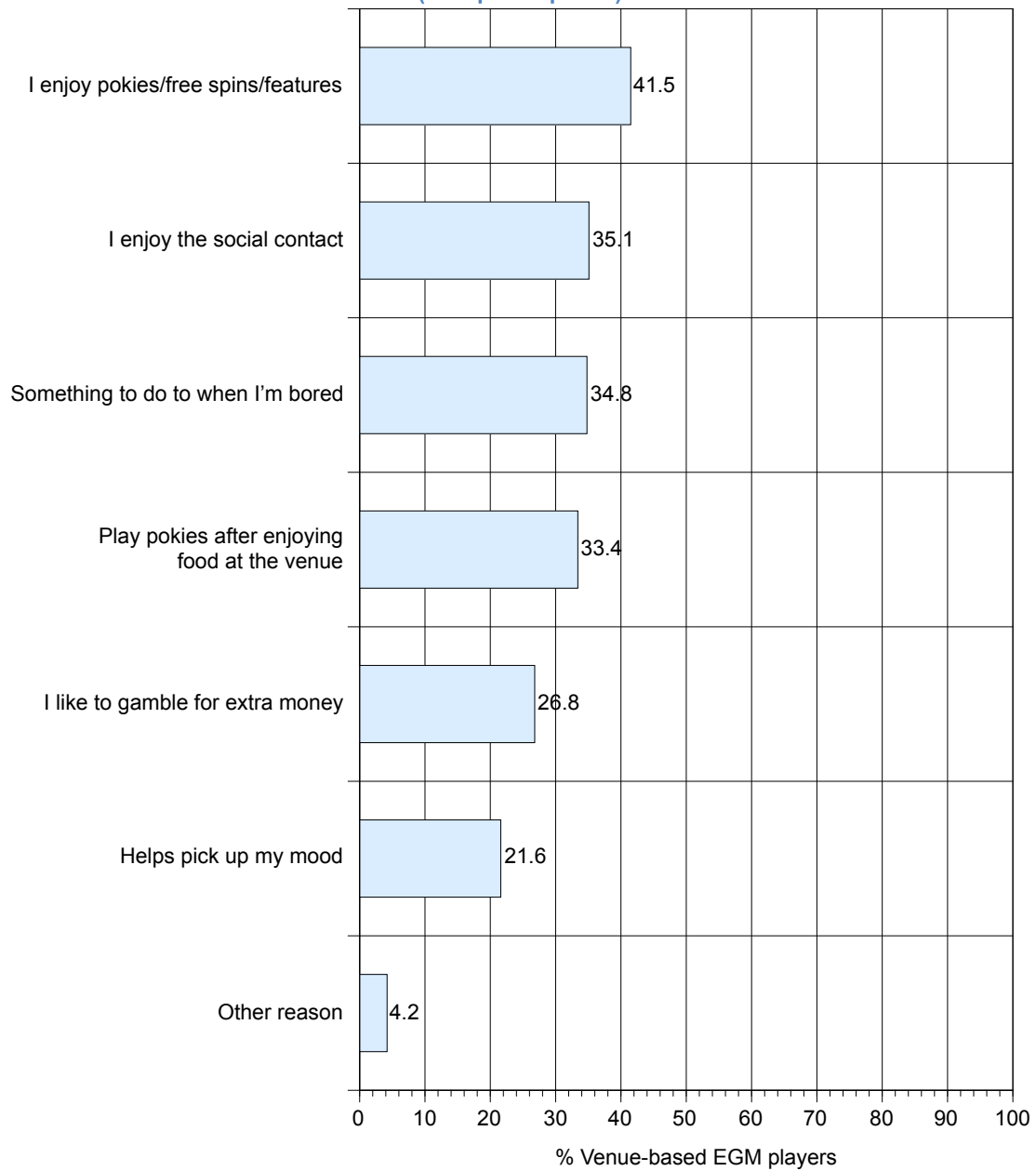
During the lockdown and restriction period (measured through retrospective ratings), 41.3 per cent of venue-based EGM gamblers indicated that they were not sure if they would actually return to pokies, 34.4 per cent reported having intentions to go back and 15.3 per cent reported intentions to reduce their pokies gambling, once venues re-opened. In addition, 9 per cent reported having the intention to stop pokies gambling.

A total of 56.2 per cent of problem gamblers had intentions to go back once venues re-opened and this was significantly higher than all other risk segments (i.e., only 20.2 per cent of non-problem gamblers, 17.1 per cent of low risk gamblers and 23.9 per cent of moderate risk gamblers reported an intention to go back).

In total, 17.5 per cent of problem gamblers, 23.9 per cent of moderate risk gamblers and 17.1 per cent of low risk gamblers had significantly higher intentions to reduce their pokies gambling once venues re-opened than non-problem gamblers (7.9 per cent). However, there were no significant differences in the reporting of intentions to stop EGM gambling for problem gamblers compared to non-problem gamblers.

When asked if they had met their intentions to stop or reduce gambling, 71.9 per cent of problem gamblers with this intention actually reduced or stopped their EGM gambling, as had 87.6 per cent of moderate risk gamblers, 81.8 per cent of low risk gamblers and 81.2 per cent of non-problem gamblers. However, differences were not statistically significant.

Figure 12. Reasons why some venue-based EGM gamblers returned to EGM venues after venues re-opened - Results by risk for problem gambling (during the 12 months before COVID) (N=449, March – April 2022) (Multiple response)



Question: You mentioned that have gambled on pokies in the past 12 months. What are the top three reasons you went back to pokies? (Base: Venue-based EGM gamblers during the 12 months before COVID, that had returned to pokies venues within the past 12 months). Weighted results.

Box 13. Most common reasons for return to venues after they re-opened following COVID lockdowns and restrictions - problem gamblers

- I enjoy pokies/free spins/features – 41 per cent
- Something to do to when I'm bored - 34.5 per cent
- I like to gamble for extra money - 33.3 per cent
- Helps pick up my mood - 31.6 per cent
- I enjoy the social contact - 30.2 per cent

Box 14. Most common reasons for return to venues after they re-opened following COVID lockdowns and restrictions – moderate risk gamblers

- I enjoy pokies/free spins/features - 53.0 per cent
- Something to do to when I'm bored - 48.5 per cent
- I enjoy the social contact - 38.7 per cent
- I like to gamble for extra money - 30.2 per cent
- Play pokies after enjoying food at the venue - 28.5 per cent

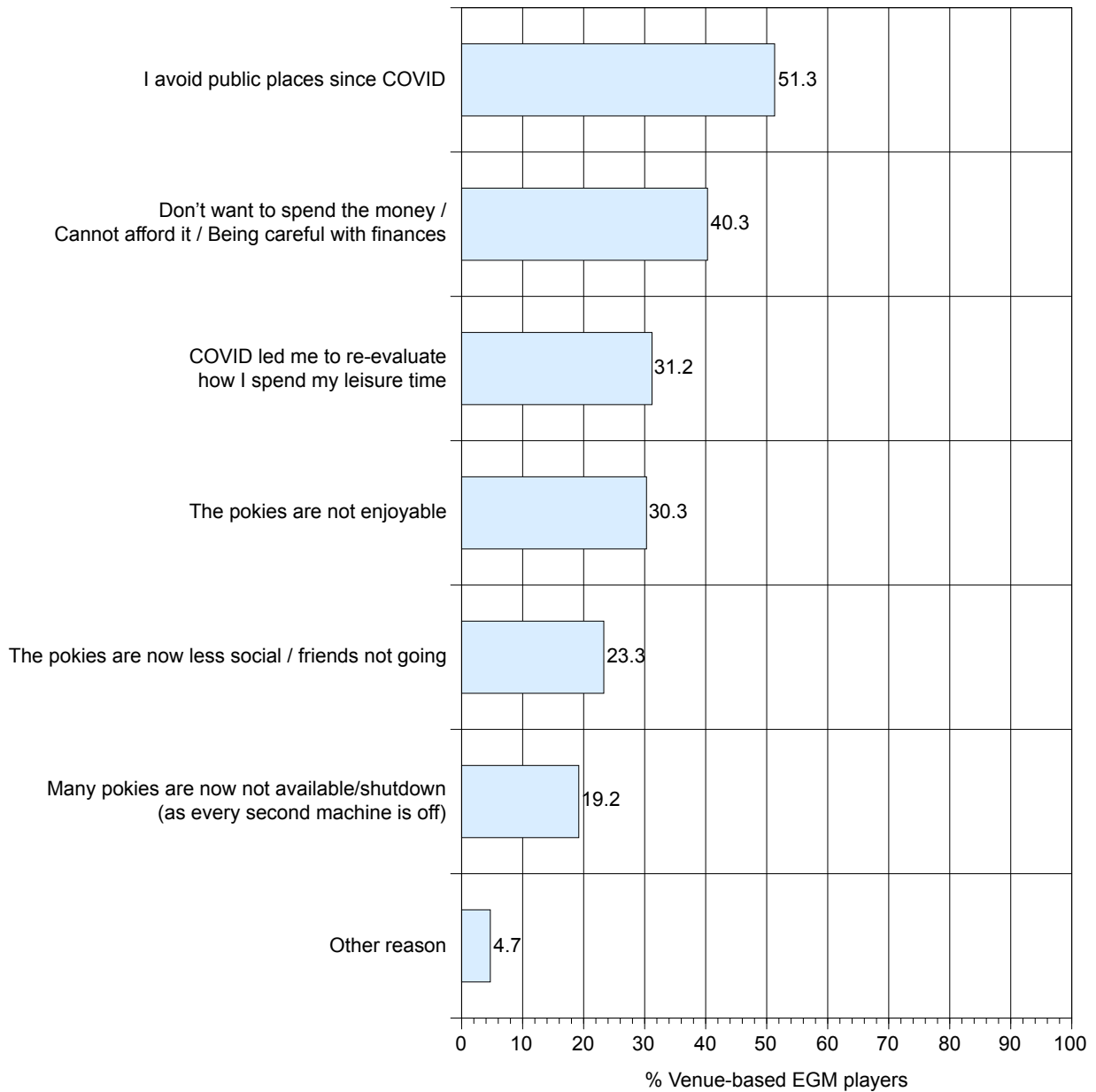
Box 15. Most common reasons for return to venues after they re-opened following COVID lockdowns and restrictions – low risk gamblers

- I enjoy the social contact - 49.3 per cent
- I enjoy pokies/free spins/features - 38.4 per cent
- Play pokies after enjoying food at the venue - 37.8 per cent
- Something to do to when I'm bored - 32.3 per cent
- I like to gamble for extra money - 17.4 per cent

Box 16. Most common reasons for return to venues after they re-opened following COVID lockdowns and restrictions – non-problem gamblers

- Play pokies after enjoying food at the venue - 48.6 per cent
- I enjoy pokies/free spins/features – 37 per cent
- I enjoy the social contact - 36.6 per cent
- Something to do to when I'm bored - 28.4 per cent
- I like to gamble for extra money - 17.1 per cent

Figure 13. Reasons why some venue-based EGM gamblers did not return to pokies venues after venues re-opened - Results by risk for problem gambling (during the 12 months before COVID) (N=234, March – April 2022) (Multiple response)



Question: You mentioned that you haven't gambled on pokies in the past 12 months. What are the top three reasons you haven't gone back? (Base: Venue-based EGM gamblers during the 12 months before COVID, that had not returned to pokies venues within the past 12 months). Weighted results.

8. How did gambling participation of venue-based EGM gamblers change since COVID?

Changes in EGM gambling from pre-COVID to the most recent 12 months

EGM gambling participation was 100 per cent pre-COVID in venue-based EGM gamblers (the basis for study participation), then participation declined to 43.8 per cent during COVID lockdowns and restrictions and rebounded to 76.3 per cent participation in the most recent 12 months (Figure 14).

This suggests that participation in EGM gambling declined overall as a result of COVID-19 (a decrease of 23.7 per cent from pre-COVID to the most recent past 12 months) (i.e., for all venue-based EGM gamblers).

In terms of participation by risk segment during COVID lockdowns and restrictions, a large proportion of problem gamblers (85.5 per cent) maintained EGM gambling participation (i.e., gambled online) and most had resumed gambling in the most recent 12 months (96.4 per cent). This was only an overall decline of 3.6 per cent in participation for problem gamblers (from pre-COVID to the past 12 months).

In comparison, non-problem gamblers declined dramatically to only 10.1 per cent participation during COVID lockdowns and restrictions and 58.8 per cent had resumed gambling in the most recent 12 months.

Compared to their pre-COVID frequency of gambling, 45.8 per cent of venue-based EGM gamblers decreased their EGM gambling frequency, 37.2 per cent stayed at the same EGM gambling frequency and 17 per cent increased their EGM gambling frequency (Figure 15).

Increases in EGM gambling frequency from pre-COVID to the most recent 12 months were largest in problem gamblers (34.3 per cent increased) and smallest in non-problem gamblers (only 4.1 per cent increased).

This highlights that around one third of problem gamblers are gambling more intensively (frequently) on EGMs post-COVID than pre-COVID.

In relation to EGM session length - 22.9 per cent decreased their session length from pre-COVID to the most recent 12 months, 55.4 per cent gambled the same length and 21.7 per cent increased their session length.

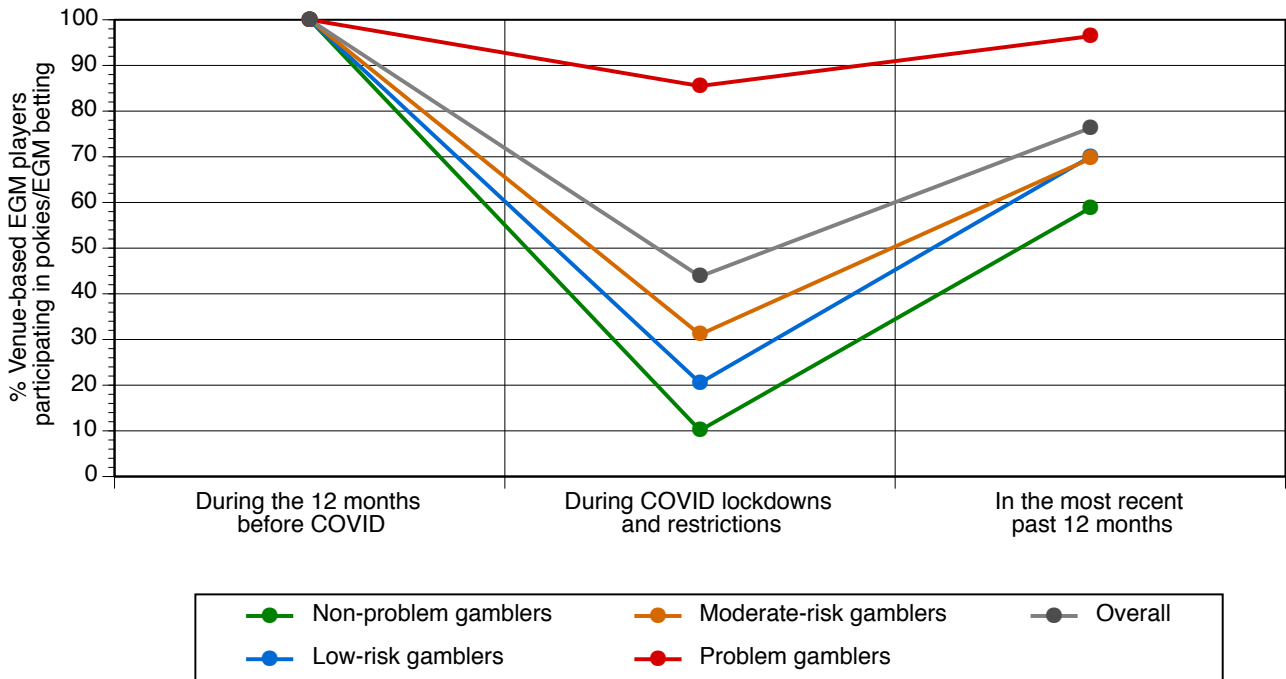
Increases in session length from pre-COVID to the most recent 12 months were also highest in problem gamblers (35.6 per cent increased session length).

In relation to EGM session expenditure - 24 per cent of venue-based EGM gamblers decreased their EGM spending from pre-COVID to the most recent 12 months, 50.4 per cent remained at the same spend level and 25.6 per cent increased their spending.

Increases were again highest in problem gamblers (39.9 per cent increased their spending) and also high in moderate risk gamblers (23.3 per cent increased their spending).

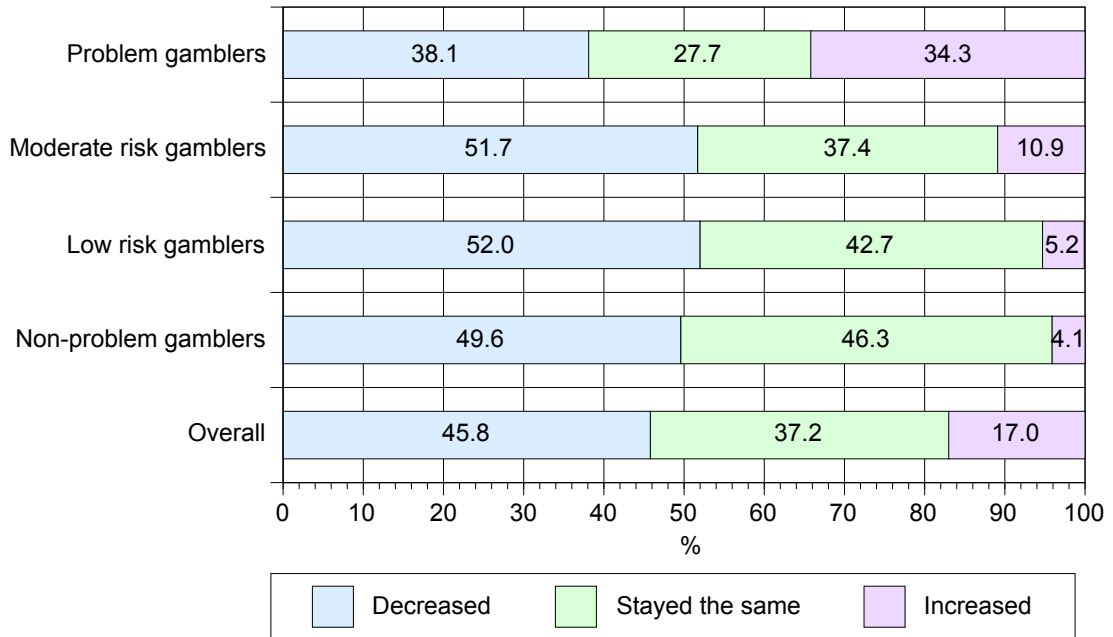
Of all locations of EGM gambling, clubs have maintained the most stability in clientele gambling on EGMs (an overall decrease of only 0.1 per cent), while pubs/hotels have decreased 12.2 per cent and the casino 11.4 per cent compared to pre-COVID levels.

Figure 14. Changes in venue-based EGM gambler participation in EGM gambling - Results by risk for problem gambling (during the 12 months before COVID) (N=683, March – April 2022)



Question: Whether gamblers reported spending money on pokies or electronic gaming machines over 3 periods of time.
 Base: Venue-based EGM gamblers during the 12 months before COVID. Weighted results.

Figure 15. Changes in venue-based EGM gambler frequency of participation in EGM gambling - Results by risk for problem gambling (during the 12 months before COVID) (N=683, March – April 2022)



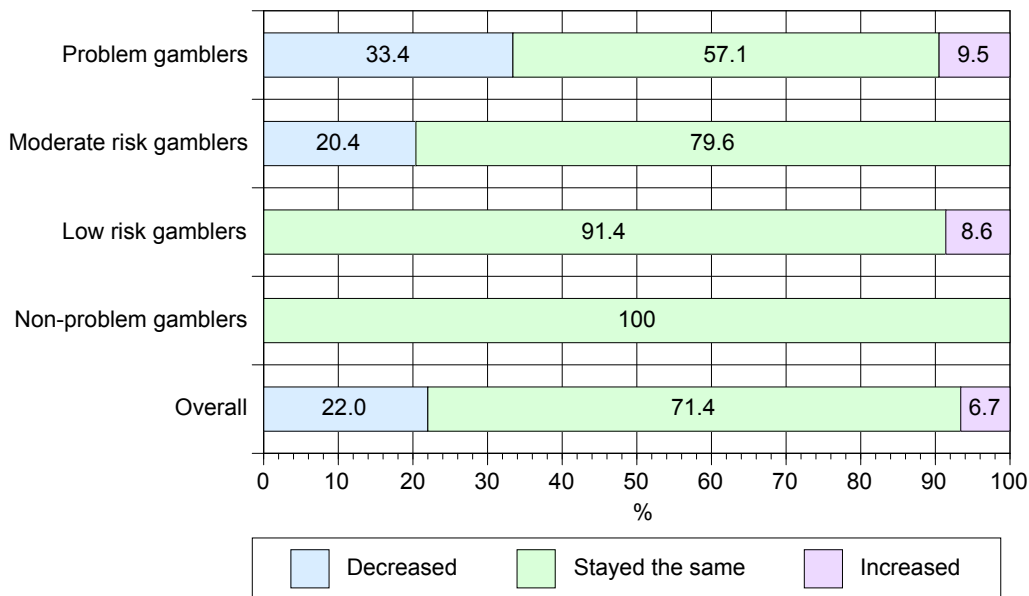
Question: Frequency of spending money on pokies or electronic gaming machines using prompted frequency categories, over two time periods – a) during the 12 months before COVID and b) in the most recent past 12 months.
 Base: Venue-based EGM gamblers during the 12 months before COVID. Weighted results.

Changes in online EGM gambling from pre-COVID to the most recent 12 months

Across all participants (i.e., the sample overall), participation in online EGM gambling in venue-based EGM gamblers was 7.3 per cent pre-COVID and this increased to 18.7 per cent in the most recent 12 months (a 11.4 per cent increase from pre-COVID participation).

Within individuals gambling on EGMs online both before COVID and in the most recent 12 months, 6.7 per cent of EGM gamblers increased their frequency of online EGM gambling, 71.4 per cent were gambling at the same frequency and 22 per cent decreased their frequency of gambling (Figure 16).

Figure 16. Changes in online EGM gambling frequency comparing the 12 months prior to COVID with the most recent 12 months - Results by risk for problem gambling (during the 12 months before COVID) (N=502-683, March – April 2022)



Questions: How many times per week did you play pokies online/over the internet/on your mobile? a) in the 12 months before COVID and b) in the most recent 12 months). Base: Venue-based EGM gamblers reporting playing EGMs online before COVID and in the most recent 12 months. Weighted results.

Changes in wagering from pre-COVID to the most recent 12 months

While 66 per cent of venue-based EGM gamblers took part in wagering pre-COVID across the sample overall, during COVID lockdowns and restrictions, participation declined to only 56.8 per cent. During the past 12 months, participation rebounded to 60.9 per cent, which represented only an overall decline of 5.1 per cent since the pre-COVID period.

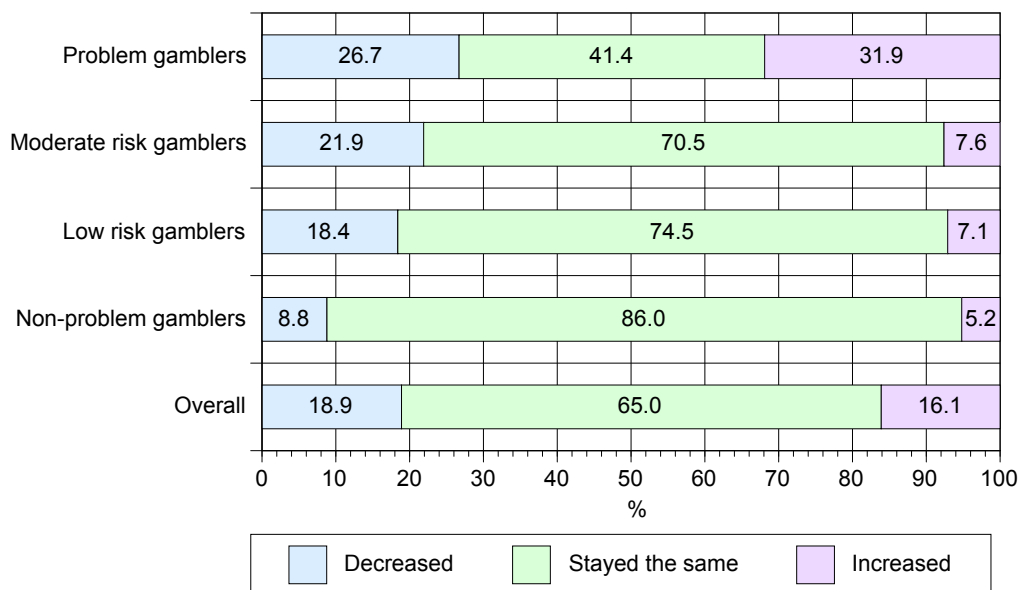
In terms of participation by risk segment, problem gamblers maintained their participation, with only a 0.6 per cent decline in participation observed from pre-COVID to the most recent 12 months. This same decline was additionally 6.4 per cent for non-problem gamblers, 11.2 per cent for low risk gamblers and 8.8 per cent for moderate risk gamblers.

When wagering frequency changes were examined within individuals, results showed that 16.1 per cent of venue-based EGM gamblers engaging in wagering increased their frequency of wagering from pre-COVID to the most recent 12 months, 65 per cent stayed at the same frequency and 18.9 per cent decreased their frequency of wagering (Figure 17).

Once again, problem gamblers were the group that most increased their wagering frequency from pre-COVID to the most recent 12 months, with 31.9 per cent increasing their frequency of wagering.

This increase was also significantly higher than other segments (7.6 per cent of moderate risk gamblers, 7.1 per cent of low risk gamblers and 5.2 per cent of non-problem gamblers increased frequency of wagering).

Figure 17. Changes in venue-based EGM gambler frequency of participation in wagering - Results by risk for problem gambling (during the 12 months before COVID) (N=683, March – April 2022)



Question: Whether gamblers reported spending money on wagering over two periods of time (in the 12 months before COVID and in the most recent 12 months). Base: Venue-based EGM gamblers during the 12 months before COVID. Weighted results.

Changes in sports betting from pre-COVID to the most recent 12 months

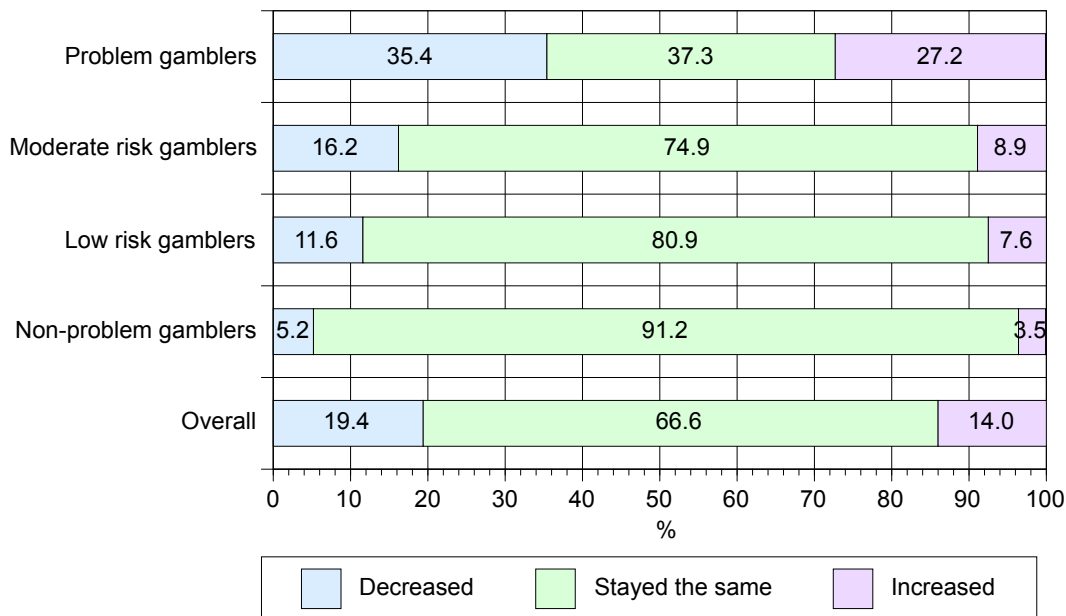
Across all participants (i.e., the sample overall), sports betting participation for venue-based gamblers was 53.3 per cent during the 12 months before COVID and this declined to 46.6 per cent during lockdowns and restrictions. Participation then rebounded to 50.4 per cent, only 2.9 per cent down from pre-COVID participation levels.

In terms of participation by risk segment, problem gamblers declined relatively little in terms of sports betting participation from pre-COVID to the most recent 12 months, with only a 1.6 per cent participation decline observed. This same decline of only 1.6 per cent was also observed for non-problem gamblers. In addition, a decline of 5.6 per cent was observed for low risk gamblers and a decline of 7 per cent was observed for moderate risk gamblers.

When individual changes in sports betting frequency were compared from pre-COVID to the most recent 12 months, findings showed that 14 per cent of venue-based EGM gamblers increased in their frequency of sports betting, 66.6 per cent remained at the same frequency and 19.4 per cent decreased in their frequency of sports betting (Figure 18).

The largest increase in frequency of sports betting from pre-COVID to the most recent 12 months was observed in problem gamblers (27.2 per cent increased) and was relatively much lower in the other risk segments (only 8.9 per cent of moderate risk gamblers increased in frequency, as did 7.6 per cent of low risk gamblers and 3.5 per cent of non-problem gamblers).

Figure 18. Changes in venue-based EGM gambler frequency of participation in sports betting - Results by risk for problem gambling (during the 12 months before COVID) (N=683, March – April 2022)



*Question: Whether gamblers reported spending money on sports betting (excluding fantasy sports, novelty events and e-sports) over two periods of time (in the 12 months before COVID and in the most recent 12 months).
Base: Venue-based EGM gamblers during the 12 months before COVID. Weighted results.*

Changes in table game betting from pre-COVID to the most recent 12 months

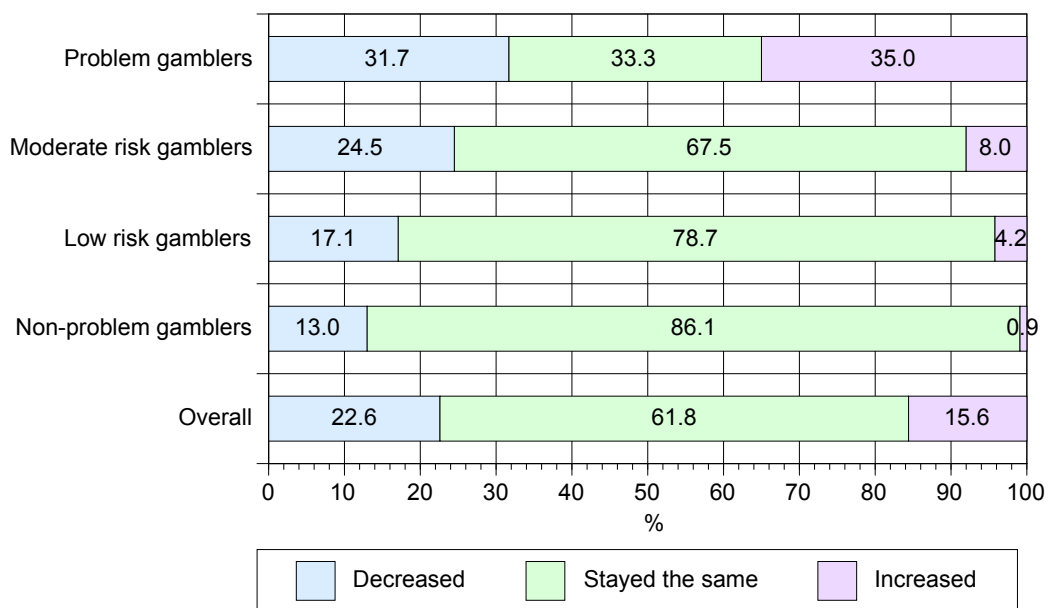
Across all participants (i.e., the sample overall), table game participation in venue-based EGM gamblers declined 9.4 per cent from pre-COVID to the most recent past 12 months. Participation was 54 per cent in the 12 months prior to COVID and this declined to 37.9 per cent during COVID lockdowns and restrictions. Participation then rebounded to 44.6 per cent in the most recent 12 months.

In terms of table game participation by risk segment, problem gamblers decreased their participation by only 3.3 per cent from the pre-COVID period to the most recent 12 months, suggesting that most had resumed their regular gambling. In comparison, non-problem gamblers decreased 11.2 per cent since pre-COVID, while low risk and moderate risk gamblers respectively decreased 14.9 per cent and 15.7 per cent.

When changes in individual frequency of table game betting were analysed from pre-COVID to the most recent 12 months, 22.6 per cent of venue-based EGM gamblers decreased their frequency of table game betting, 61.8 per cent bet on table games at the same frequency and 15.6 per cent increased their frequency of table game betting (Figure 19).

Increases in table game betting frequency were again largest in problem gamblers (35 per cent increased) and relatively small proportions of other segments reported increases in table game betting frequency (8 per cent of moderate risk gamblers, 4.2 per cent of low risk gamblers and 0.9 per cent of non-problem gamblers).

Figure 19. Changes in venue-based EGM gambler frequency of participation in table games - Results by risk for problem gambling (during the 12 months before COVID) (N=683, March – April 2022)



*Question: Whether gamblers reported spending money on table games – like blackjack, roulette and poker over two periods of time (in the 12 months before COVID and in the most recent 12 months).
Base: Venue-based EGM gamblers during the 12 months before COVID. Weighted results.*

9. How did psychological distress, gambling urges, risk and harm in venue-based EGM gamblers change since COVID?

Changes in gambling urges from pre-COVID to the most recent 12 months

Findings showed an overall mean score of 17.5 on the Gambling Urges Scale (Raylu & Oei, 2004) reported for gambling urges before COVID (out of a total possible highest mean score of 42) and a mean score of 16.9 for the two subsequent periods (during lockdowns and restrictions and in the most recent 12 months).

This highlighted that the urge to gamble for venue-based EGM gamblers did not vary much over the three periods of time (i.e., only a small decline of 0.6 was observed).

Gambling urge scores by risk for problem gambling similarly remained fairly consistent across the three time periods for each risk segment of gambler.

However, unsurprisingly, problem gamblers and moderate risk gamblers reported significantly higher urges to gamble across the three time periods, than non-problem and low risk gamblers.

Changes in psychological distress from pre-COVID to the most recent 12 months

Overall, 17.4 per cent of venue-based EGM gamblers had a probable serious mental illness in the 12 months prior to COVID (i.e., for the sample overall), as measured via the Kessler 6 (a score of 19-30). During COVID lockdowns and restrictions, this increased to 24.7 per cent of venue-based EGM gamblers (or nearly one in four gamblers). During the most recent 12 months, this declined to 20 per cent.

This represented an overall change of 2.6 per cent from 12 months pre-COVID to the recent past 12 months.

When analysed by risk segments, all segments experienced increased psychological distress during COVID lockdowns and restrictions, compared to before COVID, and additionally experienced a reduction in psychological distress when comparing the period of lockdown and restrictions to the most recent 12 months.

This may suggest a period of re-adjustment and stabilisation of mental health following the period of lockdowns and restrictions.

When compared to the 12 months pre-COVID, an overall increase in the proportion of venue-based gamblers experiencing a probable serious mental illness was observed for problem gamblers (an increase of 1.4 per cent), moderate risk gamblers (an increase of 8.5 per cent) and low risk gamblers (an increase of 4.7 per cent), while non-problem gamblers remained relatively stable (only an increase of 0.2 per cent).

This may reflect the psychological distress caused by COVID in some segments and that many changes have occurred to work and society. Moreover, it highlights that more gamblers at-risk are likely to experience a probable mental illness than in the past.

Changes in risk for problem gambling from pre-COVID to the most recent 12 months

Risk for problem gambling was measured both during the 12 months pre-COVID and in the most recent 12 months. Overall, shifts in risk segment from pre-COVID to the more recent 12 months suggest very little change in problem gamblers and non-problem gamblers. However, low risk and moderate risk gamblers experienced considerable change in their risk for problem gambling.

Findings showed that 94 per cent of problem gamblers in the 12 months before COVID were still problem gamblers in the most recent 12 months, while 4.1 per cent became moderate risk gamblers, 0.9 per cent became low risk gamblers and one per cent became non-problem gamblers.

With respect to moderate risk gamblers, 58 per cent remained in this risk segment in the most recent 12 months, while 17.2 per cent became non-problem gamblers, 19 per cent became low risk gamblers and 5.8 per cent became problem gamblers.

With respect to low risk gamblers, 60.8 per cent remained in this risk segment in the most recent 12 months, while 31.6 per cent became non-problem gamblers, 6.9 per cent became moderate risk gamblers and 0.7 per cent became problem gamblers.

With respect to non-problem gamblers, 91.2 per cent remained in this risk segment in the most recent 12 months, while 5.2 per cent became low risk gamblers, 1.6 per cent became moderate risk gamblers and two per cent became problem gamblers.

Changes in gambling harm from pre-COVID to the most recent 12 months

For the entire cohort, gambling harm (including those reporting very few negative effects, some negative effects and many negative impacts) decreased only two per cent from pre-COVID to post-COVID. This highlights that, for all venue-based EGM gamblers as a cohort, gambling harm remained fairly consistent over the two time periods.

However, when individual changes in the proportions of gamblers experiencing harm were analysed, 15.1 per cent decreased in harm, 70.1 per cent had no change in harm experienced and 14.8 per cent increased in their reported harm.

Changes in harm by risk segment additionally highlighted that 29 per cent of problem gamblers increased in harm, as did 12.1 per cent of moderate risk gamblers, 4.8 per cent of low risk gamblers and three per cent of non-problem gamblers.

This illustrates that, while overall population harm remained fairly consistent across time, around 14.8 per cent of venue-based EGM gamblers experienced an increase in harm and an overall increase in harm was quite common in problem gamblers (with nearly one in three experiencing an increase in harm).

10. What activities undertaken during COVID lockdowns and restrictions have replaced EGM gambling?

Proportion of venue-based EGM gamblers replacing EGMs with another activity

Results showed that 66.6 per cent of venue-based EGM gamblers who reported undertaking some activities during COVID lockdowns and restrictions (when venues were closed) had actually replaced some part or all of their EGM gambling with those activities (and were still doing those activities in March-April 2022).

The activities reported by a higher proportion of venue-based EGM gamblers as having replaced some or all of their EGM gambling were TV, movies and videos (35.8 per cent), using the internet for leisure (29.9 per cent), chores or work around the home not involving physical activity (19.7 per cent), playing video games (18.8 per cent), hobbies or leisure activities of a non-physical nature (18.1 per cent) and doing physically demanding work around the home (16.2 per cent) (Figure 20).

A significantly greater proportion of problem gamblers reported having replaced some or part of their EGM gambling with activities, compared to other risk segments. Results by risk segment are in Box 17 to Box 20.

In particular, only 4.7 per cent of problem gamblers reported that 'none' of their activities undertaken during COVID lockdowns and restrictions replaced some or all of their EGM gambling, compared to a higher 23.1 per cent of moderate risk gamblers, 49.6 per cent of low risk gamblers and 66.2 per cent of non-problem gamblers.

This suggests that some problem gamblers and other at-risk segments have replaced at least some part of their pre-COVID EGM gambling with non-gambling activities.

It is also of particular note that hobbies or leisure activities of a non-physical nature replaced EGM gambling in 24.4 per cent of problem gamblers, 23.6 per cent of moderate risk gamblers, 12 per cent of low risk gamblers and 9.9 per cent of non-problem gamblers. This does suggest that a reasonable cohort have moved on to do more diverse activities distinct from gambling.

Whether venue-based EGM gamblers found a more balanced approach to EGM gambling

Around 75 per cent of venue-based EGM gamblers reflected that doing activities during COVID lockdowns and restrictions had helped them find a more balanced approach to EGM gambling when venues re-opened.

This was reported by 95 per cent of problem gamblers, 86.4 per cent of moderate risk gamblers, 66 per cent of low risk gamblers and 49 per cent of non-problem gamblers (based on responses of 'Somewhat/quite a lot/significantly' (Figure 21).

This does suggest that at-risk segments may have benefited from this break from venue-based EGM gambling and have found that the period helped them find a more balanced approach to EGM gambling.

When multivariate step-wise regression was undertaken, cardiovascular activity undertaken during COVID lockdowns and restrictions (when venues were closed) had a very small, but positive effect in helping venue-based EGM gamblers take a more balanced approach to gambling when venues re-opened.

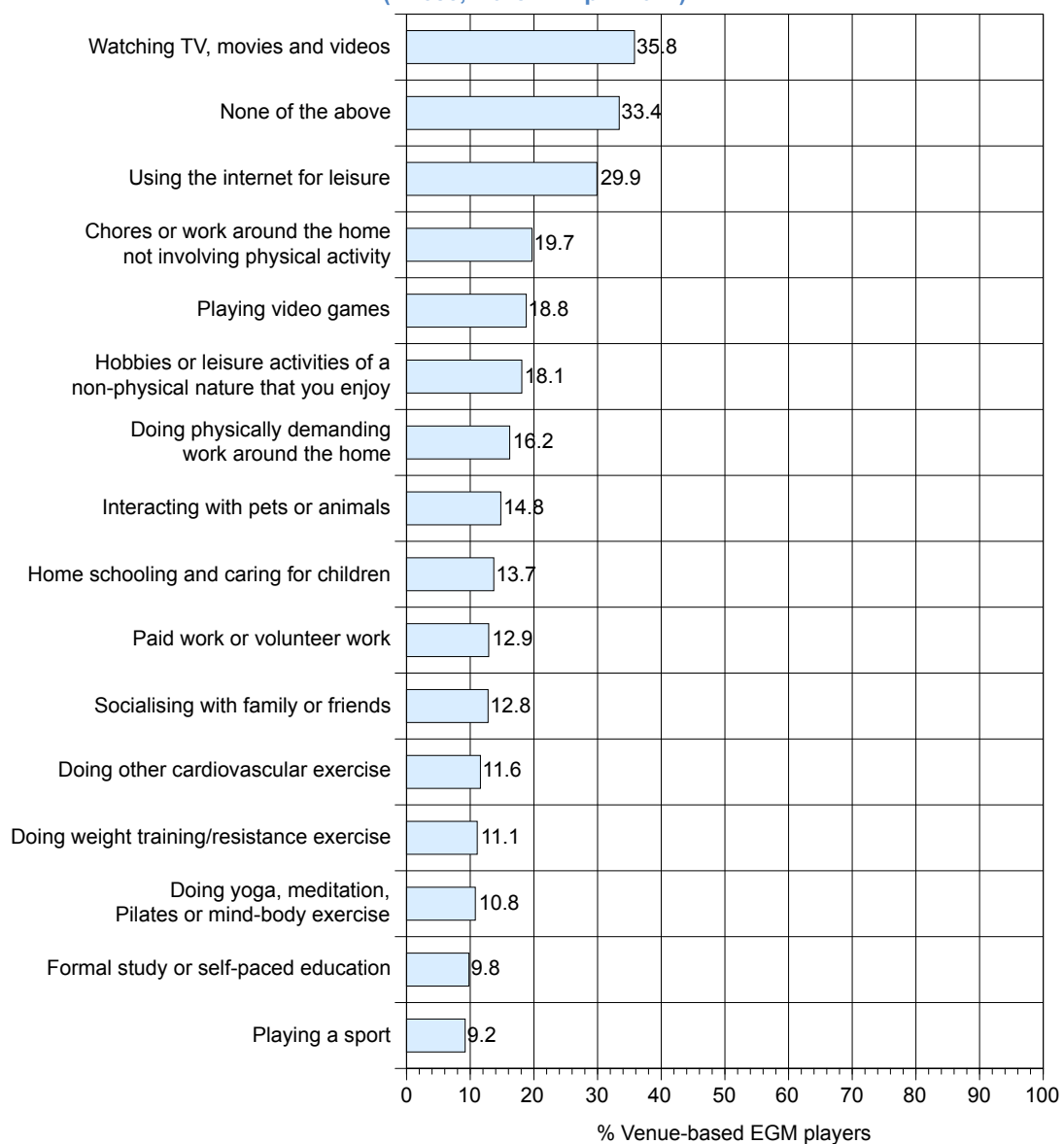
Accordingly, this provides some evidence that undertaking increased cardiovascular activity during lockdowns and restrictions has been sustained more recently. Although it should once again be noted that, while statistically significant, this effect was only small.

Otherwise, specific (individual) leisure activities did not predict psychological distress, gambling urges, intentions to reduce or stop gambling or changes in risk for problem gambling / changes in gambling harm (from pre-COVID to the most recent 12 months).

This suggests that, while new activities have replaced some level of EGM gambling, it is not possible to link any specific activity undertaken during COVID lockdowns and restrictions to gambling behaviour, risk or harm.

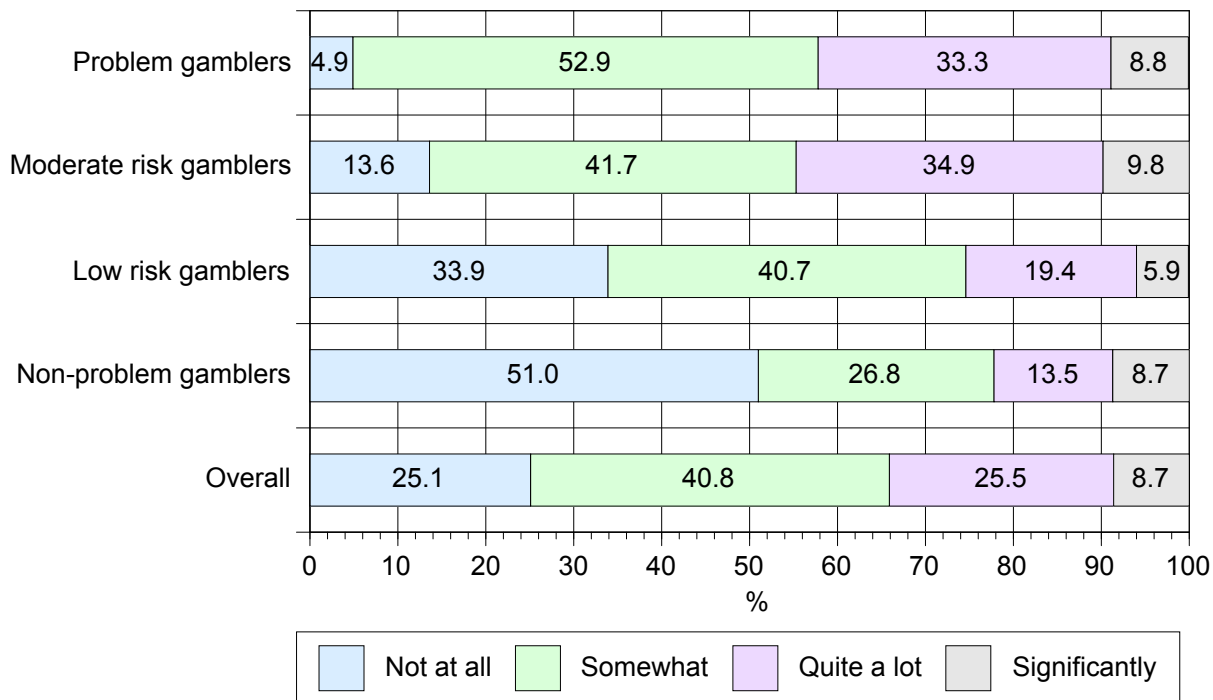
This may reflect that the changes that have occurred due to people doing different activities have produced change of a more psychological nature (i.e., the time has given gamblers an opportunity to reflect on their EGM gambling and replace it with other activities) and are not specifically due to any one single activity.

Figure 20. Activities that venue-based EGM gamblers reported as having replaced some or part of their EGM gambling – Results by risk for problem gambling (during the 12 months before COVID) (N=683, March – April 2022)



Question: Have any of the activities you did during COVID lockdowns and restrictions (when pokies venues were closed) replaced some or all of your previous pokies play (that you did BEFORE COVID) Base: Venue-based EGM gamblers during the 12 months before COVID. Weighted results.

Figure 21. Whether alternative activities undertaken during COVID lockdowns and restrictions helped venue-based EGM gamblers find a more balanced approach to pokies gambling when venues re-opened - Results by risk for problem gambling (during the 12 months before COVID) (N=678, March – April 2022)



Question: To what extent did doing alternative leisure activities during COVID lockdowns and restrictions help you find a more balanced approach to pokies gambling when venues re-opened?
Base: Venue-based EGM gamblers during the 12 months before COVID reporting activities. Weighted results.

Box 17. The top non-gambling activities that replaced part or all of EGM gambling – problem gamblers

The top activities that replaced part or all of EGM gambling included:

- Watching TV, movies and videos (40.7 per cent)
- Using the internet for leisure (36 per cent)
- Playing video games (30.1 per cent)
- Chores or work around the home not involving physical activity (e.g., cooking) (26.2 per cent)
- Hobbies or leisure activities of a non-physical nature that you enjoy (exclude sport or exercise) (24.4 per cent)

Box 18. The top non-gambling activities that replaced part or all of EGM gambling – moderate risk gamblers

The top activities that replaced part or all of EGM gambling included:

- Watching TV, movies and videos (50.6 per cent)
- Using the internet for leisure (37.7 per cent)
- Chores or work around the home not involving physical activity (e.g., cooking) (27.7 per cent)
- Doing physically demanding work around the home (e.g., gardening, renovations, DIY) (24.5 per cent)
- Hobbies or leisure activities of a non-physical nature that you enjoy (exclude sport or exercise) (23.6 per cent)

Box 19. The top non-gambling activities that replaced part or all of EGM gambling – low risk gamblers

The top activities that replaced part or all of EGM gambling included:

- Watching TV, movies and videos (34.7 per cent)
- Using the internet for leisure (32 per cent)
- Chores or work around the home not involving physical activity (e.g., cooking) (16.5 per cent)
- Doing physically demanding work around the home (e.g., gardening, renovations, DIY) (14.8 per cent)
- Playing video games (12.7 per cent)

Box 20. The top non-gambling activities that replaced part or all of EGM gambling – non-problem gamblers

The top activities that replaced part or all of EGM gambling included:

- Watching TV, movies and videos (23 per cent)
- Using the internet for leisure (18.5 per cent)
- Socialising with family or friends (include via video or phone) (11.7 per cent)
- Hobbies or leisure activities of a non-physical nature that you enjoy (exclude sport or exercise) (9.9 per cent)
- Interacting with pets or animals (9.5 per cent)

Qualitative interviews with venue-based EGM gamblers revealed a range of responses to the question of whether lockdown activities continued after venues re-opened. It is important to note that qualitative interviews were conducted during a period of lockdown in August 2021, so gamblers had experienced only fairly limited periods of time where venues had been re-opened at that stage.

Some gamblers reported that some activities such as exercise and healthy eating continued when venues re-opened. Comments included:

- *Yes, I continued on with healthy eating, walking etc. I got to my goal of losing 40kg, then I got to 45kg (Non-problem gambler)*
- *Yes, I was still doing them – I carry them on quite consistently. (Moderate risk gambler)*
- *I still stayed doing daily walks. I still did crosswords and sudoku puzzles. (Non-problem gambler)*

Other gamblers reported that they found it easier to engage in healthy behaviours once lockdowns ended due to being able to access gyms and swimming pools:

- *I went back to the gym in between lockdowns – I get more exercise when I'm not in lockdown. (Non-problem gambler)*
- *Once the pools opened, we went swimming more often between lockdowns. (Moderate risk gambler)*

Some gamblers commented that they did not continue alternative activities after venues re-opened, mainly due to a lack of time once returning to a normal routine. Comments included:

- *At home, it was easier to manage the schedule. I could do it at lunch when home plus it's been cold riding outside. (Moderate risk gambler)*
- *When lockdowns finished - I worked from the office, so I didn't do running as much - I didn't have time. (Problem gambler)*
- *I didn't play as much chess either because of travel time. (Problem gambler)*
- *I didn't continue the walking activities, mainly because we got back to routine life and it was about the business. So it was lacking the time. (Low risk gambler)*

Some gamblers reported not continuing activities, even during lockdown periods, for a range of reasons including a lack of motivation, running out of projects to do and the cold weather. There was also general feedback that the first lockdown was quite different to subsequent lockdowns and that some gamblers got 'bored' with their original lockdown activities. Comments included:

- *I tried walking and I got bored with it. (Problem gambler)*
- *I was just trying to find something to do because everyone was telling us that we had to. Now it's ok to sit around doing nothing. During the first lockdown, people were out and about more. (Problem gambler)*
- *I did puzzles, but I'm not doing them this year. (Low risk gambler)*
- *My willpower went out the window in lockdown five and six – I had no motivation to exercise (Problem gambler)*

11. Are venue-based EGM gamblers interested in recreational activities to support prevention and early intervention of gambling harm?

At-risk gamblers were asked about their interest in working with a recreation officer to identify free or low cost recreational activities that meet their needs. This was considered a possible strategy worth exploring, given that many at-risk gamblers use gambling to address boredom (as also observed in the current study).

Overall, 43.4 per cent of current at-risk gamblers reported interest in a service to identify and link into free or low-cost alternative recreational activities (Figure 22).

Problem gamblers were significantly more interested in such a service (60.1 per cent were interested), compared to low risk (13.6 per cent) and moderate risk gamblers (20 per cent). This suggests that such a service may have high perceived value to problem gamblers. It should also be noted that this PGSI was based on the most recent 12 months, given the changes since COVID.

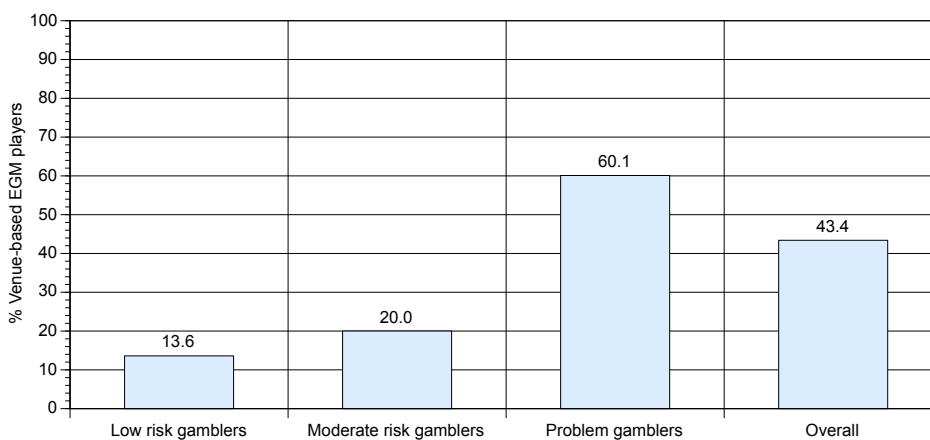
The activities of most interest were exercise programs to build strength and fitness (81.6 per cent), cooking, food, and nutrition programs (80.3 per cent), groups for social trips, lunches or hanging out (76.6 per cent) and gardening and environment activities (76.4 per cent) (Figure 23).

The top three activities of interest to problem gamblers were cooking, food, and nutrition programs (87.5 per cent), exercise programs to build strength and fitness (that cater to all abilities) (86.6 per cent) and arts and creative activities (85.8 per cent).

The top three activities of interest to moderate risk gamblers were exercise programs to build strength and fitness (that cater to all abilities) (79.7 per cent), cooking, food, and nutrition programs (72.8 per cent) and groups for social trips, lunches or hanging out (68.8 per cent).

The top three activities of interest to low risk gamblers were gardening and environment activities (70.1 per cent), exercise programs to build strength and fitness (that cater to all abilities) (66.9 per cent) and cooking, food, and nutrition programs (64.7 per cent).

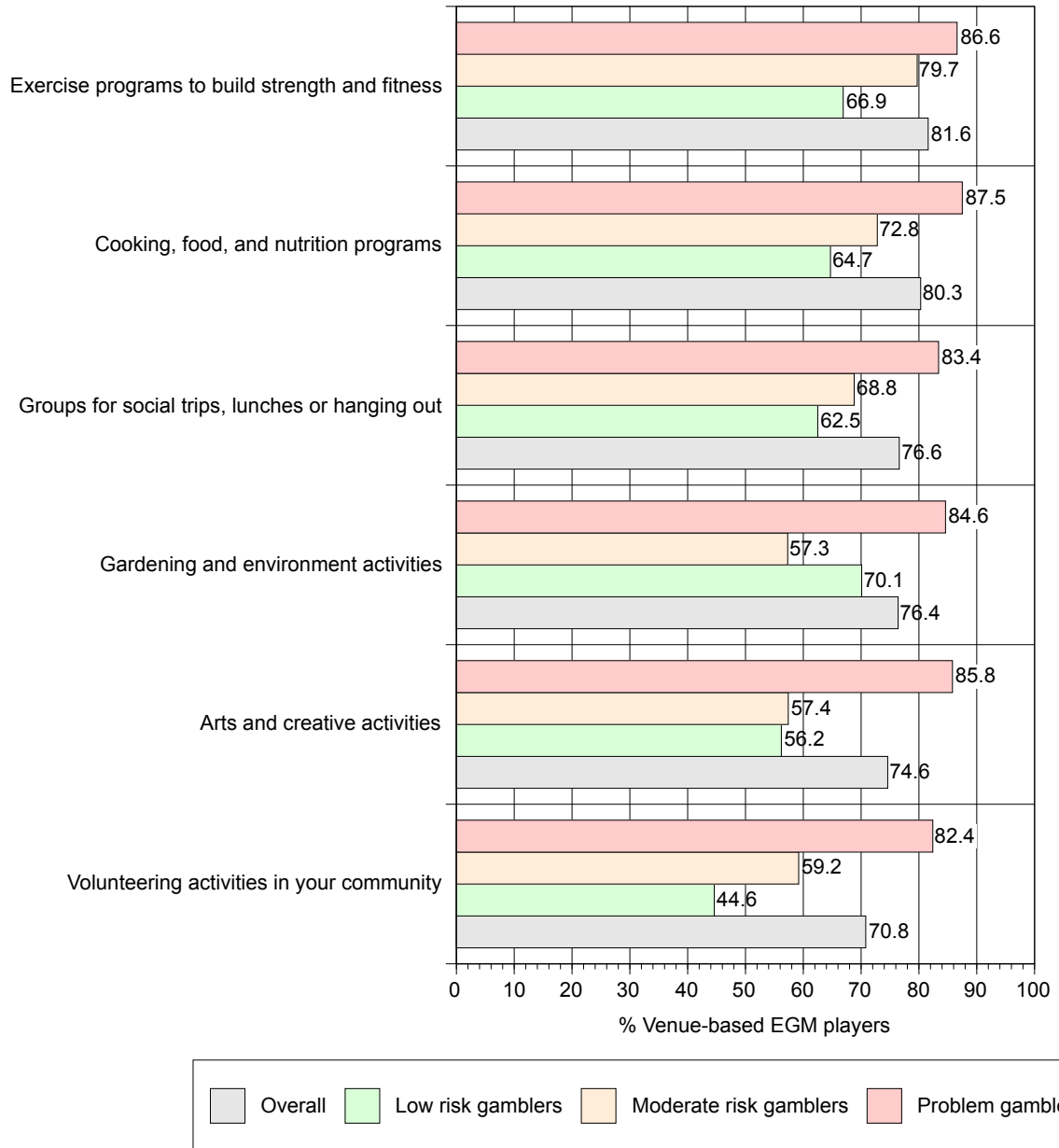
Figure 22. Proportion of venue-based EGM gamblers interested in a service to identify and link into free or low-cost alternative recreational activities – Results by risk for problem gambling (during the past 12 months) (N=398, March – April 2022)



Question: Would you be interested in a service where a recreation officer spends time with you to identify and link you into free or low-cost alternative leisure and recreational activities to pokies? Base: Venue based EGM gamblers classified as low risk, moderate risk or problem gamblers during the past 12 months. Weighted results.

Figure 23. Types of alternative recreational activities of interest to venue-based EGM gamblers – Results by risk for problem gambling (during the past 12 months) (N=398, March – April 2022)

Percentages based on 'somewhat, quite or very interested' ratings



Question: How interested would you be in the following types of alternative leisure and recreational activities? (1=Not at all, 5=Very interested). Base: Venue based EGM gamblers classified as low risk, moderate risk or problem gamblers during the past 12 months. Weighted results.

Qualitative interviews with venue-based EGM gamblers highlighted that problem gamblers tended to be far more interested in a service to identify alternative recreational activities than other gamblers. When the concept was tested during qualitative interviews, comments from problem gamblers included:

- *I just didn't have other choices, so I gamble instead, but if there were other activities, like doing something new, I think that would be really good for me. I know it would be better not to be gambling. Someone to ring me up to say, 'This is happening this Friday night'. Someone to say, 'We're there behind you'. (Problem gambler)*
- *I think I'd use that - I wouldn't travel into the city, but if it was in my local suburb I would go. I think I'd use the service if it was like a Council or a community location. I would use the services at clubs for sure. (Problem gambler)*
- *I'd be interested in working with someone to find alternative activities. (Problem gambler)*
- *I think that would be fantastic to have that as a service. (Problem gambler)*

Qualitative interviews additionally revealed a range of activities of interest to venue-based EGM gamblers, including exercise classes, gym memberships, walking and bike riding, as well as low impact physical activities such as lawn bowls and mini-golf.

There was particular interest in social outings such as day trips on boats, buses or trains to tourist destinations, lunch venues or sporting events. Some participants were also interested in joining clubs for particular interests, such as reading, gardening, movies, chess and cards.

Indoor social gatherings involving activities such as bingo, arcade games, singalongs, and concerts were also mentioned as being of interest.

Classes and seminars with guest speakers were also popular, with the range of interests including cooking, languages, practical 'do-it-yourself' classes, nutrition, retirement planning, holiday planning and computer skills.

Creative pursuits, such as sewing, pottery and painting, were of interest to some participants. Mental health assistance - either in the form of seminars or counselling - were also mentioned. One participant suggested that opportunities for volunteering would be of interest.

Examples of non-gambling activities of interest to EGM gamblers mentioned in interviews are in Table 3.

Table 3. Non-gambling 'leisure' activities of interest to venue-based EGM gamblers – feedback from qualitative interviews (August 2021)

Theme	Illustrative Verbatim
Physical activities	<ul style="list-style-type: none"> • <i>Discounted gym or aquatic centre entry passes or some classes - something new to try at the gym or aquatic centre would be good. (Problem gambler)</i> • <i>I'm more into the physical stuff like tennis and golf - that's what would appeal to me - a sport-based thing. (Problem gambler)</i> • <i>Gym memberships. (Moderate risk gambler)</i> • <i>Having a local gym – just the equipment would be great. We have to drive half an hour. (Moderate risk gambler)</i> • <i>I'd enjoy walking groups and bike rides. (Moderate risk gambler)</i> • <i>Group fitness. (Non-problem gambler)</i> • <i>Bootcamp. (Low risk gambler)</i> • <i>I am active and fit, so I like walking, short runs and exercise classes, boot camps. (Problem gambler)</i>

Theme	Illustrative Verbatim
	<ul style="list-style-type: none"> • <i>I think exercise classes and yoga online would be helpful - live ones are better than the YouTube ones - a bit of interaction. So no recording - live classes. (Problem gambler)</i>
Low-level physical activity	<ul style="list-style-type: none"> • <i>A walking group, something not strenuous and you can still have a conversation with someone. (Problem gambler)</i> • <i>Croquet, lawn bowls or boules – not high energy or high impact. (Problem gambler)</i> • <i>I'd like fun activities like games, so you use your brain or something that engages you - social games like bowling or mini-golf - there are so many different activities you could do as a group too, so you don't think just about gambling. (Moderate risk gambler)</i> • <i>Mini-golf (Problem gambler)</i>
Interest clubs	<ul style="list-style-type: none"> • <i>I like going to the movies - a movie club would be good. (Problem gambler)</i> • <i>A chess club in person. (Problem gambler)</i> • <i>I'd like being able to join a gardening club or group. (Moderate risk gambler)</i> • <i>A reading club would be great. (Moderate risk gambler)</i> • <i>Possibly going to a book club. (Moderate risk gambler)</i> • <i>Even just cards – Mahjong or something that's not poker or blackjack. (Problem gambler)</i> • <i>Movies (Problem gambler)</i>
Indoor social gatherings with activities	<ul style="list-style-type: none"> • <i>Bingo games, singalongs, a meal at the club. Morning melodies. Some sort of get togethers, lunches. (Non-problem gambler)</i> • <i>Bingo and free arcade games could be good to play. Pokies is just something to do, so an old Pac-Man could be fun to play to give people something extra to do other than pokies. Or the gun games for target practice – amusement arcades. (Moderate risk gambler)</i> • <i>Groups for chatting to others or a club for sharing fun activities. We had a laughter club in India – they can have food once per month. Show them what's happening and why it's fun. Maybe team building on site at the clubs to get people involved. Make people curious. (Moderate risk gambler)</i> • <i>If possible, small sized concerts, games like bingo to get people in and feel you're part of things. I love music and concerts. Like having a chat with the band before the show and then having the concert and then you're not caught up with the gambling aspect of the pub. (Moderate risk gambler)</i>
Group social outings	<ul style="list-style-type: none"> • <i>Dating nights for gamblers would be good. Going to sporting events as a group. Movie nights, restaurant nights. (Problem gambler)</i> • <i>Going on toursim things, sports events - that would be great. (Problem gambler)</i> • <i>A bike trip or boat trip would be good. (Problem gambler)</i> • <i>Day trips (Moderate risk gambler)</i> • <i>Going on a train to an unknown destination and seeing what's there or having a meal there or having a walk there – getting out into the fresh air is always a good thing. (Moderate risk gambler)</i> • <i>A full-day brewery tour where you can still have a couple of drinks (Problem gambler)</i> • <i>Excursions. (Non-problem gambler)</i> • <i>Bus trips. (Low risk gambler)</i>

Theme	Illustrative Verbatim
Free tickets/vouchers	<ul style="list-style-type: none"> • <i>Maybe discounted tickets to the movies, zoo or art gallery. Because I work all week, I'd like to do those things with my family, rather than a group of other people I don't know. (Problem gambler)</i> • <i>Maybe if you don't gamble this week, they give you a gift card or points to go to Bunnings. If it's a lead to get you away from it, that's a positive. (Problem gambler)</i> • <i>Petrol vouchers - incentives or food discounts, discounts to restaurants, and other discount vouchers. (Problem gambler)</i> • <i>A couple of free passes into Luna Park for a bit of a stroll, so you don't have to pay to get in. (Moderate risk gambler)</i>
Information seminars/guest speakers	<ul style="list-style-type: none"> • <i>Nights with sports players would be great. Male or female or guest appearances, or athletes doing a talk or presentation. (Moderate risk gambler)</i> • <i>Live speakers talking about different topics – like nutrition, retiring and superannuation. (Moderate risk gambler)</i> • <i>Talks on any subject – like how to use your laptop better. (Moderate risk gambler)</i> • <i>Holiday planning – like someone from Tassie, Queensland or the Northern Territory could come and say this is what you could see. They could have a presentation and video screen. (Moderate risk gambler)</i>
Classes	<ul style="list-style-type: none"> • <i>Maybe some yoga classes or cooking classes. (Problem gambler)</i> • <i>Learning a language would be good. (Non-problem gambler)</i> • <i>Bunnings has the little repair and DIY workshops – they are great. Things like that would be fabulous! (Moderate risk gambler)</i>
Creative pursuits	<ul style="list-style-type: none"> • <i>Sewing, pottery – creative stuff is important to me. Using your hands and learning a new skill. (Non-problem gambler)</i> • <i>Fake art painting. Something not too expensive, but things to help me be more creative. (Low risk gambler)</i>
Mental health support	<ul style="list-style-type: none"> • <i>Learning about mental wellbeing - seminars. I'd love more information about mental health and well-being. Someone talking to me in person. (Problem gambler)</i> • <i>Opportunities for counselling. It's about having counsellors available – there are long waiting lists at the moment for that. (Moderate risk gambler)</i>
Volunteering opportunities	<ul style="list-style-type: none"> • <i>I'd enjoy volunteering with little kids with their reading. (Moderate risk gambler)</i>
Online gaming	<ul style="list-style-type: none"> • <i>I think gaming sessions online - like trivia and so forth would be appealing to gamblers - especially with incentives - that's how people join in. Gambling people like incentives. It could replace my online pokies too - especially if you win vouchers too - it makes it fun - like a dinner for two for \$50. (Moderate risk gambler)</i>

12. Did any leisure or gambling activities undertaken during COVID lockdowns and restrictions have any lasting effects?

As highlighted, increasing cardiovascular activity during COVID lockdowns and restrictions (when venues were closed) had a very small, but positive effect in helping venue-based EGM gamblers take a more balanced approach to gambling when venues re-opened.

Otherwise, specific leisure activities did not individually predict psychological distress, gambling urges, intentions to reduce or stop gambling or changes in risk for problem gambling / changes in gambling harm (from pre-COVID to the most recent 12 months).

Other multivariate analysis revealed that engaging in horse/harness or greyhound race betting online when venues were closed and experiencing psychological distress during COVID lockdowns and restrictions predicted an increase in risk for problem gambling from pre-COVID to the most recent 12 months. This may suggest that this activity was associated with starting some gamblers on a pathway to potential harm during the period of COVID lockdowns and restrictions.

This is also not surprising, given that it was the main legally-permitted online mode of gambling that was readily accessible to the community and could thus provide a replacement gambling activity in lieu of EGM gambling (i.e., while online EGMs are available on international web sites, they are illegal under Australian law).

Discussion of findings

Findings of the current research highlight that COVID has indeed impacted the gambling and leisure activities of venue-based EGM gamblers.

In particular, results showed that, after being effectively forced to change their venue-based EGM gambling due to over 250 days of COVID lockdowns and restrictions in Victoria (which closed EGM venues) and many COVID-related restrictions on venues following this period, many venue-based EGM gamblers have reflected on their gambling and how they spend their leisure time.

Activities replacing EGM gambling since COVID

Of particular note is that around two thirds of venue-based EGM gamblers undertaking activities during COVID lockdowns and restrictions have replaced some or all of their EGM gambling with those activities, and those activities were *still* being undertaken during March-April 2022. The tendency to replace EGM gambling with other activities was also significantly higher in at-risk gamblers than non-problem gamblers.

Some of these replacement activities were just general day-to-day activities (e.g., TV, movies, videos, the internet, household chores), while others reported replacing activities with pursuits such as video gaming (nearly one in five), hobbies and leisure activities (also nearly one in five) and doing physically demanding work around the home (around one in six).

It is noteworthy that a greater proportion of problem and moderate risk gamblers reported replacing some part of (or all) their EGM gambling with *most types* of activities, compared to non-problem gamblers (with two or one exceptions, respectively).

Further highlighting that the time on other activities during lockdowns and restrictions has had some positive effects, around three quarters of venue-based EGM gamblers reflected that doing activities during COVID lockdowns and restrictions had helped them find a more balanced approach to EGM gambling when venues re-opened.

Suggesting a high benefit of any activities for higher risk segments, this was reported by 95 per cent of problem gamblers, 86.4 per cent of moderate risk gamblers, 66 per cent of low risk gamblers and 49 per cent of non-problem gamblers (based on responses of 'Somewhat/quite a lot/significantly').

This suggests that being forced to look into alternative activities has had some positive effects for many venue-based EGM gamblers and particularly those in higher risk segments.

With just over half of venue-based EGM gamblers (51.2 per cent) reporting that venue closures had been positive (including a higher proportion of problem and moderate risk gamblers) and problem gamblers reporting their top positive effect as being encouraged to find new activities to keep busy (34.2 per cent), this conclusion also seems likely.

Furthermore, for those *not* returning to venues, just over one in four reported that COVID had led them to re-evaluate how they spend their leisure time.

While most individual activities during COVID lockdowns and restrictions could not be linked to gambling risk changes or harm, multivariate analysis showed that *increasing* cardiovascular activity during COVID lockdowns and restrictions (over and above the regular amount) had a very small, but statistically significant effect in helping venue-based EGM gamblers take a more balanced approach to gambling when venues re-opened.

Qualitative feedback from interviewed venue-based EGM gamblers also highlighted the many positive effects of getting into exercise during periods of lockdown. Exercise helped to *not only* give people something to do on a daily basis, but *was also* instrumental in helping improve mental health and wellbeing. This may explain why venue-based EGM gamblers reported cardiovascular exercise (one in five) and physically demanding work around the home (also one in five) in the top five activities that had the *most positive* effect on health and wellbeing.

Rebar et al. (2015) conducted a meta-analysis to quantify the effects of physical activity on mental health and found that it reduces both depression and anxiety in non-clinical populations. This type of finding is of particular interest in that it only summarised effects from *very high* quality studies.

However, further exploratory multivariate analysis conducted in this study was not able to link other specific leisure activities undertaken during lockdowns and restrictions with changes in risk for problem gambling or gambling harm.

This may suggest that doing activities during the peak of COVID has produced change of a more *psychological nature* (i.e., the time has given gamblers an opportunity to reflect on their gambling and replace it with other activities) and is not specifically due to any single activity.

Discussions with venue-based EGM gamblers undertaken as part of this research also tend to highlight this possibility (e.g., *...It's challenged me to find ways to improve my life. I've taken up the bike riding and walking - Moderate risk gambler*).

Video gaming during COVID and its link to problem gambling

A range of observations can also be made about the tendency of problem gamblers to pursue very solitary 'screen-based' activities to a higher degree than other risk segments during COVID lockdowns and restrictions.

While it is unclear why these activities were pursued, it is possible that screen-based activities may offer problem gamblers some level of 'escapism', similar to EGMs.

While debates have emerged about exactly *why* people play video games, some authors identify escapism as a possible motive (e.g., Kardefelt-Winther, 2014). In their research during the 2020 wave of COVID-19, Prinsen and Schofield (2021) argued that video gaming offered escapism during periods of quarantine and particularly *role playing* video games, which allow escape to a fantasy world.

The authors proposed that video gaming can offer the potential for players to escape real-world issues, provide a mechanism to cope with stressors and can thus be a great form of 'self-therapy'.

However, while video gaming was examined during the COVID lockdown period, the current study did not examine player expenditure on monetised loot boxes or other types of in-game purchases that have been described as having characteristics similar to gambling (e.g., King and Delfabbro, 2019).

It is similarly of note that one in three problem gamblers reported *replacing* their EGM gambling with video game play (compared to only 8.5 per cent of non-problem gamblers) since venues had re-opened. This may therefore raise the possibility that some cohorts of problem gamblers, in particular, may become further entwined with monetised aspects of video gaming in the future. This may also be a topic for further research.

How gambling has changed in venue-based EGM gamblers since COVID

Overall, the current study has shown that just over two-thirds of venue-based EGM gamblers returned to Victorian EGM venues to gamble on EGMs in the most recent 12 months. A significantly higher proportion of problem gamblers (83.2 per cent) also reported returning to venues than any of the other gambling risk segments.

Of particular interest is that groups over-represented in the returning gamblers were male (63.9 per cent), and young males 18-34 years (30.1 per cent versus 11.3 per cent of those who did not return). Groups under-represented were females aged 35-39 years (9.6 per cent of those returning to venues versus 16.5 per cent for those who did not return) and females aged 50 or older (11.9 per cent of those returning to venues versus 22.9 per cent for those who did not return).

For the cohort *not returning* to EGM venues, findings suggested that the very top reason for non-return was related to COVID itself (i.e., wanting to avoid public places). This may suggest that some proportion of the previously attending EGM gambler cohort has changed their behaviour because of COVID and may in particular explain why females aged 50 or older were less likely to return (in addition to the financial impact on women, which has been widely documented (e.g., as shown in the Grattan Institute Report by Wood, Griffiths and Crowley, 2021).

Also to note is that people with comorbidity were over-represented in the cohort returning to EGM venues. This included females with a probable serious mental illness (19.7 per cent had a probable serious mental illness, compared to 5.9 per cent for those who did not return), people with substance use disorders (21.7 per cent versus 13.2 per cent for those who did not return) and people with personality disorders (16.0 per cent versus 9.4 per cent for those who did not return).

Furthermore, 61 per cent of returning problem gamblers classified into Pathway Three in the Pathways Model (a cohort experiencing high levels of impulsivity, risk-taking, antisocial traits with respect to their gambling) (Nower et al., 2021).

Together, this suggests that the venue-based EGM gamblers currently gambling on EGMs in venues have not only many comorbidities, but may even have more comorbidity than pre-COVID. In addition, this may highlight that a good proportion of this remaining cohort has a strong tendency to clinically significant addiction and may need specialised services and supports to reduce gambling harm.

When examining recent EGM gambling behaviour (in the past 12 months), findings showed that, while 100 per cent of the study cohort gambled on EGMs in the 12 months pre-COVID, now only 76.3 per cent were gambling on EGMs (in some format – including online). This suggests that participation in EGMs declined overall as a result of COVID-19 (a decrease of 23.7 per cent from pre-COVID to the most recent past 12 months).

In terms of participation by risk segment, however, a large proportion of problem gamblers (85.5 per cent) maintained EGM participation during COVID lockdowns and restrictions (i.e., gambled online) and most had resumed gambling in the most recent 12 months (96.4 per cent). This represented only a small decline of 3.6 per cent in participation for problem gamblers.

In comparison, non-problem gamblers declined dramatically to only 10.1 per cent participation during COVID lockdowns and restrictions and 58.8 per cent had resumed EGM gambling in the most recent 12 months.

When EGM gambling *frequency* is examined, it is evident that, while 45.8 per cent of venue-based EGM gamblers decreased their gambling frequency, increases in EGM gambling frequency from pre-COVID to the most recent 12 months were largest in problem gamblers (34.2 per cent increased).

This highlights that around one third of problem gamblers are now gambling *more intensively* (frequently) on EGMs post-COVID than pre-COVID. Furthermore, 35.6 per cent increased their EGM session length and 39.9 per cent increased their EGM spending.

Together, such results highlight that a good percentage of the remaining cohort of problem gamblers currently gambling on EGMs in venues is not only gambling *more intensively*, but is also likely to be spending more.

The tendency for 31.9 per cent of problem gamblers to increase their wagering frequency (though wagering participation was only down 0.6 per cent since pre-COVID), for 27.4 per cent of problem gamblers to increase their sports betting frequency (in spite of participation only being down 1.6 per cent) and the tendency for 35 per cent of problem gamblers to increase their table game betting frequency (in spite of participation only being down 3.3 per cent) also leads to this conclusion.

Psychological stressors

Given the many stressors that have impacted Victorians since COVID, psychological distress due to COVID and its impacts may well have contributed to this situation. Of particular note is that problem gamblers were very adversely impacted by COVID and particularly, financially impacted.

For instance, with respect to problem gamblers, 35.5 per cent lost their job completely (compared to 4.6 per cent of non-problem gamblers), 62 per cent felt distressed about their overall financial situation (compared to 23.2 per cent of non-problem gamblers) and 66.6 per cent felt distressed about their debts during COVID lockdowns and restrictions (compared to 14.3 per cent of non-problem gamblers).

When gambling harm to individuals was analysed, results similarly showed that, while cohort level harm within venue-based EGM gamblers decreased 2 per cent from pre-COVID to the most recent 12 months, 29 per cent of problem gamblers reported an *increase* in harm.

This illustrates that, while overall cohort harm has remained fairly stable across time, around 14.8 per cent of venue-based EGM gamblers experienced an *increase* in harm and the overall increase in harm was quite common in problem gamblers (with almost one in three experiencing an increase in harm).

Accordingly, as EGM gamblers with comorbidity have been known to gamble as a strategy to cope with negative mood states (e.g., Wood and Griffiths, 2007), it is plausible that the major stress caused by COVID has contributed to more intensive EGM gambling in some gamblers, and particularly in problem gamblers.

It is also of note in this context that other study multivariate analyses showed that engaging in horse/harness or greyhound race betting online when venues were closed and experiencing psychological distress during COVID lockdowns and restrictions predicted an increase in risk for problem gambling from pre-COVID to the most recent 12 months.

This may reflect the high accessibility of online wagering to the community at this time and their increased vulnerability due to experiencing high psychological distress during this period.

Implications of findings for the future

One of the most interesting findings of this research is that reducing access to EGM venues has encouraged many venue-based EGM gamblers to re-evaluate their EGM gambling and many in turn replaced EGM gambling with other activities. Furthermore, problem gamblers in particular have done this and have reported that doing various activities helped manage their gambling urges.

Given that many high risk gamblers and particularly problem gamblers have an over-reliance on gambling for leisure and frequently report gambling due to boredom or loneliness, this study has highlighted the potential for alternative activities to be used as a harm prevention strategy.

Indeed, if activities can be targeted to people at-risk of gambling harm (and particularly to problem gamblers), there is potential for activities to help reduce harm by providing other pastimes that can encourage people to attend activities on an ongoing basis. This itself may in turn lead to EGM gamblers relying *less* on gambling at venues and spending more time on other activities of interest.

When the study cohort was asked if they were interested in such programs, findings showed that 60.1 per cent of problem gamblers (and 20 per cent of moderate risk gamblers and 13.6 per cent of low risk gamblers) were interested in working with a recreation officer to identify low cost or free activities they could do.

While a new program and still evolving, the South Australian Department of Human Services *Community Connections* program has been designed with a similar purpose in mind. This program offers people 18-64 years an opportunity to be linked in to social and community networks to help those people build stronger social and community connections. At the time of this report, however, it has not yet been specifically targeted at at-risk gamblers.

As such, this type of program may have potential to address both risk factors for gambling harm and be targeted at people experiencing gambling harm (including those attending help services and trying to recover from a gambling problem).

In this study, a question was asked about activity preferences of venue-based EGM gamblers. This showed that the activities of most interest were exercise programs to build strength and fitness (81.6 per cent interested), cooking, food, and nutrition programs (80.3 per cent interested), groups for social trips, lunches or hanging out (76.6 per cent interested) and gardening and environment activities (76.4 per cent interested).

Accordingly, this may highlight the potential for such programs into the future. Given that physical activity programs, in particular, have been shown to positively impact depression and anxiety and given the strong interest of problem gamblers in exercise programs during COVID lockdowns and restrictions, physical activities may offer particular benefits.

The role of exercise in the treatment of gambling disorder was recently considered by Okechukwu (2019). People with gambling disorders were proposed as being physically inactive, likely to have poor cardiovascular and mental health, not be physically fit, and have low quality of life compared to healthy controls who exercised regularly.

For this reason, exercise was proposed to be potentially effective as an *adjunctive* treatment strategy. Butler et al. (2020) similarly identified a range of health inequalities in gamblers right across the full continuum of risky gambling (e.g., poor diets, smoking, low physical exercise, poor general health, higher risk drinking).

Together, such findings highlight the potential value of activity programs for at-risk gamblers and particularly problem gamblers who showed a very strong interest in alternative leisure activities.

Supporting at-risk gamblers during a community crisis

A further implication of this research involves how to best support at-risk gamblers from harm during crises. Findings of the study highlight that, together with high psychological stress during COVID lockdowns and restrictions, online wagering may have been a gateway that led some venue-based EGM gamblers to increase their risk for problem gambling from pre-COVID to the most recent 12 months.

During the initial phase of the COVID pandemic (during 2020), in response to concern over gamblers spending in a panic (e.g., due to financial distress), the Swedish Government implemented a deposit and time limit for online gambling in casinos (Lindner et al, 2020).

While the impact of such measures remains still unclear, this may highlight some potential to examine protective mechanisms to reduce gambling harm during periods of high economic stress.

While such measures will never stop all at-risk gamblers from experiencing harm, they may have potential to reduce harm at a community level during such periods. In Australia, during the peak impacts of 2020, no such measures were implemented.

Accordingly, this is a topic that could be considered into the future as a measure to reduce harm during high risk periods. Given that 43.8 per cent of the venue-based EGM gambler cohort went online during COVID lockdowns and restrictions (and 85.5 per cent of problem gamblers), this may highlight the benefit of placing harm-minimisation measures (e.g., maximum spend or deposit limits) on alternative channels such as online wagering.

In addition, this also highlights the potential to design communications and measures to reduce harm in those likely to be tempted by such channels.

Limitations of findings

As in all research studies, results of this study need to be carefully considered in the context of the online panel sample and methodology, the study design (a cross-sectional study using retrospective measurement which implies the risk of non-recall of important thoughts and behaviours) and in the potential for results to be impacted by the type of respondents completing the survey (i.e., online panel survey members recruited from largely unknown samples using unknown methodologies).

The limitations of the study time frame also imply that results may have changed further, given the additional time since COVID. In addition, while survey weighting was used to help rebalance the relatively biased panel sample, it must also be acknowledged that weighting can never perfectly correct for sampling distortions and sampling errors will always influence survey results.

Due to such limitations, study results should thus be considered *indicative* and guiding rather than definitive. However, in spite of limitations, this study provides some insight into how COVID lockdowns and restrictions may have changed venue-based EGM gambling and the impacts of COVID on the experiences of these gamblers.

Appendices

- Appendix A – Qualitative interview protocol
- Appendix B – Quantitative survey instrument

Appendix A - Qualitative interview protocol

Leisure activity background

- What types of leisure and day-to-day activities did you do before the COVID pandemic?
- Can you describe to me what you did on a typical weekday? And on a typical weekend? What did you get up to?
- What do you consider to be your main hobbies? How often did you do these?

Gambling background

- To what degree did you consider going to the pokies pre-COVID a leisure activity?
- What types of gambling did you do before the start of the COVID pandemic?
- How often did you go? How long did you tend to gamble for? At what locations?
- Where did pokies play fit in with your other life and leisure activities?

Life since the pandemic

- Since the COVID pandemic, how has your life changed? In which ways has it changed?
- What types of economic stimulus and support were you able to access due to COVID? (e.g., Jobseeker, Jobkeeper, super access, grants etc.)
- (If not mentioned) Have any of the following aspects of your life changed since COVID? How?
 - Your employment
 - Your financial situation (also explore financial/debt stress)
 - Your relationships
 - Your wellbeing
 - Your urge to gamble
- What types of coping strategies did you use to deal with the life changes caused by the COVID pandemic?
- How well did you cope overall in the early pandemic stages including during the first and second major Victorian lockdowns? (e.g., March-October 2020)
- To what extent did your coping strategies help you cope with the pandemic? (Explore)

Life when gaming (pokies) venues were closed

- As you'll recall, pokies venues closed for most of the period from March to October 2020 and were also closed during a lockdown in February 2021. What effect, if any, did the closure of gaming venues have on you personally?
- Were there any positive effects of the venue closure on you? How would you describe these?
- Were there any negative effects of the venue closure on you? How would you describe these?

Life activities when gaming (pokies) venues were closed

- To what extent did you set yourself any new routines during the times when venues were closed? Did you set any routines during the lockdown periods? What did you do day-to-day?
- To what extent did you pursue work, hobbies and physical activities? What specifically did you do?
- To what extent did you pursue activities that weren't particularly good for health and wellbeing? (e.g., explore alcohol, smoking, eating etc.)
- To what extent did you do new activities you did not normally do?

Psychological effect of activities during venue closure

- How did doing these alternative activities make you think and feel? How would you describe their psychological effects?
- What effect, if any, did the activities have on your urge to gamble?
- To what degree did the activities you pursued give you purpose and meaning? Help create a sense of achievement? Lift your mood and reduce worry?
- To what extent did doing alternative activities lead you to reflect on your gambling? What did you think about? (Explore)
- During the period of venue closure, did you plan to return to gambling venues and particularly pokies gambling, once venues re-opened? Why?
- Did you set any goals to change your gambling in any way, once venues re-opened? (Explore)

Substituted gambling during the venue closure and harm

- Did you take up any online gambling during the period of venue closure? What did you do?
- Why did you take this up? Why did you choose these types of gambling?
- What effect did this gambling have on you? Were the effects positive or negative?
- How often did you gamble and how much did you spend?
- To what extent did this gambling replace your pokies gambling?
- What were the effects of this gambling on you personally?

Whether EGM gamblers went back to gambling when venues re-opened

- Have you gone back to gamble on the pokies, since venues have re-opened?
- Why or why not? Why led you to return or not return?

If not returned:

- To what extent is COVID versus other factors keeping you away from venues?
To what extent are financial factors playing a role?
- To what extent did the alternative leisure activities you pursued during the period of venue closure help reduce your desire to gamble on pokies? Did those activities replace your pokies gambling?
- What is your view of pokies gambling now that you have not returned? Do you ever plan to?
- To what extent has not returning helped reduce any negative effects of pokies in your life?
- Have there been any barriers in keeping up your alternative leisure activities?
- To what extent did you continue the activities you did when gaming venues were closed due to COVID?

If returned:

- Now that you've returned, what has pokies gambling been like?
- How do you compare your pokies spend (money and time) with what you spent pre-COVID?
- How did your urge to gamble change from pre-COVID to the period of venue closure to now?
- What other gambling are you doing?
- (If relevant) have you continued any of the substituted gambling activities? (Explore)
- Have there been any barriers in keeping up your alternative leisure activities?
- To what extent did you continue the activities you did when gaming venues were closed due to COVID?

Future value of recreation programs

- What value would a program be that offers free or low-cost alternative recreation activities to people who wanted to reduce or stop their pokies gambling? Would you use such a program?
- How do you see such a program working?
- To what extent would you like to work with someone to find alternative leisure activities other than pokies to occupy your time? How would this work?
- (If relevant) What type of alternative activities would be of interest to you?

Other topics of interest

- What type of help and support do you think would be useful to people who are tempted to gamble on substitute activities online during high stress community situations – like this pandemic?
- This pandemic has given some gamblers the opportunity to be abstinent from gambling due to venue closures. Overall, what effect has this had for you personally?
- What learnings can we take away in encouraging higher risk gamblers to consider abstinence as a way for recovering from a gambling issue?

Thank participant.

Explain how research will be used and explain that the incentive will be emailed within the next seven days.

Explain available help and support services for people affected by gamblers or their significant others and offer the numbers and web sites for:

- Gamblers Help 1800 858 858 (www.gamblershelp.com.au)
- Lifeline 13 11 14 (www.lifeline.org.au)

If any respondent became emotionally impacted in any way during the interviews, we would:

- Offer them to either end or take a break from the interview (if they wished to continue)
- Emphasise that they don't have to answer any questions if they feel too personal or sensitive
- Suggest that they contact either Gamblers Help or Lifeline

Appendix B - Quantitative survey instrument

Demographics

STATE1. Which State have you mainly lived in since March 2019?

1. Victoria	Continue
2. New South Wales	Screen out
3. Queensland	
4. South Australia	
5. Western Australia	
6. ACT	
7. Northern Territory	

STATE2. Are you still living in Victoria?

1. Yes (Continue)
2. No (Screen out)

AGE. What is your age?

1. 18-24 years
2. 25-34 years
3. 35-49 years
4. 50-64 years
5. 65 years and older

GENDER. What is your gender?

1. Male
2. Female
3. Other

SUBURB. What is your suburb _____

(Insert postcode suburb concordance database)

SCREENER – NOT MAIN SURVEY – ONLY SCREENING QUESTIONS FOR IN-SCOPE POPULATION

GAMBLING.

We would like to understand if Victorian community gambling has changed since COVID.

How often have you spent any money on the following gambling activities for two time periods:

- During the 12 months BEFORE COVID (March 2019 to February 2020)
- In the most recent past 12 months

Gambling activities	(TIME1) (A) During the 12 months BEFORE COVID (March 2019 to February 2020)	(TIME3) (B) In the most recent past 12 months
1. Informal private betting for money - like playing cards at home	1. Not at all 2. Every other month or less (1-6 times per year) 3. Every other month to monthly (7-12 times per year) 4. More than monthly to twice a month (15-24 times per year) 5. More than twice a month to once a week (25-52 times per year) 6. More than once a week (53 times or more per year)	1. Not at all 2. Every other month or less (1-6 times per year) 3. Every other month to monthly (7-12 times per year) 4. More than monthly to twice a month (15-24 times per year) 5. More than twice a month to once a week (25-52 times per year) 6. More than once a week (53 times or more per year)
2. Pokies or electronic gaming machines	1. Not at all 2. Every other month or less (1-6 times per year) 3. Every other month to monthly (7-12 times per year) 4. More than monthly to twice a month (15-24 times per year) 5. More than twice a month to once a week (25-52 times per year) 6. More than once a week (53 times or more per year)	1. Not at all 2. Every other month or less (1-6 times per year) 3. Every other month to monthly (7-12 times per year) 4. More than monthly to twice a month (15-24 times per year) 5. More than twice a month to once a week (25-52 times per year) 6. More than once a week (53 times or more per year)
	LOC. Did you play pokies or electronic gaming machines at a: <ol style="list-style-type: none"> 1. Pub / hotel 2. Club 3. Crown casino 4. Online / over the internet / on your mobile (using overseas sites) 	LOC. Did you play pokies or electronic gaming machines at a: <ol style="list-style-type: none"> 1. Pub / hotel 2. Club 3. Crown casino 4. Online / over the internet / on your mobile (using overseas sites)
	EGM_TIME. How long in minutes did you spend on pokies (each session)? <ol style="list-style-type: none"> 1. Less than 30 minutes 2. 30min to under 1hr 3. 1hr to under 2hrs 4. 2hrs to under 3hrs 	EGM_TIME. How long in minutes did you spend on pokies (each session)? <ol style="list-style-type: none"> 1. Less than 30 minutes 2. 30min to under 1hr 3. 1hr to under 2hrs 4. 2hrs to under 3hrs

Gambling activities	(TIME1) (A) During the 12 months BEFORE COVID (March 2019 to February 2020)	(TIME3) (B) In the most recent past 12 months
	<p>5. 3hrs or more</p> <p>EGM_MONEY. On average, how much money did you spend on pokies each time you played (each session)?</p> <ol style="list-style-type: none"> 1. \$20 or less 2. \$21 - \$50 3. \$51 - \$75 4. \$76 - \$100 5. \$101 - \$150 6. \$151 - \$200 7. \$201 - \$300 8. \$301 - \$400 9. \$401 - \$500 10. \$501 - \$1,000 11. More than \$1,000 <p>OL. (If online) You mentioned that you played pokies or electronic gaming machines online / over the internet / on your mobile.</p> <p>How many times per [insert - week/month /year] did you play online / over the internet / on your mobile? _____ times per [insert]</p> <p>(VALIDATE MAX LIMIT TO RESPONSE)</p>	<p>5. 3hrs or more</p> <p>EGM_MONEY. On average, how much money did you spend on pokies each time you played (each session)?</p> <ol style="list-style-type: none"> 1. \$20 or less 2. \$21 - \$50 3. \$51 - \$75 4. \$76 - \$100 5. \$101 - \$150 6. \$151 - \$200 7. \$201 - \$300 8. \$301 - \$400 9. \$401 - \$500 10. \$501 - \$1,000 11. More than \$1,000 <p>OL. (If online) You mentioned that you played pokies or electronic gaming machines online / over the internet / on your mobile.</p> <p>How many times per [insert - week/month /year] did you play online / over the internet / on your mobile? _____ times per [insert]</p> <p>(VALIDATE MAX LIMIT TO RESPONSE)</p>
<p>12. Betting on table games like blackjack, roulette and poker</p>	<ol style="list-style-type: none"> 1. Not at all 2. Every other month or less (1-6 times per year) 3. Every other month to monthly (7-12 times per year) 4. More than monthly to twice a month (15-24 times per year) 5. More than twice a month to once a week (25-52 times per year) 6. More than once a week (53 times or more per year) 	<ol style="list-style-type: none"> 1. Not at all 2. Every other month or less (1-6 times per year) 3. Every other month to monthly (7-12 times per year) 4. More than monthly to twice a month (15-24 times per year) 5. More than twice a month to once a week (25-52 times per year) 6. More than once a week (53 times or more per year)
<p>13. Betting on horse, harness racing or greyhounds – including at the Melbourne Cup, Spring Racing or on Trackside virtual racing</p> <p>Exclude sweeps</p>	<ol style="list-style-type: none"> 1. Not at all 2. Every other month or less (1-6 times per year) 3. Every other month to monthly (7-12 times per year) 4. More than monthly to twice a month (15-24 times per year) 5. More than twice a month to once a week (25-52 times per year) 6. More than once a week (53 times or more per year) 	<ol style="list-style-type: none"> 1. Not at all 2. Every other month or less (1-6 times per year) 3. Every other month to monthly (7-12 times per year) 4. More than monthly to twice a month (15-24 times per year) 5. More than twice a month to once a week (25-52 times per year) 6. More than once a week (53 times or more per year)

Gambling activities	(TIME1) (A) During the 12 months BEFORE COVID (March 2019 to February 2020)	(TIME3) (B) In the most recent past 12 months
14. Betting on sports – like AFL or cricket <u>Exclude</u> fantasy sports, novelty events and eSports (video game bets)	1. Not at all 2. Every other month or less (1-6 times per year) 3. Every other month to monthly (7-12 times per year) 4. More than monthly to twice a month (15-24 times per year) 5. More than twice a month to once a week (25-52 times per year) 6. More than once a week (53 times or more per year)	1. Not at all 2. Every other month or less (1-6 times per year) 3. Every other month to monthly (7-12 times per year) 4. More than monthly to twice a month (15-24 times per year) 5. More than twice a month to once a week (25-52 times per year) 6. More than once a week (53 times or more per year)
15. Betting on novelty events (like election results), fantasy sports and e-Sports (video game competitions) <u>Exclude</u> private bets	1. Not at all 2. Every other month or less (1-6 times per year) 3. Every other month to monthly (7-12 times per year) 4. More than monthly to twice a month (15-24 times per year) 5. More than twice a month to once a week (25-52 times per year) 6. More than once a week (53 times or more per year)	1. Not at all 2. Every other month or less (1-6 times per year) 3. Every other month to monthly (7-12 times per year) 4. More than monthly to twice a month (15-24 times per year) 5. More than twice a month to once a week (25-52 times per year) 6. More than once a week (53 times or more per year)
16. Keno	1. Not at all 2. Every other month or less (1-6 times per year) 3. Every other month to monthly (7-12 times per year) 4. More than monthly to twice a month (15-24 times per year) 5. More than twice a month to once a week (25-52 times per year) 6. More than once a week (53 times or more per year)	1. Not at all 2. Every other month or less (1-6 times per year) 3. Every other month to monthly (7-12 times per year) 4. More than monthly to twice a month (15-24 times per year) 5. More than twice a month to once a week (25-52 times per year) 6. More than once a week (53 times or more per year)
17. Australian lotteries, such as Tattslotto, Oz Lotto, Powerball or Pools	1. Not at all 2. Every other month or less (1-6 times per year) 3. Every other month to monthly (7-12 times per year) 4. More than monthly to twice a month (15-24 times per year) 5. More than twice a month to once a week (25-52 times per year) 6. More than once a week (53 times or more per year)	1. Not at all 2. Every other month or less (1-6 times per year) 3. Every other month to monthly (7-12 times per year) 4. More than monthly to twice a month (15-24 times per year) 5. More than twice a month to once a week (25-52 times per year) 6. More than once a week (53 times or more per year)
18. Scratch tickets	1. Not at all 2. Every other month or less (1-6 times per year) 3. Every other month to monthly (7-12 times per year) 4. More than monthly to twice a month (15-24 times per year) 5. More than twice a month to once a week (25-52 times per year)	1. Not at all 2. Every other month or less (1-6 times per year) 3. Every other month to monthly (7-12 times per year) 4. More than monthly to twice a month (15-24 times per year)

Gambling activities	(TIME1) (A) During the 12 months BEFORE COVID (March 2019 to February 2020)	(TIME3) (B) In the most recent past 12 months
	6. More than once a week (53 times or more per year)	5. More than twice a month to once a week (25-52 times per year) 6. More than once a week (53 times or more per year)
19. Bingo	1. Not at all 2. Every other month or less (1-6 times per year) 3. Every other month to monthly (7-12 times per year) 4. More than monthly to twice a month (15-24 times per year) 5. More than twice a month to once a week (25-52 times per year) 6. More than once a week (53 times or more per year)	1. Not at all 2. Every other month or less (1-6 times per year) 3. Every other month to monthly (7-12 times per year) 4. More than monthly to twice a month (15-24 times per year) 5. More than twice a month to once a week (25-52 times per year) 6. More than once a week (53 times or more per year)

PGSI. How often did the following occur **when you gambled** in these two same periods?

That is:

- During the 12 months BEFORE COVID (March 2019 to February 2020)
- In the most recent past 12 months

SCALE ITEMS CANADIAN PROBLEM GAMBLING SEVERITY INDEX (VALIDATED INTERNATIONALLY USED SCREENING TOOL)	(IF GAMBLING PRE-COVID) (TIME1) (A) During the 12 months BEFORE COVID (March 2019 to February 2020)	(IF GAMBLING PAST 12M) (TIME3) (B) In the most recent past 12 months
1. How often did you bet more than you could really afford to lose?	0 Never 1. Sometimes 2. Most of the time 3. Almost always	0 Never 1. Sometimes 2. Most of the time 3. Almost always
2. How often did you need to gamble with larger amounts of money to get the same feeling of excitement?	0 Never 1. Sometimes 2. Most of the time 3. Almost always	0 Never 1. Sometimes 2. Most of the time 3. Almost always
3. When you gambled, did you go back another day to try to win back the money you lost?	0 Never 1. Sometimes 2. Most of the time 3. Almost always	0 Never 1. Sometimes 2. Most of the time 3. Almost always
4. Did you borrow money or sell anything to get money to gamble?	0 Never 1. Sometimes 2. Most of the time 3. Almost always	0 Never 1. Sometimes 2. Most of the time 3. Almost always
5. Did you feel that you might have a problem with gambling?	0 Never 1. Sometimes	0 Never 1. Sometimes

SCALE ITEMS CANADIAN PROBLEM GAMBLING SEVERITY INDEX (VALIDATED INTERNATIONALLY USED SCREENING TOOL)	(IF GAMBLING PRE-COVID) (TIME1) (A) During the 12 months BEFORE COVID (March 2019 to February 2020)	(IF GAMBLING PAST 12M) (TIME3) (B) In the most recent past 12 months
	2. Most of the time 3. Almost always	2. Most of the time 3. Almost always
6. Did people criticise your betting or told you that you had a gambling problem, regardless of whether or not you thought it was true?	0 Never 1. Sometimes 2. Most of the time 3. Almost always	0 Never 1. Sometimes 2. Most of the time 3. Almost always
7. Did you feel guilty about the way you gamble, or what happens when you gamble?	0 Never 1. Sometimes 2. Most of the time 3. Almost always	0 Never 1. Sometimes 2. Most of the time 3. Almost always
8. How often did gambling cause you any health problems, including stress or anxiety?	0 Never 1. Sometimes 2. Most of the time 3. Almost always	0 Never 1. Sometimes 2. Most of the time 3. Almost always
9. How often did your gambling cause any financial problems for you or your household?	0 Never 1. Sometimes 2. Most of the time 3. Almost always	0 Never 1. Sometimes 2. Most of the time 3. Almost always

HIDDEN VARIABLES (Replicate for PGSI_B)

PGSI_A=1	(If PGSI_A sum of scores = 0) > Non-problem gamblers (NPG)
PGSI_A =2	(If PGSI_A sum of scores = 1-2) > Low risk gamblers (LR)
PGSI_A =3	(If PGSI_A sum of scores = 3-7) > Moderate risk gamblers (MR)
PGSI_A =4	(If PGSI_A sum of scores = 8-27) > Problem gamblers (PG)

HARM. Please rate the overall negative impacts that your own gambling has had on your life.

IF GAMBLING DURING TIME 1 (TIME1) During the 12 months BEFORE COVID (March 2019 to February 2020)	IF GAMBLING IN PAST 12M (TIME3) In the most recent past 12 months
1. No negative impacts 2. Very few negative impacts 3. Some negative impacts 4. Many negative impacts	1. No negative impacts 2. Very few negative impacts 3. Some negative impacts 4. Many negative impacts

[If GAMBLING_A2=1 or 2 or 3 – i.e., Played pokies before COVID at pub/hotel, club, casino] > Continue to main survey – DESIGNATED VENUE BASED EGM PLAYER

If not a pokies player – ‘Thanks for your time....’ (screen out).

**(CONTINUE WITH VENUE-BASED EGM PLAYERS INDICATING LOCATION = 1, 2 or 3)
(Pub/hotel, club or casino EGM play prior to COVID)**

MAIN ONLINE SURVEY

CLOSURE_ACTIVITIES

Victorian pokies venues have been closed from time to time due to COVID lockdowns or restrictions.

This included an initial long shut down period of six months from March to October 2020 and various other lockdowns and restrictions during February 2021 and from May to October 2021.

During COVID lockdowns and restrictions in Victoria (when pokies venues were closed), how often did you spend money on the following gambling activities?

Gambling activities	<p style="text-align: center;">Time 2_A.</p> <p style="text-align: center;">During COVID lockdowns and restrictions, (when pokies venues were closed), how often did you gamble on these activities?</p>
1. Informal private betting for money - like playing cards at home	1. Not at all 2. Every other month or less (1-6 times per year) 3. Every other month to monthly (7-12 times per year) 4. More than monthly to twice a month (15-24 times per year) 5. More than twice a month to once a week (25-52 times per year) 6. More than once a week (53 times or more per year)
2. Pokies or electronic gaming machines online	1. Not at all 2. Every other month or less (1-6 times per year) 3. Every other month to monthly (7-12 times per year) 4. More than monthly to twice a month (15-24 times per year) 5. More than twice a month to once a week (25-52 times per year) 6. More than once a week (53 times or more per year)
3. Betting on table games online like blackjack, roulette and poker	1. Not at all 2. Every other month or less (1-6 times per year) 3. Every other month to monthly (7-12 times per year) 4. More than monthly to twice a month (15-24 times per year) 5. More than twice a month to once a week (25-52 times per year) 6. More than once a week (53 times or more per year)
4. Betting on horse, harness racing or greyhounds online	1. Not at all 2. Every other month or less (1-6 times per year) 3. Every other month to monthly (7-12 times per year)

Gambling activities	<p style="text-align: center;">Time 2_A.</p> <p style="text-align: center;">During COVID lockdowns and restrictions, (when pokies venues were closed), how often did you gamble on these activities?</p>
	4. More than monthly to twice a month (15-24 times per year) 5. More than twice a month to once a week (25-52 times per year) 6. More than once a week (53 times or more per year)
5. Betting on sports online – like AFL or cricket Exclude fantasy sports, novelty events and eSports (video game bets)	1. Not at all 2. Every other month or less (1-6 times per year) 3. Every other month to monthly (7-12 times per year) 4. More than monthly to twice a month (15-24 times per year) 5. More than twice a month to once a week (25-52 times per year) 6. More than once a week (53 times or more per year)
6. Betting on novelty events (like election results), fantasy sports and e-Sports (video game competitions) online Exclude private bets	1. Not at all 2. Every other month or less (1-6 times per year) 3. Every other month to monthly (7-12 times per year) 4. More than monthly to twice a month (15-24 times per year) 5. More than twice a month to once a week (25-52 times per year) 6. More than once a week (53 times or more per year)
7. Playing Keno online	1. Not at all 2. Every other month or less (1-6 times per year) 3. Every other month to monthly (7-12 times per year) 4. More than monthly to twice a month (15-24 times per year) 5. More than twice a month to once a week (25-52 times per year) 6. More than once a week (53 times or more per year)
8. Buying a ticket in Australian lotteries, such as Tattsлото, Oz Lotto, Powerball or Pools from a shop or online	1. Not at all 2. Every other month or less (1-6 times per year) 3. Every other month to monthly (7-12 times per year) 4. More than monthly to twice a month (15-24 times per year) 5. More than twice a month to once a week (25-52 times per year) 6. More than once a week (53 times or more per year)
9. Buying Scratch tickets from a shop or online	1. Not at all 2. Every other month or less (1-6 times per year) 3. Every other month to monthly (7-12 times per year) 4. More than monthly to twice a month (15-24 times per year) 5. More than twice a month to once a week (25-52 times per year) 6. More than once a week (53 times or more per year)

Gambling activities	<p style="text-align: center;">Time 2_A.</p> <p style="text-align: center;">During COVID lockdowns and restrictions, (when pokies venues were closed), how often did you gamble on these activities?</p>
10. Bingo online	1. Not at all 2. Every other month or less (1-6 times per year) 3. Every other month to monthly (7-12 times per year) 4. More than monthly to twice a month (15-24 times per year) 5. More than twice a month to once a week (25-52 times per year) 6. More than once a week (53 times or more per year)

STIMULUS_A. Which of the following did you receive since COVID?

Select one or more responses

1. Jobkeeper
2. Jobseeker
3. Withdrew money from Super
4. Victorian Government small business assistance grants/funding
5. None of the above

(If STIMULUS_A = 1 to 4)

STIMULUS_B. Did you spend any part of these COVID payments on gambling?

Please be honest, as this helps the research

1. Yes
2. No

Your urge to gamble

GUS. Now I'd like you to think about your urge to gamble for two periods of time:

- During the 12 months BEFORE COVID (when life was 'normal')
- During COVID lockdowns and restrictions (when pokies venues were closed)

Please indicate how much you agree or disagree with the following statements.

VALIDATED SCREENING TOOL (GAMBLING URGE SCALE)	(TIME1) During the 12 months BEFORE COVID						(TIME2) DURING COVID lockdowns and restrictions (when pokies venues were closed)							
	Strongly disagree					Strongly agree	Strongly disagree					Strongly agree		
1. All I wanted to do was to gamble	1	2	3	4	5	6	7	1	2	3	4	5	6	7
2. It would have been difficult to turn down an opportunity to gamble	1	2	3	4	5	6	7	1	2	3	4	5	6	7
3. Having a gamble would have made things seem just perfect	1	2	3	4	5	6	7	1	2	3	4	5	6	7
4. I wanted to gamble so bad, I could almost feel it	1	2	3	4	5	6	7	1	2	3	4	5	6	7
5. Nothing would have been better than having a gamble	1	2	3	4	5	6	7	1	2	3	4	5	6	7
6. I craved a gamble	1	2	3	4	5	6	7	1	2	3	4	5	6	7

K6. Now I'd like you to rate your wellbeing for these two same time periods:

- During the 12 months BEFORE COVID (when life was 'normal')
- During COVID lockdowns and restrictions (when pokies venues were closed)

How often did you feel as follows?

VALIDATED SCREENING TOOL (KESSLER-6)	(TIME1) During the 12 months BEFORE COVID					(TIME2) DURING COVID lockdowns and restrictions (when pokies venues were closed)				
	All of the time	Most of the time	Some of the time	A little of the time	Not at all	All of the time	Most of the time	Some of the time	A little of the time	Not at all
Nervous	1	2	3	4	5	1	2	3	4	5
Hopeless	1	2	3	4	5	1	2	3	4	5
Restless or fidgety	1	2	3	4	5	1	2	3	4	5
So depressed that nothing could cheer you up	1	2	3	4	5	1	2	3	4	5
That everything was an effort	1	2	3	4	5	1	2	3	4	5
Worthless	1	2	3	4	5	1	2	3	4	5

Coping strategies during COVID

During COVID lockdowns and restrictions (when pokies venues were closed), how often did you do the following...

Statements	Never	Rarely	Sometimes	Often	Always
Problem focused coping					
I took initiative to plan how I would make good use of my time	1	2	3	4	5
I set myself a routine and goals	1	2	3	4	5
I developed a plan to help myself work through any problems or issues I experienced	1	2	3	4	5
Emotion focused coping					
I found it difficult to make plans, as I was emotionally overwhelmed	1	2	3	4	5
I turned to activities that weren't good for my health or wellbeing (e.g., increased use of alcohol, smoking, overeating etc.)	1	2	3	4	5

FIN_STRESS.

During COVID lockdowns and restrictions (when pokies venues were closed).

(A) How distressed did you feel about your ability to pay debts, loans or mortgages?

1. Not at all distressed / Don't have any
2. Not very distressed
3. Somewhat distressed
4. Very distressed

(B) How distressed did you feel about your overall financial situation?

1. Not at all distressed / Don't have any
2. Not very distressed
3. Somewhat distressed
4. Very distressed

ACTIVITIES.

During COVID lockdowns and restrictions (when pokies were closed), how often did you do the following activities?

SCALES (1=Never, 2=Rarely, 3=Sometimes, 4=Often, 5=Always)

1. Paid work or volunteer work
2. Formal study (e.g., TAFE, Uni course) or self-paced education
3. Home schooling and caring for children
4. Chores or work around the home not involving physical activity (e.g., cooking)
5. Watching TV, movies and videos
6. Using the internet for leisure
7. Playing video games
8. Socialising with family or friends (include via video or phone)
9. Interacting with pets or animals
10. Hobbies or leisure activities of a non-physical nature that you enjoy (exclude sport or exercise)

(If 10 – What hobbies or leisure activities of a non-physical nature did you do during COVID lockdowns and restrictions in Victoria? (when pokies venues were closed) _____

11. Doing physically demanding work around the home (e.g., gardening, renovations, DIY)
12. Doing yoga, meditation, Pilates or mind-body exercise (e.g., tai chi, Body Balance)
13. Doing weight training/resistance exercise (to work muscles) (e.g., lifting weights) (exclude sports)
14. Playing a sport (e.g., Tennis, basketball etc.)
15. Doing other cardiovascular exercise (e.g., walking, running) (exclude sports) (exclude sports)
16. None of the above (SKIP TO HEALTH)

COMPARISON. Compared to BEFORE COVID, how often did you do activities during COVID lockdown and restrictions? (when pokies venues were closed)

PRESENT EACH AS SELECTED WITH THE SCALE:

1. I did the activity LESS OFTEN (or stopped doing the activity)
2. I did the activity ABOUT THE SAME AMOUNT
3. I did the activity MORE OFTEN (or started doing the activity)

REPLACE. Have any of the activities you did during COVID lockdowns and restrictions (when pokies venues were closed) replaced some or all of your previous pokies play (that you did BEFORE COVID)?

Only include activities that you are currently still doing

Please select one or more activities

PRESENT LIST AND MULTIPLE RESPONSE

MH. Which activities had the largest positive effect on your health and wellbeing during COVID lockdowns and restrictions?

Please select up to three activities

PRESENT LIST AND MULTIPLE RESPONSE

(IF MR or PG either BEFORE COVID or PAST 12mths)

MH. Which activities had the largest positive effect in reducing your urge to gamble during the COVID lockdowns?

Please select up to three activities

PRESENT LIST AND MULTIPLE RESPONSE

ACTIVITY_IMPACT. To what extent did doing alternative leisure activities during COVID lockdowns and restrictions help you find a (more) balanced approach to pokies gambling when venues re-opened?

1. Not at all
2. Somewhat
3. Quite a lot
4. Significantly

HEALTH. During COVID lockdowns and restrictions (when pokies venues were closed), did your...

(A) Alcohol consumption

1. Increase (or you started drinking alcohol)
2. Stay the same
3. Decrease (or you stopped drinking alcohol)
4. Not applicable / Don't drink alcohol

(B) Cigarette or cigar smoking

1. Increase (or you started smoking)
2. Stay the same
3. Decrease (or you stopped smoking)
4. Not applicable / Don't smoke

(C) Eating junk food or less healthy food

1. Increase (or you started eating junk or less healthy food)
2. Stay the same
3. Decrease (or you started eating junk or less healthy food)
4. Not applicable / Don't eat junk or less healthy food

EFFECT_POSITIVE. Did the closure of pokies venues due to COVID lockdowns or restrictions have any positive effects for you?

1. Yes
2. No

[If EFFECT_POSITIVE=1]

POSITIVE. Which of the following **positive effects** did you experience?

1. Had (more) money to spend on essential items I need (e.g., food, bills)
2. Had (more) money to spend on other leisure activities
3. Had money to pay debts, rent, mortgage or household bills
4. Improved my mental health and/or wellbeing (from not losing money)
5. Had more free time to spend with family/friends
6. It encouraged me to find new activities to keep busy
7. Developed better control over my gambling
8. Reduced my interest / lost interest in pokies gambling
9. Less arguments over gambling with spouse/family/friends
10. Other positive effects (describe) _____
11. None of the above

EFFECT_NEGATIVE. Did the closure of Victorian gaming (pokies) venues due to COVID have any negative effects for you?

1. Yes
2. No

[If EFFECT_NEGATIVE=1]

NEGATIVE. Which of the following **negative effects** did you experience?

1. Pokies weren't available to improve my mood / take my mind of issues and problems
2. I felt bored / had nothing to do
3. I missed the social interaction (e.g., with players, staff)
4. I felt frustrated that I couldn't win back the money I lost before venues closed
5. I wasn't able to win (earn) extra money on pokies play to buy things I wanted
6. I missed the excitement of free spins, features and winning on pokies games
7. Other negative effects (describe) _____
8. None of the above

INTENTION. During COVID lockdowns and restrictions (when pokies venues were closed), which of the following best describes your intention to go back to pokies, when pokies venues re-opened?

PLEASE REPORT WHAT YOU WERE THINKING AT THE TIME, NOT WHAT YOU DID

Select one response

1. I wasn't sure if I'd go back or I did not think about it
2. I had intentions to go back to pokies, once venues re-opened
3. I had intentions to reduce my pokies gambling, once venues re-opened
4. I had intentions to stop my pokies gambling, once venues re-opened

[If INTENTION=3 or 4] and [RETURNED TO POKIES GAMBLING – Pokies past 12m > 0]

OUTCOME. You reported that you have gone back to play pokies at a venue in the past 12 months.

Did you (insert – reduce / stop) your pokies gambling as you planned?

1. Yes
2. No

[IF OUTCOME=2]

TRIGGER. Why did not you reduce or stop your gambling as you had hoped to?

Select one or more responses

1. I saw a gaming venue
2. Another person suggested we play pokies
3. I experienced a win on another type of gambling
4. I felt a strong urge to gamble / relapsed
5. I wanted to win back money I lost on another type of gambling
7. I wanted to win money to help pay for things
8. I was feeling down, sad, depressed, worried or anxious
9. I was feeling lonely, socially isolated or bored
10. Another reason (please describe) _____

IF NO POKIES GAMBLING PAST 12mths

NONE. You mentioned that you haven't gambled on pokies in the past 12 months.

What are the top three reasons you haven't gone back?

1. Don't want to spend the money / Cannot afford it / Being careful with finances
 2. The pokies are not enjoyable
 3. The pokies are now less social / friends not going
 4. I avoid public places since COVID
 5. COVID led me to re-evaluate how I spend my leisure time
 6. Many pokies are now not available/shutdown (as every second machine is off) / socially distanced
 7. Other reason_____
-

IF POKIES GAMBLING PAST 12mths

WENT_BACK.

You mentioned that have gambled on pokies in the past 12 months.

What are the top three reasons you went back to pokies?

1. I enjoy pokies/free spins/features
 2. I enjoy the social contact
 3. Something to do to when I'm bored
 4. I like to gamble for extra money
 5. Helps pick up my mood
 6. Play pokies after enjoying food at the venue
 7. Other_____
-

[All respondents]

URGE_C. How much do you agree or disagree with the following thinking about the most recent past 12 months.

VALIDATED SCALE GAMBLING URGE SCALE	Your urge to gamble thinking about the most recent past 12 months						
	Strongly disagree						Strongly agree
All I wanted to do was to gamble	1	2	3	4	5	6	7
It would have been difficult to turn down an opportunity to gamble	1	2	3	4	5	6	7
Having a gamble would have made things seem just perfect	1	2	3	4	5	6	7
I wanted to gamble so bad, I could almost feel it	1	2	3	4	5	6	7
Nothing would have been better than having a gamble	1	2	3	4	5	6	7
I craved a gamble	1	2	3	4	5	6	7

K6_C. Thinking about the most recent past 12 months, how often did you feel as follows...

VALIDATED SCALE KESSLER-6	During the most recent 12 months				
	All of the time	Most of the time	Some of the time	A little of the time	Not at all
Nervous	1	2	3	4	5
Hopeless	1	2	3	4	5
Restless or fidgety	1	2	3	4	5
So depressed that nothing could cheer you up	1	2	3	4	5
That everything was an effort	1	2	3	4	5
Worthless	1	2	3	4	5

HELP. Have you sought help for a gambling problem during the following periods – either from a professional or informally from a friend, family member or another person?

1. In the 12 months BEFORE COVID – Yes/No
2. During COVID lockdowns or restrictions – Yes/No
3. In the most recent 12 months – Yes/No

[LR, MR, PG – Past 12mths]

Rebalance. Would you be interested in a service where a recreation officer spends time with you to identify and link you into free or low-cost alternative leisure and recreational activities to pokies?

1. Yes
2. No

[LR, MR, PG – Past 12mths]

Interests. How interested would you be in the following types of alternative leisure and recreational activities? (1=Not at all, 5=Very interested)

1. Exercise programs to build strength and fitness (that cater to all abilities)
2. Gardening and environment activities
3. Cooking, food and nutrition programs
4. Arts and creative activities
5. Groups for social trips, lunches or hanging out
6. Volunteering activities in your community

Life changes since COVID

COVID_IMPACTS.

Has COVID impacted you in any of the following ways? (Yes/No)

1. Lost your job completely
2. Reduced work hours, pay or stood down from a job
3. Your business was financially impacted by COVID
4. You were an essential worker / front line worker (i.e., worked in public facing roles to keep community services going)
5. You've felt concerned about going back to pokies venues due to health risks of COVID

VALIDATED SCALE – GAMBLING PATHWAYS QUESTIONNAIRE

(Gambling Pathways Questionnaire segment PGs into Behaviourally Conditioned (BC), Emotionally Vulnerable (EV) and Anti-social impulsivist (AI) segments)

[PG/MRs only - based on either pre-COVID or past 12m PGSI segment]

Please indicate how much you agree or disagree with each statement thinking of the 12 months **BEFORE COVID.**

Statements	Your agreement					
	Strongly disagree					Strongly agree
1. I gambled mainly to relieve tension, to "blow off steam"	1	2	3	4	5	6
2. I like doing or saying crazy things just to shock others	1	2	3	4	5	6
3. Gambling gave me purpose in life	1	2	3	4	5	6
4. I often say mean and hurtful things when I'm angry	1	2	3	4	5	6
5. When I gambled, I can forget my responsibilities for a while	1	2	3	4	5	6
6. If I want sex, I am willing to pay for it	1	2	3	4	5	6
7. A big win at gambling would have given my life meaning	1	2	3	4	5	6
8. I'll often take a dare, even if it's dangerous	1	2	3	4	5	6
9. I frequently buy things on impulse, even if I can't afford them	1	2	3	4	5	6
10. When I'm angry, I always feel better if I can hit or throw something	1	2	3	4	5	6
11. If I won at gambling, I wouldn't feel like such a failure	1	2	3	4	5	6
12. I am often impatient when standing in line or waiting for other people	1	2	3	4	5	6
13. I only follow the rules if I think I could get caught	1	2	3	4	5	6
14. I gambled mainly to cope with the stress and pressures of life	1	2	3	4	5	6

Statements	Your agreement					
	Strongly disagree					Strongly agree
BEFORE gambling started causing me issues...						
15. I often felt panicky	1	2	3	4	5	6
16. I often felt tense and nervous	1	2	3	4	5	6
17. I worried a lot	1	2	3	4	5	6
18. I often felt sad and down for periods of time (lasting at least two weeks)	1	2	3	4	5	6
SINCE gambling started causing me issues						
19. I often felt panicky	1	2	3	4	5	6
20. I often felt tense and nervous	1	2	3	4	5	6
21. I worried a lot	1	2	3	4	5	6
22. I often felt sad and down for periods of time (lasting at least two weeks)	1	2	3	4	5	6

As a child or teenager, I was...

Statements	Your agreement					
	Strongly disagree					Strongly agree
23. Hit, punched, or kicked at home	1	2	3	4	5	6
24. Frequently teased or bullied at school	1	2	3	4	5	6
25. Often called hurtful names like "worthless," "no good," or "stupid"	1	2	3	4	5	6
26. Subjected to unwanted or inappropriate sexual contact	1	2	3	4	5	6
27. Abandoned emotionally or ignored by my caregivers	1	2	3	4	5	6
28. Often left at home alone or without proper clothing, food, heat or other necessities	1	2	3	4	5	6
29. Exposed to (witnessed) physical violence against someone else	1	2	3	4	5	6

Statements	Your agreement					
	Strongly disagree					Strongly agree
30. The only time I felt important was when I was gambling	1	2	3	4	5	6
31. I will pick up someone just for sex	1	2	3	4	5	6
32. Since childhood, I've always been prone to get in trouble	1	2	3	4	5	6
33. I would bet on anything just for the excitement	1	2	3	4	5	6
34. I gambled to distract myself from problems	1	2	3	4	5	6
35. If necessary, I'll do illegal things unrelated to gambling	1	2	3	4	5	6
36. People who know me would say my behaviour is unpredictable and inconsistent	1	2	3	4	5	6
37. If only I could have won at gambling, I wouldn't feel so powerless over my life	1	2	3	4	5	6
38. I often get into physical fights with other people	1	2	3	4	5	6
39. If something feels good, I'll do it regardless of the consequences	1	2	3	4	5	6
40. Gambling helped me forget bad memories in my life	1	2	3	4	5	6
41. Sometimes my temper explodes for no good reason	1	2	3	4	5	6
42. I've been known to have unprotected sex with someone I don't know well	1	2	3	4	5	6
43. Gambling helped me avoid dealing with difficult situations and/or people in my life	1	2	3	4	5	6
44. It's OK to lie to gain an advantage	1	2	3	4	5	6
45. Gambling numbed me out so I did feel bad emotions	1	2	3	4	5	6
46. I often manipulate others to get what I want	1	2	3	4	5	6
47. I often say or do things without stopping to think	1	2	3	4	5	6
48. If someone tells me not to do something, I'll want to do it even more	1	2	3	4	5	6

MENTAL_HEALTH. Have you ever experienced any of the following mental health conditions?

Type of mental health condition/disorders	Examples	Response
Anxiety disorders	<ul style="list-style-type: none"> • Generalised anxiety disorder/anxiety • Post-traumatic stress disorder • Social phobias • Panic disorder/agoraphobia 	1. Yes 2. No
Mood disorders	<ul style="list-style-type: none"> • Depression • Dysthymia • Bipolar disorder 	1. Yes 2. No
Substance use disorders	<ul style="list-style-type: none"> • Alcohol • Drugs • Other substances 	1. Yes 2. No
Personality disorders	<ul style="list-style-type: none"> • Paranoid personality disorder • Schizoid personality disorder • Schizotypal personality disorder • Antisocial personality disorder • Borderline personality disorder • Histrionic personality disorder • Narcissistic personality disorder • Avoidant personality disorder • Dependent personality disorder • Obsessive–compulsive personality disorder 	1. Yes 2. No

Demographics

LOTE. Do you speak a language other than English at home

1. Yes (which _____)
2. No

ATSI. Are you of Aboriginal and/or Torres Strait Islander background?

Select one or more responses

1. Aboriginal
2. Torres Strait Islander
3. None of the above

Thanks for your participation.

Results will be used to inform the design of programs at the Victorian Responsible Gambling Foundation (VRGF).

If you would like to receive an email when study findings are published, please email research@schottler.com.au.

If you would like help or support for a gambling issue for yourself or another person, call 1800 858 858, visit gamblershelp.com.au or contact Lifeline on 13 11 14.

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