

Panels Summary

Strengthening Collaboration to Optimize
Efforts Addressing Gambling-related Harm
in Ontario

26 January & 2 February 2018



McMaster
HEALTH FORUM

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McMaster Health Forum and Forum+

The goal of the McMaster Health Forum, and its Forum+ initiative, is to generate action on the pressing health- and social-system issues of our time, based on the best available research evidence and systematically elicited citizen values and stakeholder insights. We aim to strengthen health and social systems – locally, nationally, and internationally – and get the right programs, services and products to the people who need them. In doing so, we are building on McMaster’s expertise in advancing human and societal health and well-being.

About citizen panels

A citizen panel is an innovative way to seek public input on high-priority issues. Each panel brings together 14-16 citizens from all walks of life. Panel members share their ideas and experiences on an issue, and learn from research evidence and from the views of others. A citizen panel can be used to elicit the values that citizens feel should inform future decisions about an issue, as well as to reveal new understandings about an issue and spark insights about how it should be addressed.

About this summary

On the 26th of January and 2nd of February 2018, the McMaster Health Forum convened citizen panels on strengthening collaboration to optimize efforts addressing gambling-related harms in Ontario. This summary highlights the views and experiences of panel participants about:

- the underlying problem;
- three possible elements of an approach to addressing the problem; and
- potential barriers and facilitators to implement these elements.

The citizen panel did not aim for consensus. However, the summary describes areas of common ground and differences of opinions among participants and (where possible) identifies the values underlying different positions.

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Summary of the panels

Participants across the two panels identified six challenges related to addressing gambling-related harms in Ontario: 1) the normalization of gambling and the stigma associated with seeking help for gambling problems inhibits access to supports and services; 2) insufficient restrictions on gambling advertisements and ‘give-aways’ result in skewed messaging that downplays the potential risks associated with gambling; 3) conflict of interest within industry and government, stemming from the conflicting goals of revenue generation and delivery of services, makes addressing gambling-related harms difficult; 4) increasingly blurred lines between gambling and online gaming undermine existing restrictions and prevention; 5) limited availability and accessibility of gambling supports and services, including promotion and prevention services, mean many people who need help aren’t getting it; and 6) lack of availability and sharing of data results in limitations in its use to inform the development of programs and services.

Panellists generally supported all three elements of a potentially comprehensive approach to strengthening collaboration to optimize efforts addressing gambling-related harms in Ontario: 1) get the right services to those who need them and bring a public-health perspective to bear; 2) align how funds set aside from gaming revenue are used to better support evidence-informed policies and practices; and 3) establish governance structures that clarify leadership, strengthen collaboration, and promote cross-sectoral partnerships. In discussing element 1, panellists stressed the need to strengthen public-health approaches, as well as health-promotion and disease-prevention services, to combat stigma and support individuals to access the right services at the right time. Panellists emphasized increasing the financial accountability of the gaming industry to support prevention, education, treatment and research (element 2), and they called for the adjustment of governance processes to include insights from individuals with lived experiences (element 3).

When the deliberations turned to implementation, panellists identified the difficulties associated with pursuing change given the conflict of interest between revenue generation and reducing gambling-related harms, as well as the challenges of getting all stakeholders to agree on a common vision and set of actions, as the key barriers to moving forward. Despite these challenges, panellists noted that the use of personal stories from those who have been affected by problem gambling may help to build political will for change.

The picture can't be displayed.

“There hasn’t been enough effort into making it acceptable to have a gambling problem”

Discussing the problem:

What are the most important challenges to reducing gambling related-harm in Ontario?

Panel participants began by reviewing the findings from the pre-circulated citizen brief, which highlighted what is known about the underlying problem – limited collaboration in efforts addressing gambling-related harms – and its causes. They individually and collectively focused on six challenges in particular:

- the normalization of gambling and the stigma associated with seeking help for gambling problems inhibits access to supports and services;
- insufficient restrictions on gambling advertisements and ‘give-aways’ result in skewed messaging that downplays the potential risks associated with gambling;
- conflict of interest within industry and government stemming from the conflicting goals of revenue generation and delivery of services makes addressing gambling-related harms difficult;

- increasingly blurred lines between gambling and online gaming undermine existing restrictions and prevention efforts;
- limited availability and accessibility of gambling supports and services, including promotion and prevention services, mean many people who need help aren't getting it; and
- lack of availability and sharing of data results in limitations in its use to inform the development of programs and services.

We review each of these challenges in turn below.

The normalization of gambling and the stigma associated with seeking help for gambling problems inhibits access to supports and services

Panellists initially focused on the significant stigma attached to gambling (and problem gambling more specifically), which they felt often contributed to individuals being unlikely to admit they have a problem or to seek help for their problem. In addition to the challenges associated with stigma, a panellist shared anecdotes about how the normalization of gambling also posed potential problems. Specifically, a number of panellists described how gambling had become prevalent in workplaces as a form of entertainment, particularly through shared lottery ticket purchases or initiatives meant to raise money for charities. Panellists agreed that this normalization contributed to a lack of

Box 1: Key features of the citizen panels

The citizen panels about modernizing the oversight of the health workforce in Ontario had the following 11 features:

1. it addressed a high-priority issue in Ontario;
2. it provided an opportunity to discuss different features of the workforce-oversight problem;
3. it provided an opportunity to discuss three elements of a potentially comprehensive approach to addressing the problem;
4. it provided an opportunity to discuss key implementation considerations (e.g., barriers);
5. it provided an opportunity to talk about who might do what differently;
6. it was informed by a pre-circulated, plain-language brief;
7. it involved a facilitator to assist with the discussions;
8. it brought together citizens affected by the problem or by future decisions related to the problem;
9. it aimed for fair representation among the diversity of citizens involved in or affected by the problem;
10. it aimed for open and frank discussions that will preserve the anonymity of participants; and
11. it aimed to find both common ground and differences of opinions.

awareness of gambling as a problem or as a potential risk factor, and may also deter individuals from seeking help for fear of appearing weak. One participant highlighted that while there have been concerted efforts to reduce stigma in other areas of mental health and addictions, such as the Bell Let's Talk Campaign, no such efforts have been made for gambling. Without similar promotional efforts, panellists worried that the normalization of gambling may lead to a lack of awareness about an individual's problems, or the problems of their loved ones, as well as a reduced likelihood that they may notice potential risk factors for problem gambling behaviour as they emerge.

Insufficient restrictions on gambling advertisements and 'give-aways' result in skewed messaging that downplays the potential risks associated with gambling

Drawing on comparisons to alcohol and tobacco, panellists questioned the large discrepancies in advertising and marketing restrictions that had been placed on these other substances compared to gambling, suggesting that those currently in place for gambling were insufficient. In particular, most panellists focused on television advertisements that they had seen to illustrate this point, with one panellist stating: "I don't think I have ever seen a gambling ad where people aren't happy." Other panellists agreed and took issue with the lack of realistic depictions of gambling, describing how the majority of ads shown on television were based on fantasies associated with winning large jackpots. While panellists were generally concerned about unrealistic advertising, they were particularly worried about the implications of this type of advertising for high-risk populations, notably those of low socio-economic status, who may view gambling as a source of hope. This sentiment was expressed by one participant who described how they had not considered gambling until they were placed on disability insurance, at which point they described feeling enticed by what appeared to be "a quick way to make money." In addition to this concern about misleading advertisements, a number of panellists wondered why there are no restrictions placed on promoting gambling products in communities (for example, lottery amounts displayed in convenience store windows), particularly given alcohol and tobacco promotions of a similar nature are restricted.

In addition to what panellists perceived as false advertising, a number also expressed concern about the many enticements targeted at gamblers, with one panellist stating that gambling vendors "lure you to spending time and money at casinos." Specific examples of these enticements included free tickets to shows, free meals at restaurants, gifts,

transportation to and from the facilities, and dedicated staff escorts. Some panellists indicated that these types of perks can reinforce gambling as a positive thing, as they can make individuals feel special. A number of panellists were especially troubled by the provision of easy transportation, which they believed significantly increased access to gambling facilities, and as result increased the number of individuals at risk for gambling-related harms. Importantly, one participant commented that this increase in access also had significant economic implications for the communities surrounding casinos, describing how the presence of nearby casinos resulted in residents in their own town choosing to spend their money on gambling, rather than in ways that support the local economy.

Conflict of interest within industry and government stemming from the conflicting goals of revenue generation and delivery of services makes addressing gambling-related harms difficult

Throughout the deliberations on the problem, panellists frequently mentioned the conflict of interest that exists both at the individual and system level. At the individual level, participants stated that they believed there were no incentives for individuals engaged in selling gambling products – such as convenience store owners and casino workers (to name a few) – to intervene when they see individuals exhibit behaviour that could suggest problem gambling. Participants stated that this could be considered a conflict of interest given registration procedures and obligations put in place for retailers by provincial regulators.

At the system level, panellists commented that there is an even greater conflict of interest. Specifically, a number noted that the government receives significant revenue from gambling and as a result has an interest in encouraging Ontarians to gamble, which conflicts with their responsibility for planning and paying for services to help individuals with problem-gambling behaviours. As a result, panellists questioned the extent to which the government was serious about wanting to reduce gambling-related harms, describing how – without the right incentives – government would be unlikely to put in place meaningful restrictions that aim to curb problem-gambling behaviours. In support of this perspective, one panellist described how in researching the topic they noticed that the Ontario Lottery and Gaming Corporation had prioritized growing the number of Ontarians who gambled. A number of panellists stated that this further solidified their belief that there was a problematic conflict of interest, and reduced their faith in government to take the issue of problem gambling seriously.

Increasingly blurred lines between gambling and online gaming undermine existing restrictions and prevention efforts

Several panellists expressed concern about the amount of time their friends and family spent playing computer or mobile games. While the panellists noted that this was not widely considered ‘gambling’ in the traditional sense, they described how real money could be used to purchase goods in online games in order to improve the chance of winning, which was similar to gambling. Most panellists agreed that this was likely going to be a growing issue in the coming years. Within this part of the discussion, a few younger panellists pointed out that additional innovations are likely to create new and novel challenges in the coming years. Specifically, they noted the increasing availability of unregulated gambling websites and the use of cryptocurrencies, both of which will challenge existing conceptions of gambling, as well as the restrictions that have been set in Ontario. In particular, some participants suggested that self-exclusion (a voluntary program to support those who wish to stop gambling, whereby if they register, they are removed from marketing lists and asked to leave a slots or casino site when detected on the property) could be made less effective given the widening range of gambling opportunities the internet provides as alternatives to casinos.

In discussing what the future of gambling could look like, a number of panellists questioned whether existing restrictions and other prevention efforts were fit for purpose. One participant provided the example of a minimum age to

Box 2: Profile of panel participants

The citizen panel aimed for fair representation among the diversity of citizens likely to be affected by the problem. We provide below a brief profile of panel participants.

- How many participants?
23
- Where were they from?
Regions covered by the Champlain, Hamilton Niagara Haldimand Brant, Mississauga Halton, South East, and Toronto Central Local Health Integration Networks
- How old were they?
25-34 (5), 35-49 (6), 50-64 (6) and 65+ (6)
- Were they men or women?
men (14) and women (9)
- Were they from urban, suburban or rural areas?
urban (9), suburban (6) and rural (8)
- What was the income level of participants?
22% earned less than \$20,000, 17% between \$20,000 and \$35,000, 17% between \$35,000 and \$49,000, 17% between \$50,000 and \$80,000, 17% more than \$80,000, and 9% preferred not to answer.
- How were they recruited? Selected based on explicit criteria from the AskingCanadians™ panel

gamble. They stated that while it has worked well for restricting access to in-person gambling venues when a government-issued ID is required, the restriction is significantly easier to bypass online. Other panellists added to this discussion and described how existing prevention efforts, including information and education, typically focused on in-person gambling and often on an older audience, rather than being tailored towards younger generations and the new modalities that are being used.

Limited availability and accessibility of gambling supports and services, including promotion and prevention services, mean many people who need help aren't getting it

Panellists who had experience seeking supports and services for gambling-related harms, either for themselves or for a loved one, were the most vocal about the availability and accessibility of services. One panellist with personal experience assisting a family member to seek support detailed their challenges accessing services, recalling their experience of not knowing where to begin looking for help. Other panellists agreed that unlike other mental health and addictions services, gambling-related supports and services were not well advertised, with many panellists admitting that if they were to seek help, they did not know what kinds of supports or services would be provided, or what healthcare or social-care providers would be involved. Hearing about the experiences of others resulted in many panellists citing a need for improved screening, intake and referral mechanisms in Ontario.

Lack of availability and sharing of data results in limitations in its use to inform the development of programs and services

Finally, panellists questioned why better information to inform the development of programs and services was not available (and when available, why it was not being used). Panellists described the inconsistency between the data they knew existed in industry and what was publicly available. While they recognized the privacy concerns of sharing individual-level data, panellists described feeling uneasy about the fact that casinos could use data about individual playing habits to attract new consumers and/or to increase their length of play, but that these data were not also routinely provided to the provincial government or healthcare and social-care organizations for use in developing and targeting services for individuals with problem-gambling behaviours.

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Panellists also called for publicly available aggregate data that compare Ontario to other provinces, as well as for regional and local data that would allow comparisons to be made across regions within the province in order to determine which communities are ‘high need.’ A few panellists agreed with the need for this information in order to develop targeted strategies, but also approached it from a different perspective, suggesting that the wide-reaching effects of problem gambling (e.g., on families and economic well-being) could be used to create a business case for addressing gambling-related harms in the province.



“We need to be able to provide different help to a 25-year-old than to a 70-year-old, because the discussion is going to be different, how they seek support will be different, and the way they want to be treated will be different”

Discussing the elements:

How can we address the problem?

After discussing the challenges that together constitute the problem, participants were invited to reflect on three elements of a potentially comprehensive approach for strengthening collaboration to optimize efforts addressing gambling-related harms in Ontario:

- 1) get the right services to those who need them and bring a public-health perspective to bear;
- 2) align how funds set aside from gaming revenue are used to better support evidence-informed policies and practices; and
- 3) establish governance structures that clarify leadership, strengthen collaboration, and promote cross-sectoral partnerships.

The three elements can be pursued at the same time or in a sequenced way. A description of these elements, along with a summary of the research evidence about them, was provided to participants in the citizen brief that was circulated before each panel.

Element 1 – Get the right services to those who need them and bring a public-health perspective to bear

This element focuses on identifying ways to improve the availability and accessibility of services to reduce gambling-related harms and comorbidities. It also considers how to develop initiatives to reduce gambling-related harms through public-health approaches that focus on entire communities and populations. This could mean pursuing any of the following:

- include the full range of cost-effective approaches to reduce gambling-related harms in the set of core mental health and addictions services (the publicly-funded set of hospital, residential and community services that are available to all Ontarians in every region in the province) being provided in Ontario;
- ensure that these approaches address comorbidities;
- embrace public-health approaches to develop population-level efforts to reduce gambling-related harms; and
- support the use of the best available research evidence in each of these areas to inform policies and practices.

Seven values-related themes emerged during the discussion related to the element about getting the right services to those who need them:

- 1) citizens' values and preferences as a basis for the development of services to addressing gambling-related harms;
- 2) innovation in supports and services to ensure an emphasis on population-level approaches that complement existing individual-level approaches;
- 3) empowerment of individuals with information and education about programs and services;
- 4) strong system stewardship to ensure individuals are able to access the right services at the right time;
- 5) collaboration across the sectors and organizations involved in delivering services for gambling-related harms to ensure healthcare and social-care providers have all the required competencies and skills;
- 6) data and evidence as the basis for any new services addressing gambling-related harms; and
- 7) maintenance of individual privacy.

The first four values-related themes address the types of services that panellists thought should be in place (e.g., what the right services are), while the last three speak to the system supports needed for their implementation. A summary of how these values-related themes could be applied to this approach element is provided in Box 3 below.

Panellists at both panels discussed the first values-related theme – citizens’ values and preferences as a basis for the development of services to address gambling-related harms – by highlighting the need to develop patient-centred services across the entire continuum of care. In particular, panellists described patient-centred services as being those that support and treat a patient as a whole, take into account any co-occurring issues, and are appropriately tailored to meet the needs of unique populations across the province and across the life course.

Panellists overwhelmingly supported the second values-related theme – innovation in support and services to ensure an emphasis on population-level approaches that complement existing individual-level approaches – calling for the implementation of additional population-level approaches to complement those that already exist. The approaches that panellists felt were particularly important included:

- banning sponsored transportation to and from casinos;
- banning gifts and free give-aways that incentivize more gambling in casinos;
- regulating gambling environments to reduce distractions (e.g., lights and sounds);
- developing a card system for casinos that would allow individuals to monitor the amount of time and money spent on gambling; and
- restricting TV advertising and ensuring that any ads that are aired provide a balanced perspective that includes all of the potential harms associated with gambling.

Box 3: Key messages about getting the right services to those who need them and bringing a public-health perspective to bear (element 1)

What are the views of panellists regarding this element?

- Use citizens’ own values and preferences to inform the supports and services provided to them
- Implement innovation population-level approaches
- Use health-promotion and disease-prevention services to reduce stigma and to empower patients to seek support, as well as to recognize the signs of problem gambling among friends and family
- Improve screening, navigation and referral services to ensure individuals get access to the services they need
- Provide education and training to healthcare and social-care providers to enhance their competencies in providing care for gambling-related harms and for co-occurring issues
- Improve data collection and sharing, and use this to inform the development and location of supports and services
- Ensure that any individual-level data that are collected are handled in ways that maintain individual privacy

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Turning to the third values-related theme – empowerment of individuals with information and education about programs and services – panellists described the need to not only invest in supports and services for those already experiencing gambling-related harms, but also to ensure individuals had the information needed to appropriately reduce the potential for and impact of gambling-related harms. In particular, panellists highlighted the importance of using health-promotion and disease-prevention services in ways that are similar to what has been done for other mental health and addictions services, which can help to reduce stigma and empower patients and their families to recognize the signs of problem gambling. Panellists supported an approach that includes educational interventions across the life course. For example, some panellists suggested including a study unit on gambling in middle- and high-school curricula, while others suggested creating mass-media campaigns on university and college campuses, and developing television ads to be aired at the commercial breaks of major events to compete with existing pro-gambling advertisements.

Panellists discussed the importance of the fourth-values related theme – strong system stewardship – to ensure that individuals are able to access the right services at the right time. Specifically, they described the need to improve the availability of screening and navigation services to ensure that individuals can be identified and supported to seek out the right supports and services. Some panellists also suggested that screening and referral services should be available in a variety of healthcare settings (including with family physicians) and social-care settings to ensure that there are multiple ways for individuals to get the help they need. In recognizing the many co-occurring issues among individuals experiencing problem-gambling behaviours, a number of panellists emphasized the need to improve information and referral services between gambling and other mental health and addictions services, as well as with the health system more broadly.

The fifth values-related theme to emerge – collaboration across the sectors and organizations involved in delivering services for gambling-related harms to ensure healthcare and social-care providers have all the required competencies and skills – was considered in the context of panellists’ discussions about how to get the right programs and services to those who need them. In considering this theme, panellists suggested providing gambling-specific education and training to healthcare and social-care providers to improve their awareness of gambling-related harms and co-occurring issues. Panellists recommended that this training be delivered by the peers of professionals who are already providing services.

The sixth values-related theme – data and evidence as the basis for any new services addressing gambling-related harms – emerged during panellists’ discussions about how to

determine what services should be provided and where. Picking up on challenges discussed during the deliberations about the problem, panellists called for improved data collection and sharing between industry and government, and for the use of this data to inform future discussions about the development and location of supports and services.

Finally, panellists expressed the need for the seventh values-related theme – maintenance of individual privacy – to be embedded in both the delivery of any services and supports by health professionals and in the suggested sharing of data to ensure that individuals cannot be easily identified.

Element 2 – Align how funds set aside from gaming revenue are used to better support evidence-informed policies and practices

Element 2 focuses on aligning funding for gambling-related services with other supports, such as those for mental health and addictions. The intention of aligning funding is to better support coordination between the full range of programs and services developed to reduce gambling-related harms, including those for co-occurring mental and physical health conditions. This could mean pursuing either of the following:

- ensure that any funds set aside from provincial gaming revenue can be allocated to support the delivery of gambling-specific services alongside other types of mental health and addictions services; and
- expand the use of funds that have been set aside for gambling-specific services to enhance cost-effective strategies.

Four values-related themes emerged in the deliberation about how to align funds:

- 1) accountability of the gaming industry with respect to financing initiatives (contributing funds to) and funding initiatives (choosing which ones to fund);
- 2) empowerment of community organizations with funding for supports and services;
- 3) collaboration across sectors involved in delivering services to address gambling-related harms; and
- 4) careful use of resources to support collaboration.

A summary of how these values-related themes could be applied to this approach element is provided in Box 4 below.

Panellists overwhelmingly agreed that the gaming industry should have greater accountability with respect to financing (contributing funds to) initiatives and funding initiatives (choosing which ones to fund), which was the first values-related theme to emerge in discussing element 2. Most panellists agreed that more funds should be invested in gambling-related supports and services, but, given the emphasis on promoting gambling, thought that financing this expansion of services should be placed on the gaming industry. Specifically, participants called for a greater proportion of gaming revenue dedicated to education, prevention, treatment and research than is currently being invested.

Panellists described the second values-related theme – empowerment of community organizations with funding for supports and services – in relation to how any increases in funding should be spent. Panellists generally agreed that community agencies and organizations were best positioned to assess what supports and services would be most beneficial to their community members, and supported using any increases in financial resources to empower these local organizations to make these decisions.

Most panellists agreed that additional funding should be prioritized to support those communities with known risk factors for problem-gambling behaviours (e.g., lower-socio-economic communities or those in close proximity to gambling facilities).

Panellists discussed the third values-related theme – collaboration across sectors involved in delivering services to address gambling-related harms – with regards to whether or not a portion of funding should be set aside to improve the integration of gambling supports and services with the mental health and addictions system, and the broader health system. While most panellists believed that improving collaboration would help to support individuals in addressing the full range of gambling-related harms and co-occurring issues, they agreed that this should not be done at the expense of existing programs and services. Panellists agreed that only new sources of funding should be dedicated to collaboration. However, a number also expressed concern that an emphasis on collaboration could lead to gambling-specific services getting lost, or being lower on the priority list, when considered in combination with other co-occurring issues that often get more attention (e.g., other mental health and addictions problems). Therefore, panellists emphasized that collaborative efforts should be undertaken in a way that avoids downplaying the importance of addressing gambling-related harms as a problem in and of itself.

In addition, panellists emphasized that the resources allocated to improved collaboration should be carefully invested (the fourth values-related theme), given the small proportion of funding currently dedicated to addressing gambling-related harms and its associated co-

Box 4: Key messages about aligning how funds set aside from gaming revenue are used to better support evidence-informed policies and practices (element 2)

What are the views of participants regarding this element?

- Increase the financial accountability and responsibility of the gaming industry for promoting gambling by requiring that a greater proportion of revenue is dedicated to education, prevention, treatment and research
- Increase the financial resources available to community-care organizations and empower them to determine what programs and services should be implemented
- Dedicate additional resources to support collaboration across sectors, and to ensure that available services address the full scope of gambling-related harms and co-occurring issues, but not at the expense of existing programs and services, or in ways that downplay the importance of addressing gambling-related harms as a problem in and of itself
- Set a clear timeframe to assess whether the resources dedicated to collaboration are being used effectively

occurring issues left little room for wasted resources. Panellists suggested this could be done by setting a clear timeframe to evaluate whether the resources are achieving their intended outcomes or whether they could be more effectively invested elsewhere.

Element 3 – Establish governance structures that clarify leadership, strengthen collaboration, and promote cross-sectoral partnerships

Element 3 focuses on identifying ways to help clarify leadership, strengthen collaboration, and promote partnerships across providers, organizations responsible for the oversight of gambling-related services in Ontario. This could mean pursuing any of the following:

- create an arm’s-length advisory group to define and update
 - the list of gambling-specific services that should be provided with other mental health and addictions services,
 - the sectors that should be involved, and
 - the public-health approaches that should be used; and
- include leaders with experience in gambling-related harms in future provincial advisory committees and/or mental health and addictions organizations, and other areas of policy where gambling impacts may be felt.

Three values-related themes emerged in the deliberation about establishing governance structures:

- 1) accountability of the government for ensuring individuals have access to supports and services;
- 2) data and evidence as the basis for the development of collaborative efforts across sectors; and
- 3) citizens’ values and preferences integrated into processes that inform system governance.

A summary of how these values-related themes could be applied to this approach element is provided in Box 5 below.

Most panellists agreed that improvements were needed to establish the accountability of the provincial government for ensuring that individuals have access to the supports and services they need, which was the first values-related theme.

Specifically, panellists supported appointing a lead organization that would ultimately coordinate the planning of and bear responsibility for gambling-related services. Many panellists agreed that this role should be played by the Ministry of Health and Long-Term Care, given its responsibility for other mental health and addictions services.

Panellists overwhelmingly agreed that data and evidence should be used as the basis for planning for gambling-specific services as well as for any collaboration efforts across sectors, which was the second values-related theme. In discussing this aspect of element 3, panellists supported increased data collection and sharing about gambling behaviours in the province, advocating for the development of information systems that provide greater detail about playing habits and risks of gambling-related harms at regional and local levels. Panellists encouraged the use of evidence about the effectiveness of existing services and supports for gambling-related harms, both to inform decisions about what to provide and to inform decisions regarding the integration of services and settings.

Finally, in addition to basing decisions on data and evidence, panellists maintained that citizens' values and preferences should be integrated into processes that inform system governance, which was the third values-related theme. To support this, panellists suggested that citizens with lived experience of a gambling problem and/or their family members could sit as members of a committee that oversees the planning of services and supports for gambling-related harm and its co-occurring issues. They also suggested that regular efforts should be made to consult with, and gather input from, those with lived experience of a gambling problem prior to making decisions about supports and services that address gambling-related harms.

Box 5: Key messages about establishing governance structures that clarify leadership, strengthen collaboration, and promote cross-sectoral partnerships

What are the views of participants regarding this element?

- Improve accountability by appointing a lead organization to be responsible for ensuring Ontarians have access to services and supports for gambling-related harms and associated co-occurring issues
- Increase data collection and sharing about gambling behaviours, as well as about the use and effectiveness of services and supports for gambling-related harms, and use the data and evidence to inform decisions about the integration of services and settings
- Adjust system governance processes and procedures to include insights from individuals with lived experience to ensure that decisions are informed by citizens' values and preferences



“Is there any motivation to deal with the problem when it creates this much revenue?”

Discussing implementation considerations:

What are the potential barriers and facilitators to implementing these elements?

After discussing the three elements of a potentially comprehensive approach to strengthen the collaboration to optimize efforts addressing gambling-related harms in Ontario, panellists examined potential barriers and facilitators for moving forward.

The discussion about barriers generally focused on the challenges associated with gaining political momentum as well as with reaching agreement among key stakeholders on a common vision for moving forward. With respect to the barriers associated with a lack of political momentum, panellists reiterated their concerns about the various conflicts of interest discussed during deliberations about the problem, suggesting it would be difficult to convince the government to take action on this issue as it could mean jeopardizing existing revenue sources. Furthermore, a number of panellists stated that the pending provincial election and development of election platforms would likely overshadow any attention or movement on this issue that could be garnered in the upcoming months.

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With respect to the barriers associated with getting agreement among stakeholders, a number of panellists highlighted the challenge of getting all stakeholders across various governments, service organizations and those in the private sector to agree on a vision for responsible gambling in the province, and a set of actions to reduce gambling-related harms.

Despite these challenges, panellists also noted that the use of personal stories from those who have been directly affected by problem gambling may help to build political will for change.

Acknowledgments

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Conflict of interest

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