



# Convenience Advertising



# **Problem Gambling Awareness Campaign Poster Evaluation**

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## Executive Summary

The problem gambling awareness campaign, developed by the Department of Health and Human Services in Tasmania through the Gambling Support Program was very well received by the public and there appears to be a broad level of community concern, suggesting not just those who meet the problem gambling criteria (or their families) are concerned about the effects of gambling. The results of the evaluation found:

- There was high campaign visibility, with 88.7% of respondents stating that they remembered seeing the posters. This compares significantly to other media such as TV advertising where recall is typically 59% (Carroll Media, 2010).
- There was also a high level of specific recall, with all of these respondents able to recall the main message of the poster(s) without being prompted. Most participants could identify at least two main messages.
- Having seen the posters, a sizeable proportion of respondents reported that they themselves would talk to their friend(s) or family member(s) about gambling, and high knowledge indicated that they have the information and resources required to follow through with this (those surveyed were generally very aware of problem gambling support services in Tasmania).
- Interviewees were very likely to have remembered and described the posters in a positive fashion, although men were found to be significantly more likely than women to have ambivalent feelings about the posters (although they very rarely actively disliked them). Despite this, young males were equally likely to have seen, understood, and remembered both the posters themselves, and the information within them.
- Nearly half of those surveyed found these posters relevant to them or someone that they know, which is particularly interesting given the significantly smaller estimated proportion of Tasmanian residents directly or indirectly affected by problem gambling. It is therefore likely that a significant proportion of people who saw the poster(s) believed that they were relevant to them *despite* not being

a moderate risk or problem gambler, as well as not knowing anybody who fits into either of these categories.

- These results strongly indicate community support for a campaign such as this – even from people who are not, themselves, problem gamblers.

## Introduction

The 2007 prevalence survey that comprises part of the Social and Economic Impact Study into Gambling in Tasmania 2008 (SEIS) determined the prevalence of people experiencing gambling-related problems or who might be at risk of experiencing such problems. The SEIS survey found that 0.86% of the adult population in Tasmania are in the moderate risk group, and a small proportion of the population (0.54%) are experiencing problems due to gambling and fall into the problem gambling group. This equates to 3,113 and 1,955 Tasmanian adults respectively. The total number of moderate risk plus problems gamblers is 1.4% of the adult Tasmanian population, equating to 5,068 Tasmanians. It is important to note that the Productivity Commission (1999) estimates that for every problem gambler, between five to 10 other people are adversely impacted.

The problem gambling awareness campaign, launched in August 2010 by the Gambling Support Program in Tasmania, aimed to raise awareness of the Gambling Helpline Tasmania website ([www.gamblinghelpline.org.au](http://www.gamblinghelpline.org.au)) and 24-hour telephone service, and also to encourage problem gamblers and their significant others to contact these services for counselling, referral and information. It achieved this by working with Convenience Advertising to place a variety of advertisements in easy-to-see locations in gaming (pokie) and community venues. The advertisements included 100 A4 posters with 48 accompanying card holders and take away information pamphlets that were installed in the bathroom facilities of targeted venues in the target area. This pilot program was conducted in George Town in Tasmania, and this evaluation is being conducted to assess the impact of the posters on the venue patrons, as well as their behaviours after seeing the posters.

A draft questionnaire was developed by the Department, Convenience Advertising and refined by the Centre for Health Initiatives at the University of Wollongong (UOW) (see Appendix A). The survey contained a short demographic section; questions to determine recall and recognition of the advertisements placed by Convenience

Advertising; and questions about the main messages, their relevance and appropriateness. The survey also asked about behaviours such as seeking help (for problem gamblers), talking to friends and family about problem gambling habits, visiting the gambling helpline website and calling the 24/7 gambling hotline in Tasmania. Finally, elements of the Health Belief Model (HBM) were explored through questions about whether or not the messages were relevant to them or someone they knew, and whether participants would seek further information for themselves or a friend. The HBM is most commonly used to explain behaviour change and as a framework for behaviour change programs (Janz *et al.*, 2002) and can be used to predict the likelihood of an individual (or a targeted group) changing health-related behaviours based on the interaction between the following four factors:

- *Perceived susceptibility*: a person's perception of their own risk of contracting a health problem;
- *Perceived severity*: a person's perception of the seriousness of the health problem, including the negative consequences that may occur as a result of the health problem;
- *Perceived benefits*: a person's perception of how effectively a new behaviour will reduce the susceptibility and severity; and
- *Perceived barriers*: a person's perception of the difficulties and costs involved in adopting the new behaviour.

## Results

### *Interview Details*

Surveys were collected from the following gaming venues and restaurants in George Town, Tasmania:

- The Pier Hotel (gaming venue)
- The George Town Heritage Hotel (gaming venue)
- The Motor Inn (gaming venue)
- Signal Station Tavern (gaming venue)
- George Town RSLA (gaming venue)
- Cove Bar and Restaurant (gaming venue)

### *Respondents*

A total of 151 respondents were surveyed; they were asked if they had seen any posters on the walls of toilets (or anywhere else) and 134 stated they had seen the posters recently. Of the remaining 17 respondents, two did not answer the question and 15 stated that they had not seen the posters. These 15 respondents were then asked if they had seen any other types of advertisements or media regarding problem gambling, and all 15 respondents had viewed information on television, 14 had heard information on radio and 8 had seen messages on posters. These advertisements were most frequently seen within the previous month.

The 134 participants who had seen the current campaign material continued with the next section of the survey. When asked what the main message of the campaign was, 39 respondents could confidently recall the messages from the campaign but did not complete the remainder of the survey (see *main message of the posters* for all 134 responses). Thus a total of 95 people clearly identified the posters and completed the survey.



### *Demographics*

Of the 95 adults who completed the entire survey, gender was evenly balanced (48 males and 46 females) and there was a relatively even spread throughout the five age groups with the highest proportion of respondents aged 25-34 (28.4%) and the lowest proportion aged 35-44 and 55 and older (16.8% each).

Table 1: Demographics

<b>Sex</b>	<b>Freq</b>	<b>%</b>
Male	48	50.5
Female	46	48.4
No response	1	1.1
<b>Age (years)</b>	<b>Freq</b>	<b>%</b>
18-24	19	20.0
25-34	27	28.4
35-44	16	16.8
45-54	17	17.9
55+	16	16.8

### *Main message of the posters*

Of the 151 people approached by the interviewers, 134 could recall (without prompts) seeing the problem gambling campaign in George Town which equates to 88.7% of participants. This is an extremely high recall rate compared to other social marketing campaigns such as a Chlamydia awareness campaign in 2004 where the unprompted recall was only 56% (Chen et al, 2007) and the equivalent Victorian problem gambling campaign which scored a 61% unprompted recall rate in 2005 (Mugford, 2005).

When asked what they thought was the main message of the campaign was, 82.1% of people identified 'Gambling', 78.4% stated '0 Credits' (one of the main campaign taglines; see Figure 1) and 74.6% said that the main message was about 'losing money'

(respondents were able to nominate more than one main message). In addition, almost half of the sample mentioned the takeaway cards (49.2%). A smaller, but still notable, proportion of the sample mentioned the 1800 phone number (18.7%), helping friends or family who have problems with gambling (18.7%), and access to the website ([www.gamblinghelponline.org.au](http://www.gamblinghelponline.org.au)) (13.4%). Table 2 outlines all responses to this question.

Figure 1: Posters from the problem gambling campaign

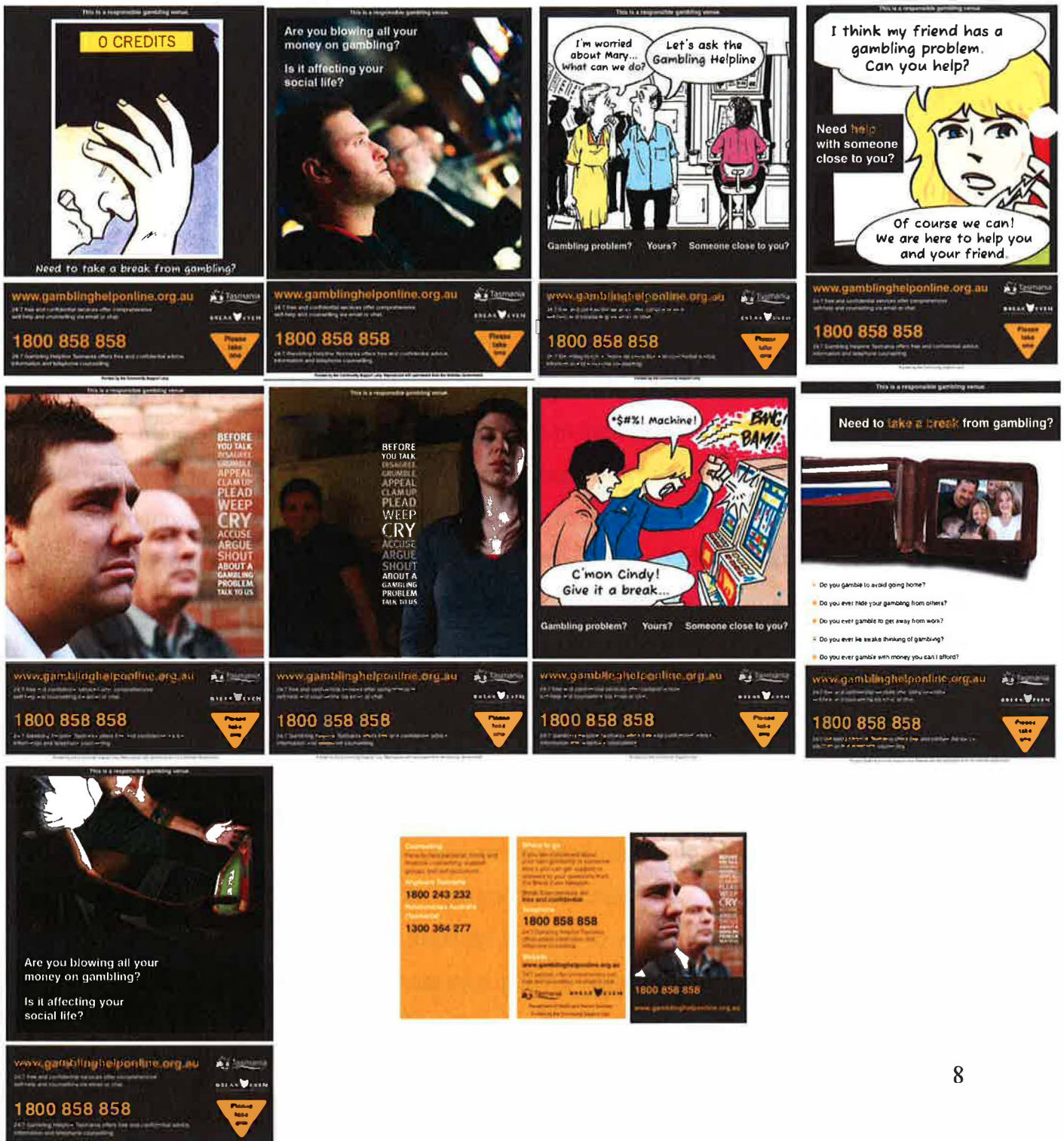


Table 2: Main message of the posters

Message	Freq	%
0 Credits	110	82.1
Gambling	105	78.4
Losing money	100	74.6
Online gambling	79	59.0
Please Take One/Cards	66	49.2
Emotional responses	58	43.3
Government messages	47	35.1
1800 number	25	18.7
Helping your friends and family who have problems with gambling	25	18.7
<a href="http://www.gamblinghelponline.org.au">www.gamblinghelponline.org.au</a>	18	13.4

Interpretation of perceived main messages of the campaign was very accurate, with the three most common responses including 0 credits, gambling and losing money. Importantly, all 134 people were able to identify at least one of these three main messages, which shows that the messages in the campaign were being clearly presented to the general public and that they were able to understand each message. Even more encouraging was that all but two of the respondents were able to give more than one response. Furthermore nearly half of people reported an 'emotional response' to the ads, highlighting that all respondents were able to recall the key messages.

#### *Reactions to the poster*

Interviewees were asked to describe their thoughts and feelings about the posters through an open ended question. Responses were coded thematically into positive (64.2%), neutral (26.3%), and negative groupings (9.5%; Table 3), and over 90% of respondents either had a positive or neutral reaction, indicating that the posters were well received and that people were paying considerable attention to them. Positive responses included 'excellent', 'fabulous advertising' and 'good idea I reckon', while

examples of negative answers were ‘I didn’t really like them’ and ‘I didn’t like them’. Neutral or no reaction responses were often ‘I didn’t really have a reaction’. A more complete list of responses can be seen in Table 4.

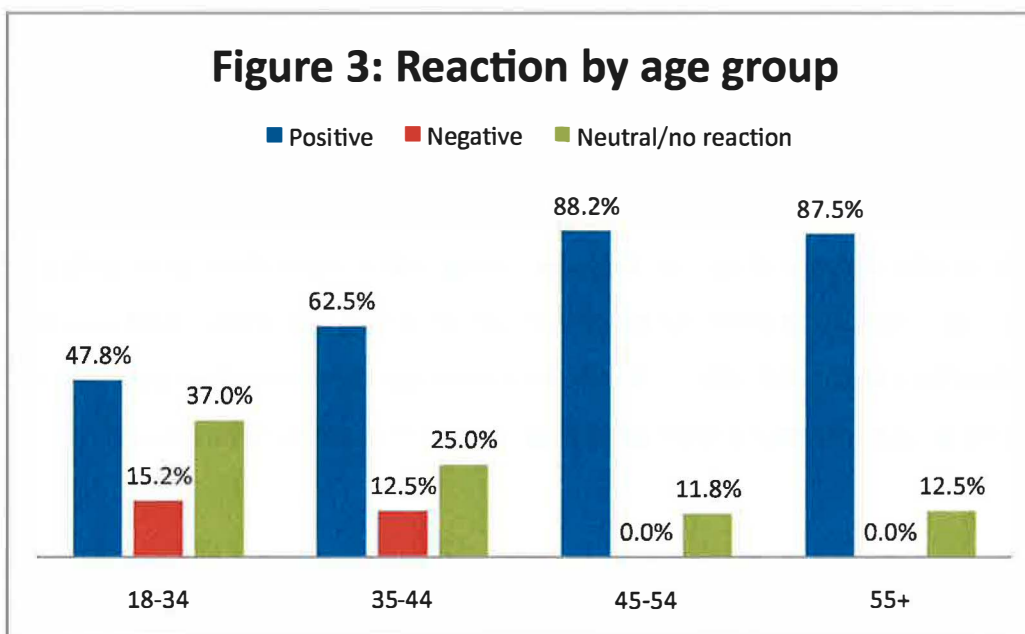
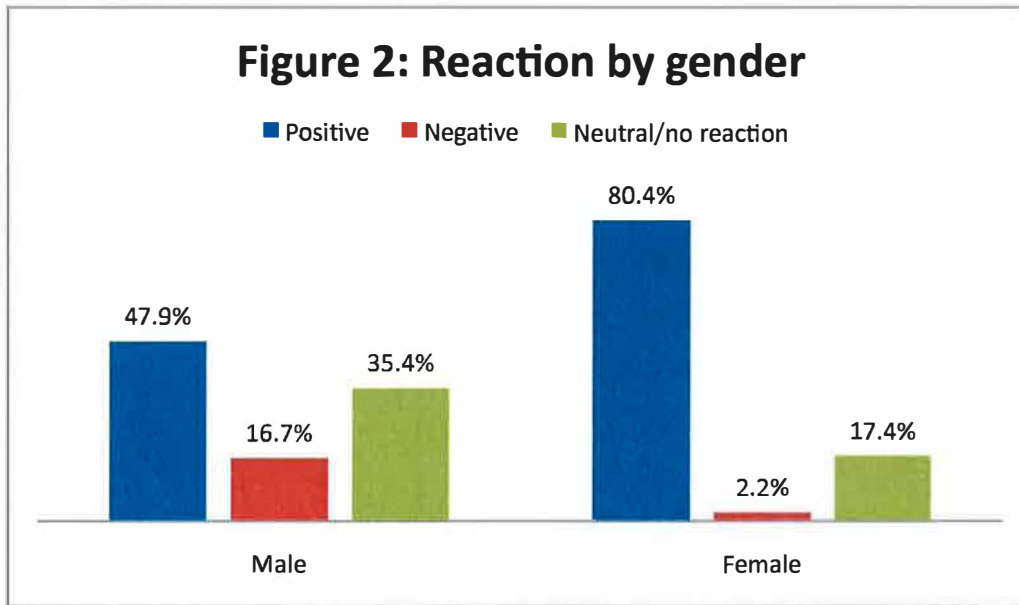
Table 3: Respondents reactions towards the posters

<b>Reactions</b>	<b>Freq</b>	<b>%</b>
Positive	61	64.2
Neutral	25	26.3
Negative	9	9.5
<b>Total</b>	<b>95</b>	<b>100.0</b>

Women were more likely than men to react positively to the posters ( $\chi^2 (3, n=78) = 13.243, p = .002$ ) and conversely, more men than women were unsure, indicating that more women than men formed a definite opinion of the posters. Furthermore, significant differences were found between age groups ( $\chi^2 (9, n=79) = 20.284, p = .015$ ) with individuals 35 years and over more frequently reporting positive reactions to the advertisements ( $n = 31; 66.0\%$ ; Figure 3).

Table 4: Typical responses from participants about the posters

Positive	Neutral	Negative
Should do more advertising like this	No reaction	Didn't really understand them
Fabulous advertising	I didn't really know what to think	I didn't really like them
I thought there must be something more we can do	I didn't really have a reaction	Didn't go for them much
Maybe people can be helped because of this	Didn't have a reaction but they were ok	Didn't really go much on them
Very good advertising	I honestly don't know	They didn't appeal to me
Good idea I reckon	Unsure what to think	Well, I didn't really like them
Thought it was a great idea	Didn't have a reaction.	I didn't like them
An excellent idea	Didn't think anything	Thought they were a bit strange
I thought it was a wonderful idea		



#### *Relevance of posters*

Almost half (46.3%) of the respondents indicated that the posters were personally relevant, or relevant to someone they know (Table 4); this differed significantly between males and females ( $\chi^2 (3, n=94) = 9.832, p = .009$ ), with men (68.7%) more likely to find the posters relevant than women (39.0%). This is a surprising result considering that less than 1.0% of people in Tasmania are classified as problem

gamblers. Further to this if the Productivity Commission (1999) estimates that for every problem gambler, between five to 10 other people are adversely impacted, then in our sample of 95, we would expect to find about 8.6% or 8 participants to find the poster relevant to them or someone that they knew. Our findings show that 46.3% of people find the material relevant and highlights that the campaign materials are very effective in making people more aware of the personal significance of gambling. This is perhaps the most important finding of the evaluation.

Table 5: Relevance of posters

<b>Relevant</b>	<b>Freq</b>	<b>%</b>
Yes	44	46.3
No	45	47.4
Prefer not to say	6	6.3
<b>Total</b>	<b>95</b>	<b>100.0</b>

Respondents who did not think the messages were relevant to them primarily gave the reason that they did not gamble or know any one that had a problem with gambling. The fact that they were still able to recall the campaign messages, however, means that it is likely to be top-of-mind if they later experience or see this behaviour.

*Intended target Audience*

Respondents were asked to identify who they thought the posters were aimed at and correctly identified gamblers or problem gamblers (48.4%) as the main target, followed by the general public (31.6%). This shows that the messages in the posters were clear and easy for respondents to understand which importantly allowed them to make the link to the target group. It also highlights that there is a broader level of concern with gambling than just those meeting the defined definition of problem gambling and that the community may be ready for an intervention.

Table 6: Perceived target group of the campaign

<b>Target Group</b>	<b>Freq</b>	<b>%</b>
Gamblers/Problem Gamblers	46	48.4
General Public	36	37.9
Not sure	13	13.7
<b>Total</b>	<b>95</b>	<b>100.0</b>

Both males and females could correctly identify gamblers as the target group however females were more likely to state that the campaign was aimed at the public (52.2% vs 25.0%; ( $\chi^2$  (3, n=95) = 13.471,  $p$  = .004).

*Perceived appropriateness of dissemination location*

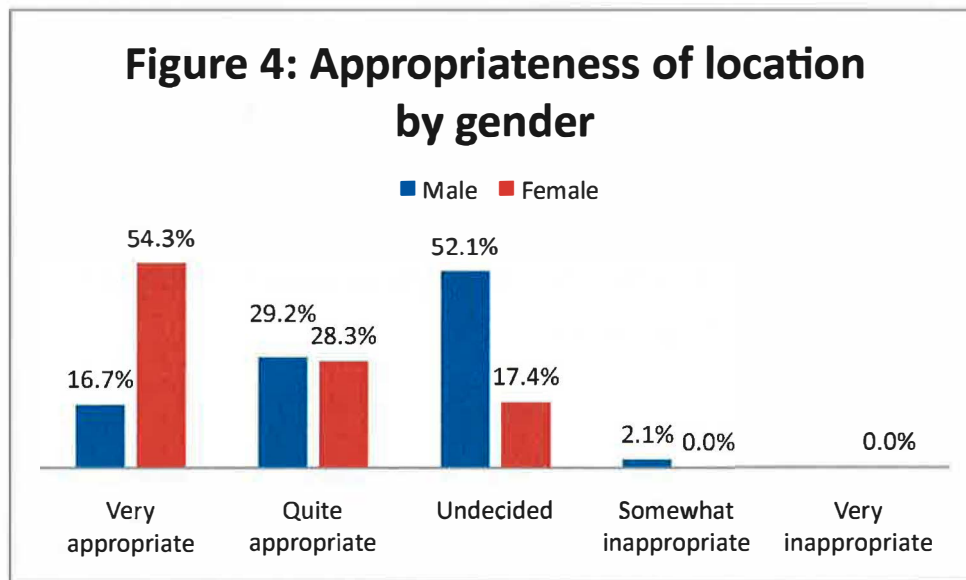
Nearly two thirds of respondents ( $n$  = 95, 64.2%) thought that it was very appropriate or quite appropriate to display this kind of information in the bathroom environment (Table 7). Approximately one third (34.7%) were undecided, while only one respondent said that it was an inappropriate location.

Table 7: Appropriateness of venue

<b>Appropriateness</b>	<b>Freq</b>	<b>%</b>
Very Appropriate	34	35.8
Quite Appropriate	27	28.4
Undecided	33	34.7
Somewhat Inappropriate	1	1.1
Very Inappropriate	0	0.0
<b>Total</b>	<b>95</b>	<b>100.0</b>



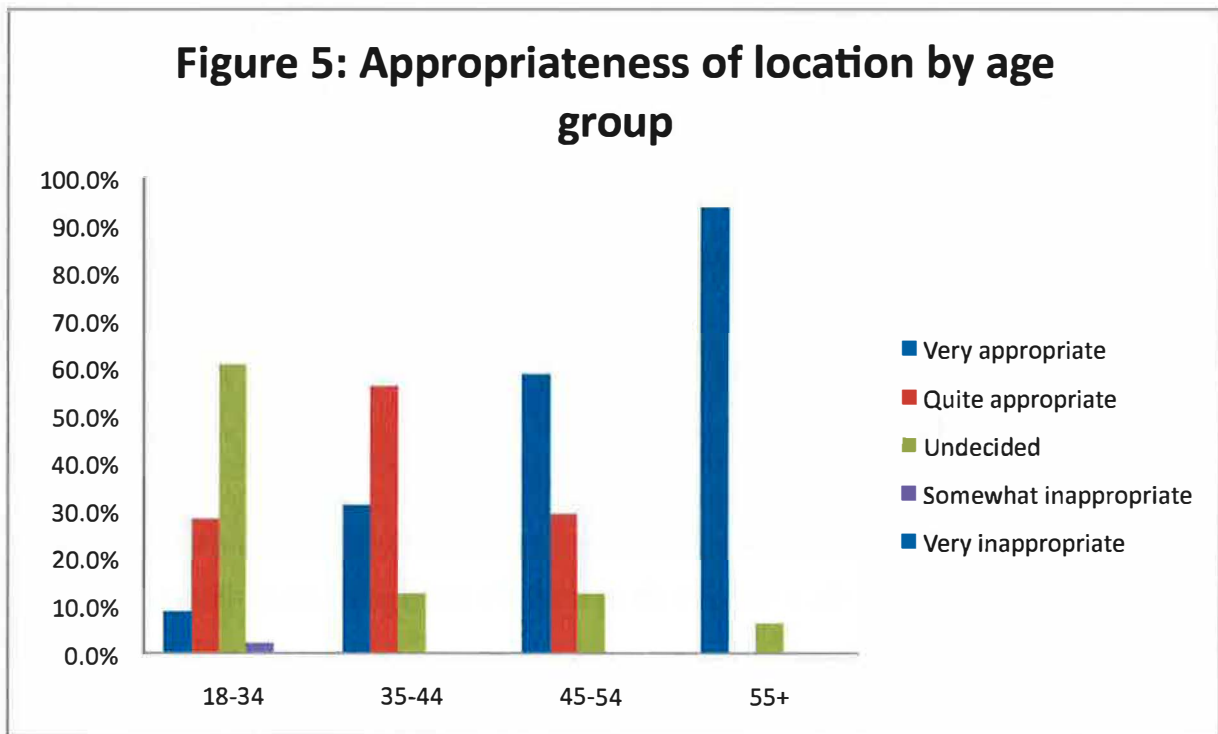
The degree of appropriateness of the bathroom as a venue for this information to be displayed differed significantly between males and females ( $\chi^2 (2, n=94) = 13.988, p = .001$ ; see Figure 4). A higher proportion of women than men thought that the location was appropriate; males were more likely to be undecided on the appropriateness of the location (52.1%).



The perceived appropriateness of the bathroom as an advert location also differed significantly between age groups ( $\chi^2 (6, n=95) = 29.082, p = 0.000$ ). Individuals under 35 years of age were more likely to be undecided than other age groups ( $n = 28$ ; 61.0% of the age group) about the appropriateness of the venue, whilst individuals 45 years and over most commonly supported this location ( $n = 30$ ; 91.0% of the age group; Table 8).

Table 8: Appropriateness and age group

	Age group (years)				Total
	18 - 34	35 - 44	45 - 54	55+	
Very Appropriate	4	5	10	15	34
Quite Appropriate	13	9	5	0	27
Undecided	28	2	2	1	33
Inappropriate	1	0	0	0	1
<b>Total</b>	<b>46</b>	<b>16</b>	<b>17</b>	<b>16</b>	<b>95</b>



*Actions and intentions*

Of the 95 respondents who could recall the specific campaign message, 44 (46.3%) reported the posters as being relevant to themselves or someone they know, while just over a quarter (26.3%) of all participants who had seen the posters reported that they

had since thought about their gambling habits or those of someone they know which, when considered alongside the number of people who found the posters relevant, is noteworthy. That is, based on these previous findings, one would not expect any more than 46.3% of this sample to have “thought about their gambling or thought about someone else’s gambling”, given that problem gambling is neither relevant to them, nor anyone that they know. Finally, the likelihood of thinking about gambling or about someone else’s gambling was not significantly different between gender and age groups.

Considering taking action about gambling habits

Table 9: Actions considered since seeing the poster

Actions considered	Yes		No	
	Freq	%	Freq	%
Seeking help for problem gambling	0	0.0	44	100.0
Talking to your friend(s) and family about gambling	19	43.1	26	59.9
www.gamblinghelponline.org.au	0	0.0	44	100.0
Calling the 1800 number	0	0.0	44	100.0

In regards to respondents considering taking action after seeing these posters (n=44), 19 respondents stated that they would *talk to their friend(s) and family about gambling* (Table 9).

Taking action about gambling habits

Of the 25 respondents who had thought about taking action, 7 had *taken action* on their gambling or the gambling of someone close to them after seeing the posters (Table 8). Participants who explained what actions they had taken (n = 7), either spoke with family or friends (n=5) or had thought about their own gambling habits (n=2). This

finding is very positive considering that less than 1% of the population in Tasmania are classified as problem gamblers.

Table 10: Action taken since seeing poster

<b>Taken action</b>	<b>Freq</b>
No	18
Yes	7
<b>Total</b>	<b>44</b>

*Other media relating to problem gambling*

Participants were then asked if they had seen an advertisement or message about problem gambling in any other location (they were able to cite several other locations). Besides the poster in the venue toilets, the most commonly cited was “a poster in another venue” ( $n = 78$ ; 82.1%), indicating that people who gamble tend to move around between gambling venues, and not just gamble at one exclusively. Television ( $n = 52$ ; 54.7%) and radio ( $n = 12$ ; 12.6%) were also commonly cited, while health newsletters received in the mail or internet were each stated by one participant. Significantly more males than females had heard information on the radio ( $t(92) = 5.61$ ,  $p = .02$ ), but no other gender differences were evident.

Table 11: Location of other media relating to problem gambling

<b>Location (n = 93)</b>	<b>Freq</b>	<b>% of cases</b>
Poster in another venue	78	82.1
Television	52	54.7
Radio	12	12.6
Newsletter or Internet	2	2.2

Hearing the information on radio differed significantly between age groups ( $F(3,94) = 3.691$ ,  $MSE = .379$ ,  $p < .05$ ). Post-hoc Tukey’s HSD tests showed that individuals over 55 years were significantly more likely to hear a message on the radio than individuals

aged between 18 and 34 years. All other comparisons for seeing posters and television commercials by age and gender were not significant.

Most exposure to other messages about problem gambling occurred during the previous week (67.3%); followed by within the previous month (20.0%; Table 12). One respondent did not recall having ever seen media relating to problem gambling, whilst nine participants stated they were unsure. Recollection of previous exposure did not differ significantly between gender or age group.

Table 12: When did you see other advertisements or messages about gambling?

<b>When</b>	<b>Freq</b>	<b>%</b>
Less than 2 days ago	29	30.5
Less than 1 week	35	36.8
1 – 2 weeks ago	8	8.4
2 – 4 weeks ago	6	6.3
More than 4 weeks	5	5.3
Unsure	12	12.6
<b>Total</b>	<b>95</b>	<b>100.0</b>

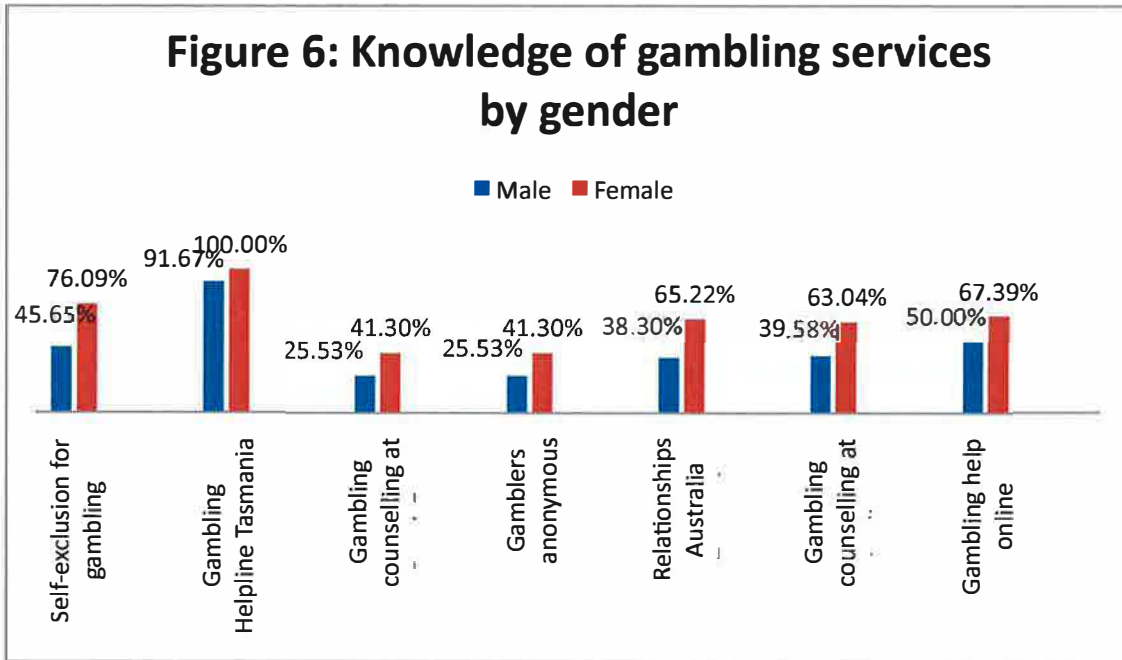
#### *Knowledge of gambling support services*

There were 360 responses from 92 participants regarding knowledge of various gambling support groups (participants were able to give more than one response; Table 13). Almost all of these participants knew of the Gambling Helpline Tasmania (95.8%). Over half of respondents had heard of self-exclusion (58.9%), gambling help online (57.9%), Relationships Australia Tasmania and services at Anglicare Tasmania (50.5% each).

Table 13: Knowledge of gambling support services

<b>Service</b>	<b>Freq</b>	<b>% of cases</b>
Gambling Helpline Tasmania	91	95.8
Self-exclusion	56	58.9
Gambling help online	55	57.9
Relationships Australia Tasmania	48	50.5
Counselling at Anglicare Tasmania	48	50.5
Counselling at Break Even	31	32.6
Gamblers Anonymous	31	32.6
<b>Total</b>	<b>360</b>	<b>-</b>

Across all gambling services, females were more likely than males to report knowledge of the service. Specifically, significant gender differences were apparent for knowledge of Gambling Helpline Tasmania ( $t(92) = 2.023, p = .046$ ), knowledge of self-exclusion ( $t(91) = 3.231, p = .002$ ), knowledge of Relationships Australia Tasmania ( $t(91) = 2.668, p = .009$ ), and, finally, knowledge of gambling counselling at Anglicare Tasmania ( $t(92) = 2.315, p = .023$ ).



The majority of individuals (93.6%) felt that they would use the above gambling support services if they thought they needed to. Although males were slightly less likely than females to report that they would use services (89.6% to 98.8%, respectively), this gender difference was not significant. Table 14 highlights what services respondents said they would use, with Gambling Helpline Tasmania gaining the biggest response (n=87, 91.6%).

Table 14: What services would participants use?

Service	Freq	% of cases
Gambling Helpline Tasmania	87	91.6
Self-exclusion	56	58.9
Gambling help online	56	58.9
Gamblers Anonymous	54	56.8
Relationships Australia Tasmania	46	48.4
Counselling at Anglicare Tasmania	48	50.5
Counselling at Break Even	29	30.5
<b>Total</b>	<b>376</b>	-

### Recommending support services

The majority (96.8%) of participants would recommend these services to a friend or family member who they felt needed support (Table 15).

Table 15: Would you recommend these services to a friend or family member who you felt needed it?

<b>Recommend?</b>	<b>Freq</b>	<b>%</b>
Yes	92	96.8
No	3	3.2
<b>Total</b>	<b>95</b>	<b>100.0</b>

Gambling Helpline Tasmania was the most likely to be recommended ( $n = 90, 94.7\%$ ), followed by gambling helpline online ( $n = 57, 60.0\%$ ), self-exclusion for gambling ( $n = 57, 60.0\%$ ), and Gamblers Anonymous ( $n = 55, 57.9\%$ ). Up to half of the respondents would recommend the remaining services. Ninety four of the 95 participants correctly identified what 'self-exclusion' is.

Table 16: Which services would you recommend?

<b>Service (N = 95)</b>	<b>Yes (n)</b>	<b>%</b>
Gambling Helpline Tasmania	90	94.7
Gambling help online	57	60.0
Self-exclusion for gambling	57	60.0
Gamblers Anonymous	55	57.9
Anglicare Tasmania	49	51.6
Relationships Australia Tas	47	49.5
Break Even Services	30	31.6



### *Online gambling*

The majority of participants ( $n = 61$ , 64.2%) had not gambled on the internet (for money or otherwise) in the previous three months, while just over one-third ( $n = 34$ , 35.8%) had done so. For those who *had* gambled online, online poker was the game most frequently played during the three months prior to the survey ( $n = 25$ ), followed by virtual pokies and Keno ( $n = 19$  for each), lotteries and blackjack ( $n = 18$  for each). Fewer than 10 respondents played any other online gambling game in the three months prior to survey.

Table 17: What type of game/activity(ies) did you play online?

<b>Activity (n= 34)</b>	<b>Yes (n)</b>
Poker	25
Virtual Pokies	19
Keno	19
Lotteries	18
Blackjack	18
Racing	9
Sports betting	8
Bingo	8
Baccarat/roulette/outcomes	8

### *Favourite activity or game*

Seven of the 33 participants who answered said that their favourite online game or activity was nominated Poker. Virtual pokies ( $n = 5$ , 5.3%), Keno, Sports betting and Bingo ( $n = 4$ , 4.2%, each) were the next favourite activities.

Table 18: What is your favourite online gambling game or activity?

<b>Activity</b>	<b>Freq</b>
Poker	7
Virtual pokies	5
Keno	4
Sports betting	4
Bingo	4
Lotteries	3
Racing	2
Blackjack	2
All	2
<b>Total</b>	<b>33</b>

*Frequency of online gambling*

All respondents who reported gambling in the last three months also stated that they had done so within the last month, and more often than not within the last fortnight, indicating that those who do gamble online do so reasonably frequently, rather than irregularly.

Table 19: How often have you gambled online in the last three months?

<b>Frequency (N = 34)</b>	<b>Yes (n)</b>
At least once a week	18
At least once a fortnight	12
At least once a month	5

### *Duration of online gambling sessions*

Respondents that gambled at least once a week (n=18) were asked how long their online gambling sessions usually last for. Half reported spending 1-2 hours per gambling session, with a further seven spending more than two hours gambling online per session.

Table 20: How long do most of your online gambling sessions last for?

<b>Duration (n = 18)</b>	<b>Yes (n)</b>
Less than one hour	2
1 to 2 hours	9
2 to 3 hours	6
More than 3 hours	1

### *Online gambling and money*

When asked if participants returned to gambling in order to win back any money they had lost to previous online gambling, all respondents stated that they had done this in the past. Specifically, the majority reported 'sometimes' returning to win back money, four reported doing this most of the time and two reported always doing this.

Table 21: In the last three months how often have gambled another day to try to win back the money you lost?

<b>Frequency</b>	<b>Yes (n)</b>
Sometimes	12
Most of the time	4
Almost always	2
<b>Total</b>	<b>18</b>

Findings based on these final two questions (regarding frequency of online gambling and returning to win money back) are difficult to generalise, however, this figure must

be interpreted within the wider context of the total number of adults surveyed as part of this pilot study. In fact, it is fair to say, therefore, that if trends noted in this pilot study are found to be consistent across the entire state, the problem of online gambling is unfortunately much greater than currently estimated (for example, online gambling is currently estimated as being responsible for less than 10% of Tasmania's gambling revenue<sup>1</sup>), especially given that a substantial proportion of this sample (18.9% to be exact) participated in online gambling at least weekly (16 of these for at least one hour per session), and **all** reported returning to gambling at some stage to win back losses.

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<sup>1</sup> Australian Government Productivity Commission - Gambling Enquiry Report (found at <http://www.pc.gov.au/projects/inquiry/gambling-2009/report>)

## Conclusion

Overall, this campaign was very well received by the public, who had excellent levels of recall, in excess of what would be expected from a campaign such as this, based on previous campaign evaluations. In addition, almost all adults surveyed were able to recall more than one main message from within the poster(s).

Several questions based on the HBM were included in this survey in order to predict the likelihood of an individual (or the target group – problem gamblers) changing health-related behaviours based on the interaction between perceived benefits of and barriers to seeking help for problem gambling, as well as talking to friends and family about getting help. In line with this, having seen the posters, a sizeable proportion of respondents reportedly that they themselves would talk to their friend(s) or family member(s) about gambling. Those surveyed were generally very aware of problem gambling support services in Tasmania, indicating that they have the information and resources required to follow through with this.

Interviewees were very likely to have remembered and described the posters in a positive fashion, with less than 10% of the sample having a negative opinion of them, although men were found to be significantly more likely to have ambivalent feelings about the posters (although they very rarely actively disliked them). Given that young males were least receptive to the posters, an alternate method and/or venue could be investigated to target this group, although it is very positive that young males were equally likely to have seen, understood, and remembered both the posters themselves, and the information within them.

Crucial, however, was the finding that nearly half of those surveyed found these posters relevant to them or someone that they know, which is particularly interesting given the significantly smaller estimated proportion of Tasmanian residents directly or indirectly affected by problem gambling, as discussed previously. This findings could, therefore, be an indication that, among this sample, problem gambling is a more prominent issue than it is among the remainder of the Tasmanian population or, considerably more

likely, that a significant proportion of people who saw the poster(s) believed that they were relevant to them *despite* not being a moderate risk or problem gambler, as well as not knowing anybody who fits into either of these categories. In addition, over one-third of the respondents believed that this campaign was targeted at the community in general, rather than only at gamblers or even problem gamblers. Together, these results strongly indicate community support for a campaign such as this – even from people who are not, themselves, problem gamblers.

## Appendix A: Survey

### Department of Health and Human Services Tasmania Evaluation Questionnaire

#### Preamble

Excuse me, I wonder if you could help with some research we are doing? It will only take a few minutes of your time.

My name is \_\_\_\_\_ and I'm carrying out a project on behalf of the Department of Health and Human Services to assess some health messages placed in this venue.

The information you give me will help determine the success of the messages and will be given in complete confidence and will be recorded anonymously. Your answers will help develop better health messages in the future.

#### Age (Please Circle)

18-24                      25-34                                      35-44    45-54    55+

#### Gender (Please Circle)

Male                      Female

**If you have used the toilet facilities here this week, did you see any posters on the walls or anywhere else?**

Yes

No

Go to Question 1

Terminate Interview

DO NOT INCLUDE IN SAMPLE – ASK  
QUESTIONS BELOW ONLY

**When did you last see or hear an advertisement or message about problem gambling?**

\_\_\_\_\_

**Where did you see this advertisement or health message?**

i) Television advertisement	Y 1	N 2
ii) Radio	Y 1	N 2
iii) Poster in another venue	Y 1	N 2
iv) Health Newsletter in the mail	Y 1	N 2
v) Comics	Y 1	N 2
vi) Other (please specify) _____	Y 1	N 2

**Q.1 What was the main message(s) presented in the poster? Circle all responses made (note: wording need not be identical)**

Gambling 1  
Helping your friends and family who have problems with gambling 2  
Please Take One/Cards 3  
Government Message 4  
Online Gambling 5

Emotional Responses 6  
0 Credits 7  
Losing Money 8  
gamblinghelponline.org.au 9  
1800 number 10  
Other 11 Please Specify: \_\_\_\_\_  
Don't Know 12 - Why? \_\_\_\_\_ go to question 1a

**Q.1a The posters are about problem gambling, do you remember them now?**

Yes \_\_\_\_\_ No (Terminate Interview-DO NOT INCLUDE  
IN SAMPLE

**Q.2 What was your reaction to the poster/s?**

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**Q.3 Do you think the messages are relevant to you or someone you know? Why or why not?**

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**Q.4 Who do you think the messages are aimed at?**

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**Q.5 How appropriate do you think it is to display this kind of health information in the toilet facilities?**

Very appropriate 1  
Quite appropriate 2  
Undecided 3  
Somewhat inappropriate 4  
Very inappropriate 5

**Q.6 Since you saw this poster, has it made you think about your gambling or think about someone else's gambling?**

Yes 1 go to question 6a  
No 2 go to question 7

**Q.6a Since you saw this poster have you considered:**

i) Seeking help for problem gambling	Y 1	N 2
ii) Talking to your friend(s) and family about gambling	Y 1	N 2
iii) Visiting the gamblinghelponline website	Y 1	N 2
iv) Calling the 1800 number	Y 1	N 2



**Q.6b Since you saw this poster, have you taken any action on your gambling or the gambling of someone close to you?**

Yes 1 go to question 6c  
No 2 go to question 7

**Q.6c What course of action did you take?**

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**Q.7 Besides the posters in the toilets, approximately when did you last see or hear an advertisement or message about problem gambling?**

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**Q.7a Where did you see this advertisement or health message?**

- |                                   |     |     |
|-----------------------------------|-----|-----|
| i) Television advertisement       | Y 1 | N 2 |
| ii) Radio                         | Y 1 | N 2 |
| iii) Poster in another venue      | Y 1 | N 2 |
| iv) Health Newsletter in the mail | Y 1 | N 2 |
| v) Comics                         | Y 1 | N 2 |
| vi) Other (please specify) _____  | Y 1 | N 2 |

**Q.8 Which of the following gambling support services have you heard of?**

- |   |     |     |
|---|-----|-----|
| i) Self-exclusion for gambling                              | Y 1 | N 2 |
| ii) Gambling Helpline Tasmania                              | Y 1 | N 2 |
| iii) Gambling counselling at Break Even Services            | Y 1 | N 2 |
| iv) Gamblers Anonymous                                      | Y 1 | N 2 |
| v) Gambling counselling at Relationships Australia Tasmania | Y 1 | N 2 |
| vi) Gambling counselling at Anglicare Tasmania              | Y 1 | N 2 |
| vii) Gambling help online                                   | Y 1 | N 2 |

**Q.8a Would you use any of the above gambling support services if you felt you needed it?**

Y 1      N 2

**If yes, which services would you use?**

- |   |     |     |
|---|-----|-----|
| i) Self-exclusion for gambling                              | Y 1 | N 2 |
| ii) Gambling Helpline Tasmania                              | Y 1 | N 2 |
| iii) Gambling counselling at Break Even Services            | Y 1 | N 2 |
| iv) Gamblers Anonymous                                      | Y 1 | N 2 |
| v) Gambling counselling at Relationships Australia Tasmania | Y 1 | N 2 |
| vi) Gambling counselling at Anglicare Tasmania              | Y 1 | N 2 |
| vii) Gambling help online                                   | Y 1 | N 2 |

**Q.8b Would you recommend any of the above services to a friend or family member who you felt needed it?**

Y 1      N 2

**If yes, which services would you recommend?**

i) Self-exclusion for gambling	Y 1	N 2
ii) Gambling Helpline Tasmania	Y 1	N 2
iii) Gambling counselling at Break Even Services	Y 1	N 2
iv) Gamblers Anonymous	Y 1	N 2
v) Gambling counselling at Relationships Australia Tasmania	Y 1	N 2
vi) Gambling counselling at Anglicare Tasmania	Y 1	N 2
vii) Gambling help online	Y 1	N 2

**Q.9 What is self-exclusion? (Circle relevant responses)**

- i) Self-banning/not being able to go into venues (or similar)
- ii) Don't know
- iii) Other/not gambling/deciding not to gamble (or similar irrelevant response)

**Q.10 Have you gambled on the internet (either for money or no money) in the last three months?**

Yes 1 go to question 11

No 2 **Thanks for giving us your time and your input into this research project**

**Q.11 What type of game/activity(ies) did you play online?**

i) Poker	Y 1	N 2
ii) Blackjack	Y 1	N 2
iii) Baccarat	Y 1	N 2
iv) Roulette	Y 1	N 2
v) Virtual pokies	Y 1	N 2
vi) Racing	Y 1	N 2
vii) Sports betting	Y 1	N 2
ix) Bingo	Y 1	N 2
x) Outcome of events	Y 1	N 2
xi) Lotteries	Y 1	N 2
xii) Keno	Y 1	N 2

**Q.11a Which is your favourite online gambling game or activity?**

---

**Q.11b How often have you gambled online in the last three months?**

i) At least once a week	Y 1	N 2
ii) At least once a fortnight	Y 1	N 2
iii) At least once a month	Y 1	N 2
iv) At least once in the last three months	Y 1	N 2

**If yes to question i) above go to question 12. For other responses, Thanks for giving us your time and your input into this research project.**

**Q12 How long do most of your online gambling sessions last for?**

i) Less than 1 hour	Y 1	N 2
ii) Between 1 and 2 hours	Y 1	N 2
iii) Between 2 and 3 hours	Y 1	N 2

iv) More than 3 hours

Y 1      N 2

**Q13 In the last three months, if you gambled online for money, how often have you gambled another day to try to win back the money you lost?**

Never 1

Sometimes 2

Most of the time 3

Almost always 4

Doesn't apply to me 5

**Thanks for giving us your time and your input into this research project.**