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Parent and child perceptions of gambling promotions in Australian sport

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Abstract

Gambling is recognized as a significant public health problem. However, there is little research exploring community attitudes towards gambling and the development of advocacy initiatives. Engaging adults and young people in advocacy efforts is recognized as being beneficial to the successful implementation of harm prevention and reduction strategies. This study explored the attitudes of young people and their parents towards the alignment of gambling with sport, and the strategies they perceive could be used to prevent and reduce gambling related harm. Using a Constructivist Grounded Theory approach, 30 family groups from Melbourne, Australia participated in semi-structured interviews. Parents and young people were asked about gambling and its promotion, alignment with sporting codes, the potential impact on young people and strategies that may prevent or reduce gambling harm. Thematic analysis was undertaken to interpret the data. The sample comprised 29 parents, one grandparent and 48 young people. Themes emerging from the data related to the use of imagery and appeal strategies in advertisements, the normalization of betting in advertisements and the alignment of betting with sport. Parents and young people also identified a number of potential gambling harm prevention and reduction initiatives. Parents and young people were able to describe a range of strategies used by gambling companies to promote their products, understand the potential impact of these strategies, and recommend strategies to reduce harm. Given this level of understanding there is clearly an opportunity to engage young people and stakeholders in advocacy initiatives aimed at reducing and preventing gambling harm.

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Authors' contributions

JD: Contributed to the development of the analytical framework. Collected and analysed data, prepared the first draft of the manuscript and critically revised paper. ST: Study Chief Investigator. Contributed to the development of the analytical framework. Analysed data, drafted paper and critically revised paper. MR: Contributed to the development of the analytical framework. Analysed data, drafted paper and critically revised paper.

51 HP: Contributed to the development of the analytical framework, data collection, data
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54 revision of the paper.
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56
57 **Abstract (250 words)**
58

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60 research exploring community attitudes towards gambling and the development of
61 advocacy initiatives. Engaging adults and young people in advocacy efforts is
62 recognised as being beneficial to the successful implementation of harm prevention
63 and reduction strategies. This study explored the attitudes of young people and their
64 parents toward the alignment of gambling with sport, and the strategies they
65 perceive could be used to prevent and reduce gambling related harm. Using a
66 Constructivist Grounded Theory approach, 30 family groups from Melbourne,
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68 asked about gambling and its promotion, alignment with sporting codes, the potential
69 impact on young people and strategies that may prevent or reduce gambling harm.
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71 parents, one grandparent and 48 young people. Themes emerging from the data
72 related to the use of imagery and appeal strategies in advertisements, the
73 normalisation of betting in advertisements, and the alignment of betting with sport.
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75 prevention and reduction initiatives. Parents and young people were able to describe
76 a range of strategies used by gambling companies to promote their products,
77 understand the potential impact of these strategies, and recommend strategies to
78 reduce harm. Given this level of understanding there is clearly an opportunity to
79 engage young people and stakeholders in advocacy initiatives aimed at reducing
80 and preventing gambling harm.

81
82 **Keywords:** parents, young people, gambling, public health, advocacy

Background (5,826 words)

Overview: Engaging communities in public health advocacy and policy

Researchers have identified that the overall aim of health advocacy is to improve the wellbeing of communities by advocating for healthy public policy and supportive environments, mediating between different groups in society to improve health, and enabling communities to achieve optimal outcomes (Kickbusch, 1995, Carlisle, 2000). Along with the capacity building function of advocacy (Carlisle, 2000) which is fundamental in the promotion of health equity (Potvin et al., 2003), the important role of public participation and engagement in health advocacy movements is well documented in the literature (Montini et al., 2010). Those working in public health and health promotion recognise the need to engage with individuals (and groups) in the context of their communities, with evidence suggesting that by incorporating the views of target populations, preventive public health and health promotion initiatives are more likely to succeed (Hesketh et al., 2005).

Although some literature argues that community support and participation are not necessarily a prerequisite for successful policy implementation, the value of community engagement in policy implementation is acknowledged (Rosenberg et al., 2012). The literature also notes the benefits of community engagement in prevention and promotion strategies (World Health Organization, 1986). Further, research has found that public opinion and public policy support are often inter-related, with researchers stating that public opinion may influence public policy decisions and vice versa (Tobin et al., 2011).

108

109 Researchers have highlighted the importance of engaging with young people when
110 developing campaigns and policies that focus on issues that have an impact on their
111 health and wellbeing (Odukoya et al., 2015). Youth-focused advocacy efforts in
112 public health and health promotion have been important in highlighting the need for
113 greater awareness among this group as to the harms associated with unhealthy
114 commodity products and initiatives aimed at reducing these harms (Conlisk et al.,
115 2006). For example, young people have identified the promotion of unhealthy
116 products such as junk food in sport as being contradictory to the purpose of
117 engaging in physical activity and playing sport and are supportive of measures to
118 address these types of relationships (Smith et al., 2017). Young people have also
119 demonstrated a clear capacity to engage in discussions about policy issues that
120 impact upon them. For example, in a study exploring young people's perceptions of
121 current and future policies to reduce and prevent harm associated with alcohol and
122 other drug use, researchers found that young people had a clear understanding of
123 issues pertinent to them, could recommend various prevention strategies, and
124 wished to engage in policy deliberation (Lancaster et al., 2014). Young people's
125 engagement in public health and health promotion strategies has also been
126 important in understanding which strategies they perceive would be less effective in
127 improving their health and wellbeing. For example, a study exploring young people's
128 attitudes towards tobacco control policies demonstrated that although young people
129 perceived some public health interventions to be effective on a broader population
130 level, the same strategies were perceived as less effective in changing the behaviour
131 of young people (Crawford et al., 2002).

132

Gambling and young people

Gambling is recognised as a significant public health issue in many countries, with recent commentary focusing on the alignment of gambling promotions with sport, and in particular the impact of these promotions on young people (Pitt et al., 2016a, Bestman et al., 2015, Thomas et al., 2016a). In the last five years there has been growing community concern in countries such as Australia and the United Kingdom about the impact of sports betting marketing in normalising gambling for young people and the potential consequences of this on future attitudes and behaviours of young people (Pitt et al., 2017a, Pitt et al., 2017b, Lopez-Gonzalez et al., 2017). Research has found that young people have significant brand recall and awareness of gambling companies. This includes: 1) being able to identify multiple sports betting brands (Thomas et al., 2016a); 2) identifying specific sports betting promotions and sponsorship relationships with sporting teams and codes (Thomas et al., 2016a) and 3) perceiving that gambling is a common part of sport (Pitt et al., 2016a, Pitt et al., 2017b). Further research has found that sports betting marketing has the potential to positively influence young people's future gambling intentions and that some young people perceive the saturation of sports betting advertisements as being representative of the product's popularity (Pitt et al., 2017a). Young people and their parents also perceive that sports betting advertising depicts wagering as being highly accessible and an easy way to make money (Pitt et al., 2016b). Research in Australia exploring community attitudes toward gambling suggests that the community is supportive of various gambling harm reduction strategies (Thomas et al., 2017, McAllister, 2014, FARE Australia, 2017), particularly those that aim to ban or reduce gambling advertisements during televised sport, gambling advertisements

at gambling venues, and gambling sponsorship of sport (Thomas et al., 2017). Further Australian research has found that young people believe that sporting codes need to do more to protect them from exposure to sports betting advertisements, particularly through the implementation of advertising restrictions and bans (Thomas et al., 2018).

Research that seeks to explore young people's (and their parents') understanding of gambling industry strategies and their views on public health strategies to prevent and reduce harm may be particularly powerful in helping public health and health promotion practitioners advocate for regulatory and policy change. The aim of this research was to explore the attitudes of young people and their parents about the alignment of gambling with sport and the strategies they perceived could assist in the prevention and reduction of gambling related harm. The data presented in this paper explores four research questions:

1. What do parents and young people perceive are the promotional strategies used by the gambling industry in the context of sports?
2. What impact do parents and young people perceive that these promotional strategies may have on the attitudes and future behaviours of young people?
3. What strategies do parents and young people perceive could be used to prevent and reduce gambling related harm?
4. What strategies could be used to more effectively build community based capacity when advocating for gambling reform?

Methods

183

184 *Approach and study design*

185

186 The data presented in this paper was part of a broader qualitative study with parents
187 and young people, which aimed to explore attitudes towards the relationship
188 between gambling and sport. A Constructivist Grounded Theory (CGT) approach
189 was used to guide the development of the research questions and the collection and
190 analysis of the data in this study (Charmaz, 2006). In this approach a partnership is
191 created between the researcher and the participants thus acknowledging the role of
192 experiences and bias in research development and analysis (Charmaz, 2006). The
193 use of a CGT approach was considered most appropriate for this study as it
194 recognises the subjective nature of data collection and analysis due to this
195 engagement (Charmaz, 2006).

196

197 *Participant recruitment*

198

199 Family groups consisting of one parent or caregiver and at least one child living in
200 metropolitan Melbourne, Australia, were initially approached using convenience
201 sampling techniques (Ritchie et al., 2014). Information about the study was
202 distributed to the researchers' social networks as well as local community and
203 sporting clubs between April and July 2016. To be eligible to participate, young
204 people had to be aged between 8-16 years and fans of the Australian Football
205 League (AFL - one of Australia's most prominent and publicised sports). Parents
206 were approached and asked if their child was a self-identified AFL fan because the
207 study specifically sought to understand the opinions of young people who were

engaged with a sport which had significant gambling advertising at stadiums, within broadcasts and had sponsorship relationships with teams (Thomas et al., 2012). If eligible, multiple children from the same family group were able to participate. On completion of initial interviews using a snowball sampling technique (Sadler et al., 2010), parents were asked to pass on study details to other families who they thought may have been eligible and interested in participating in the research project. Prior to participation, parents were provided with a plain language statement that provided information about the study. Each participant provided verbal and / or written consent prior to participation. At the conclusion of the study each child received a \$30 gift card to reimburse them for their time. Ethical approval for the research was obtained from the Human Research Ethics Committee prior to data collection commencing.

Data collection

Face to face semi-structured interviews were conducted with two researchers attending the interviews at an agreed location. One researcher interviewed the parent while the other interviewed the child. Interviews lasted between 30 and 45 minutes and were audio-taped with parents and young people interviewed out of immediate hearing range of each other. In instances where multiple children from the same family group participated each child was interviewed separately. While the broader study explored children's recall and awareness of sports betting advertising and their future gambling behaviours, parents and young people were asked a range of open-ended questions relating to their perceptions of the sports betting industry, how it promoted gambling products, the gambling industry's alignment with major

sporting codes, any perceived positive or negative impact on young people, and strategies to prevent or reduce gambling harm for young people. To ensure anonymity, all data was de-identified prior to analysis.

Data analysis

Initial interviews were transcribed by author one or by a professional transcription company. Data analysis was a continuous process during data collection, with the interview schedule adjusted as new themes emerged. Data were reviewed to identify responses relevant to each of the three research questions, with constant comparison between parent and young people's responses. Although responses tended to appear in specific sections of the data set, data in the overall interview was explored and included for analysis if relevant. Data were managed using QSR NVivo 11. Author One led the data analysis process including reading and re-reading each transcript. Given the theory generating nature of CGT (Charmaz, 2006), initial coding allowed for the identification, development and revision of the emerging themes. As noted by Charmaz (2006), this first stage of coding enables considerations about the relevance of data in respect of research questions. Broad and then more specific themes were developed to reflect responses in relation to each of the key research questions. Throughout the data analysis process, discussions between the authors occurred regularly in relation to the emerging themes and their relevance to the research questions. Data collection and subsequent analysis was finalised when we had collected sufficient data to illustrate a range of concepts and ideas in relation to the research questions. Although qualitative data does not seek to attribute numerical values to data, in reporting the results of the data we have indicated 'a

few' to represent less than 25% of participants, 'some' as up to 50%, 'many' as up to 75% and 'most' as over 75% agreement.

Results

Sample description

The sample comprised 30 family groups, consisting of 29 parents and one grandparent (subsequently referred to as parents) and 48 young people. Approximately two thirds of the parent group were women (n=19, 65.5%), with an average age of 47.5 years. The majority of young people were boys (n=41, 85.4%), with an average age of 11.4 years. Family groups had similar socio-demographic attributes, all residing in suburbs of relative advantage, placing between the 6th and 10th decile according to the Index of Relative Socioeconomic Disadvantage (Australian Bureau of Statistics, 2011).

A range of themes and subthemes emerged from the data in relation to the research questions.

1. Perceptions of promotional strategies used by the gambling industry in the context of sports

Parents and young people were able to describe a range of strategies used by the sports betting industry to promote their products. These strategies could be clustered into three themes: 1) the use of imagery and appeal strategies within advertising; 2)

283 the normalisation of betting via advertising saturation; and 3) the alignment of betting
284 with sporting codes.

285

286 *The use of imagery and appeal strategies within advertising*

287

288 Parents and young people identified similar imagery and appeal strategies used
289 within sports betting advertising including positive imagery, the use of celebrities,
290 and incentives and inducements.

291

292 The use of positive imagery was particularly related to the social practices
293 associated with sports betting. Mothers described imagery of groups of '*mates*' or
294 peers having fun betting together in social settings, stating that this created a
295 perception that sports betting was a harmless or '*innocuous form of recreation*', with
296 many positive social benefits. One mother commented that by depicting groups of
297 people gambling together, sports betting was seen as a way to socialise with friends.
298 Fathers commented that advertising made betting appear as an extension of
299 watching sport, with betting appearing as '*part of a package*' with watching sport,
300 drinking beer and sports betting all occurring together. In contrast to parents, young
301 people under the age of 11 focused on the emotions depicted in the advertisements.
302 They emphasised the positive emotions of the actors in the advertisements and
303 linked this to the likelihood of winning money, speaking about '*happy people*' or
304 '*people cheering*' within advertising. However, young people over the age of 11
305 provided a similar response to parents, commenting that imagery in advertising
306 created a perception that gambling was a fun and social activity and something you

307 do with friends, describing advertisements as depicting gambling '*with your mates*'
308 and appearing to '*have a good time*'.

309

310 One specific appeal strategy identified by both parents and young people was the
311 use of celebrities within advertising. Parents were particularly critical of this strategy,
312 with one parent describing these strategies as having an '*insidious*' impact on young
313 people. Young people also commented that celebrities and '*big names*' were used to
314 promote sports betting and noted that these strategies would be influential, as
315 athletes were perceived as '*role models*'. For example, talking about the use of a
316 football player in sports betting commercials, one eight year old stated that:

317

318 '*...he could say something that sounds cool and you will probably want to try*

319 *it*'. – 8-year-old boy

320

321 At times, young people appeared to have quite a sophisticated understanding of
322 advertising. For example, some young people also stated that celebrity endorsement
323 of sports betting products lessened the perception of risks associated with these
324 products for young people, and thought that if celebrities or well-known people were
325 engaging in sports betting it would be perceived as a less risky activity because they
326 were trustworthy.

327

328 A range of other appeal strategies also decreased perceptions of risk associated
329 with sports betting. For example, some parents stated that certain promotional
330 strategies, including incentives and inducements, created a perception that an
331 individual could control the outcome of sports betting and that an individual was

more likely to win. In particular, parents commented on advertisements that promoted ‘*bonus bets*’ and ‘*money back*’ deals:

“... [the betting industry makes it] *seem like it's a safe thing to do, that there is no risk involved. You know, that you can't really lose because you can bet, and you can get your money back. It would make it seem like it's a harmless thing to engage in*” – 42-year-old mother

Similarly, young people described how deals such as cash back offers gave the impression that gambling was not ‘*as risky*’. For example, one 10-year-old boy commented:

“*Well, because there are deals, they think, ‘well even if I stuff up, I’m only losing 10 cents because they’ll give me cash back’.*” – 10-year-old boy

Finally, young people commented that different appeal strategies would have an influence on different groups of children. For example, cartoons used in advertising were perceived to have a particular influence on younger children, whereas strategies using humour and celebrity endorsement would appeal to teenagers.

The normalisation of gambling via advertising saturation

Parents and young people perceived that saturation-advertising techniques were designed to normalise and increase the social acceptability of sport betting. For example, parents discussed how the saturation of advertisements created the

perception that betting on sport was ‘*very normal*’, ‘*very common*’, and that ‘*everyone does it*’. Both the volume and repetition of advertisements in key events, particularly within sport, were seen as perpetuating the notion that sports betting was an activity that all sports fans participated in:

“Just sort of like they were making [sports betting] it a socially acceptable thing to do you know. Come along tonight... come to the footy and put a bet on, like it’s something you do. Like ‘come to the footy and have a pie, you know everyones’ doing it’.” – 45-year-old mother

Boys over the age of 11 also commented that the saturation of sports betting advertising created a perception that betting on sport was a normal and popular activity:

“ ...Advertising makes it appear like so many people do it ... that it is really popular.”— 13-year-old boy

Promotions that align gambling with sport

Parents and some young people recognised that the alignment between betting companies and sporting codes was a key strategy used by the betting industry to positively influence attitudes towards betting. Some parents commented that this alignment was potentially an attempt to make sports betting appear ‘*family friendly*’ and a credible part of the sporting experience. Most parents were extremely critical of these relationships. For example, one father stated:

382

383 *"I don't think the AFL is putting anything out about the impact of gambling or*
384 *you know, any negative impacts of gambling. I would say that by promoting*
385 *their sponsors they are promoting that sponsor's product..."* - 44-year-old
386 father

387

388 While some young people identified the relationships between gambling companies
389 and sporting codes, the influence of these relationships was more complex for them
390 to consider. For example, young people described gambling companies and sporting
391 codes as *'being together'* and understood that there were financial relationships
392 between the two industries. This was demonstrated by a few young people over the
393 age of 11 who stated that some sporting codes appeared to be positive towards and
394 encouraging of sports betting through their promotions that appeared to associate
395 sporting codes with sports betting companies. Some also perceived that there were
396 some financial benefits for sporting codes because of sponsorship relationships and
397 that these outweighed any negatives from gambling.

398

399 *I think it almost outweighs the negatives, 'cause that's a lot of money for them*
400 *and again, it's the AFL (Australian Football League), it's a big thing you know..."*
401 – 13-year-old boy

402

403 2. Proposed strategies for gambling harm prevention and reduction

404

405 Suggestions for preventing and reducing the harms associated with sports related
406 gambling, clustered around three themes: 1) regulating advertising; 2) developing

effective education strategies for young people; and 3) increased acceptance for responsibility by governments and sporting organisations.

Regulating advertising

There were some clear similarities in suggestions from parents and young people in restricting sports betting advertising. For example, both parents and young people advocated for ‘*capping*’ the number of advertisements to reduce the perception of ‘*ad after ad after ad*’. Some (and particularly young people) believed that a complete ban was required. Parents often drew parallels with advertising restrictions for other products such as tobacco and alcohol. Parents argued that sports betting marketing should be addressed in a similar way to these products, particularly relating to a complete ban of advertising in sport as had been implemented for tobacco products.

“...if you could cut out advertising, I'd just cut it... let's see sports betting in the same way that we saw cigarette advertising...” – 46-year-old mother

While young people also advocated for bans or restrictions on the timing of advertising, they were much more sceptical about whether the government would be prepared to implement such restrictions. Some were critical about the willingness of policy makers and sporting codes to act in the best interests of young people. These young people were aware that advertising was a key strategy to help the sports betting industry make money:

431 *"It would be good if you could like stop the ads, because the ads are*
432 *influencing a lot... I don't think you would be able to stop betting, like in total.*
433 *But if the ads go away sports betting won't get as much money, which means*
434 *less people bet because less people actually think about it."* – 12-year-old boy

435

436 One boy suggested that while a complete ban on advertisements was needed, he
437 questioned whether the government would actually implement this:

438

439 *"Well I think they could actually stop it, but I don't think the government*
440 *actually would."* – 12-year-old boy

441

442 A few young people also commented that even if advertising was restricted to
443 traditional media platforms such as television, companies would always find a way to
444 advertise. For example, one boy described the presence of advertising for gambling
445 products on social media as a way that companies could circumvent such
446 restrictions.

447

448 *Developing effective education strategies*

449

450 Both parents and young people discussed the role of education in helping young
451 people to understand the risks associated with gambling and the strategies of the
452 gambling industry. Parents commented on the need for educational programs that
453 would be similar to those offered for tobacco and alcohol products, which aimed to
454 denormalise or '*unglamorise*' sports betting. Parents stressed the importance of hard
455 hitting educational campaigns that identified the potential for negative outcomes

associated with gambling. While parents believed that education could come from a wide range of individuals and organisations, some were more reflective about the effectiveness of education. These parents argued that ultimately regulation of the gambling industry was needed to reduce harm. However, some parents stated that education about the risks associated with gambling would have limited impact because *‘people don’t think it is going to happen to them, until it does happen to them’*. Young people also emphasised education as one way to prevent potential gambling harm amongst their peers but that this needed to be included within a range of strategies to prevent harm. Some young people suggested the integration of gambling education in the classroom by *‘doing things with odds in maths’*, while others suggested that education campaigns at schools might be helpful in making young people aware of the *‘dangers’* associated with gambling. Some young people believed that education needed to focus on the *‘real risks’* of gambling and emphasise the rate at which *‘you win and lose’* when placing a bet. Some young people over the age of 11 suggested that organisations or individuals with a lived experience of gambling harm could come to their school and talk to students, believing this would be helpful in increasing their understanding of the potential risks associated with sports betting and gambling more generally.

“I think they [the government] could do the same kind of thing they do with drugs and alcohol, but they don't do it with things like gambling, so they could do that.” – 12-year-old girl

Increased responsibility from government and sporting organisations

481 A small number of parents perceived that the financial incentives for governments
482 from gambling resulted in a lack of effective regulation. These parents believed that
483 governments needed to be '*independent*' from the financial interests of gambling
484 organisations. A parent commented that there was room for governments to regulate
485 '*the way that corporates promote their products*'. A few parents made a number of
486 policy recommendations. For example, they identified the need for consistency in
487 both state and federal legislation to address sports betting advertising. Parents
488 suggested that governments could approach gambling harm reduction in a similar
489 way to regulations on tobacco products. This was echoed by a small number of
490 young people:

491

492 *"You know how with smoking there's the thing on the back which says,*
493 *'smoking is super dangerous'... they could write gambling probably won't give*
494 *you all the money that you pay, or more."* – 12-year-old boy

495

496 Young people were often aware that gambling advertisements could be problematic,
497 and proposed logical solutions for reducing young peoples exposure to advertising.
498 For example, one 11-year-old boy stated that the clear way to reduce the number of
499 advertisements was to have fewer gambling companies:

500

501 *"There just needs to be less. If there were less, people wouldn't care as much,*
502 *and we wouldn't be having this conversation right now."*–11-year-old boy

503

504 Parents also discussed the responsibilities of sporting codes in reducing young
505 people's exposure to advertising. For example, parents commented that the

506 government could subsidise the AFL to reduce its reliance on gambling industry
507 sponsorship and encourage them to *'find other sponsors'*. Parents clearly articulated
508 that sporting codes and the gambling industry needed separation from each other:

509

510 *"I think there should be a separation. That none of the AFL or the clubs should*
511 *have any licensing, sponsorship or advertising money generated from*
512 *gambling."* – 51-year-old mother

513

514 Parents also commented that the sporting codes needed to be aware of their young
515 fan base and the inconsistency between sponsors who promoted gambling and the
516 family friendly framing of the game:

517

518 *"I would like to think that [the AFL] would say 'if we are going to be more*
519 *consistent in our message then we are going to see less gambling and more*
520 *wholesome products'."* – 52-year-old father

521

522 Young people identified various strategies that sporting codes could implement in the
523 community, including emphasising the risks associated with gambling, reducing
524 sponsorship relationships, and using sportspeople to help educate individuals about
525 the risks associated with gambling:

526

527 *"I would like to see one of those powerful ads where AFL, the AFL community*
528 *band together to take action..."* – 12-year-old boy

529

530 **Discussion**

531

532 This study sought to explore parents' and young peoples' perceptions of and
533 attitudes towards the promotional strategies used by the sports betting industry
534 during sport and identify strategies to reduce and prevent gambling harm. While
535 previous research has documented community attitudes towards other unhealthy
536 commodity industries (Rosenberg et al., 2012, Tobin et al., 2011, Smith et al., 2017),
537 less is known about attitudes towards the gambling industry, recognition of their
538 strategies, and community recommendations about how to reduce gambling harm.
539 The findings of this study raise a number of key points for discussion.

540

541 Both parents and young people perceived that the gambling industry used incentives
542 and appealing imagery, normalised betting through saturation-advertising, and
543 associated gambling with family friendly sporting codes in their advertisements,
544 when framing their products in the community. Some parents noted similarities with
545 previously popularised products such as tobacco and alcohol. In considering
546 responses to gambling advertising, parents often drew on the historical template
547 provided by tobacco control. Reflecting on tobacco and alcohol regulations, some
548 parents believed that similar regulations might be suitable in the context of gambling,
549 particularly those focusing on advertising. Similarly to parents, a few young people
550 also referred to tobacco control strategies when discussing the potential use of
551 warning labels as a harm prevention strategy in gambling suggesting that a similar
552 approach could be useful. This demonstrates that community members are able to
553 use other reference points in public health in considering effective responses to new
554 and emerging public health issues.

555 Parents also recognised the financial relationships between sports betting
556 companies and sports and were concerned about the potential impact this had on
557 the way their products were presented to the consumer, referring specifically to the
558 conflicts of interest that could arise. However, young people were less cognisant of
559 the potential for negative outcomes associated with these relationships, rather
560 acknowledging that these relationships could create a positive image of gambling,
561 with some young people in turn suggesting that they might make people want to
562 gamble. Both parents and young people questioned the impact of sporting codes'
563 relationships with gambling companies and were worried about how this could
564 influence young people's perceptions of sports betting and the potential harm
565 associated with gambling. Some young people also noted that these relationships
566 could encourage gambling amongst their peers and downplay the risk of harm. The
567 strategies engaged in by gambling companies are not dissimilar to those that have
568 been used by other unhealthy commodity industries (Thomas et al., 2016b, Story
569 and French, 2003, Bond et al., 2010). Both parents and young people were able to
570 describe some of these strategies (Pettigrew et al., 2013, Smith et al., 2017), and
571 recognised similarities across industries. In proposing solutions to address gambling
572 harm, young people acknowledged the impact that advertising could have on
573 people's perceptions. This may be as a result of the media and technologically
574 focused environments to which young people are exposed to and aware of, in
575 comparison to older generations (such as parents). Young people, and particularly
576 those over the age of 11, generally demonstrated a sophisticated understanding of
577 the potential negative consequences of gambling, and particularly the new media
578 environments that promoted these products. Similarly to parents they were able to
579 identify a range of promotional strategies sports betting companies appeared to

580 employ in their advertisements. Although young people demonstrated in-depth
581 critical analysis skills when recognising and subsequently discussing these
582 strategies, they did not appear to fully appreciate the subtleties and complexities
583 associated with responding to these problems. Nevertheless, there is significant
584 potential to engage young people and parents in community-led responses to
585 gambling reform; particularly given that young people and their parents seem to
586 understand the implications of unhealthy commodity marketing on young people.

587

588 While both parents and young people emphasised that education was important in
589 reducing and preventing gambling related harm, prior literature in this area
590 acknowledges that although education is important, it should be considered as part
591 of a broader public health and health promotion approach (Frieden, 2014, Nutbeam,
592 2000). Evidence from tobacco control suggests that school-based harm reduction
593 strategies have mixed success, with limited evidence of their long-term impact
594 (Scollo and Winstanley, 2012). Evidence also suggests that industries promoting
595 unhealthy products (e.g. tobacco and alcohol) are often supportive of harm reduction
596 and prevention strategies that are known to be less effective (Scollo and Winstanley,
597 2012, Miller et al., 2011). Providing similar responses, parents and young people
598 both suggested that gambling awareness should be integrated into school curricula.
599 While this would provide young people with further opportunities to be educated
600 about gambling harm, there would be a need for evidence to justify this approach,
601 particularly given the many pressures on the school curriculum that already often
602 preclude an increase in focus on health and physical education topics.

603

604 Overall both parents and young people agreed that restricting sports betting
605 advertising was the best way to prevent and reduce gambling harm in the
606 community. Parents and young people alike frequently referred to the potential
607 negative impact of gambling advertising on community perceptions about gambling
608 harm and risk. While there have been some regulatory changes restricting the times
609 sports betting advertisements can be shown (Australian Communications and Media
610 Authority, 2018), at present a complete ban or any other significant restrictions on
611 gambling advertisements have not been implemented.

612

613 The inclusion of young people's opinions and engagement in policy development
614 and advocacy should also be considered. The results of this study indicate that
615 young people are both aware of and have clear opinions about ways to reduce
616 gambling harm among their peers and the broader community. Some young people
617 spoke of known harm reduction strategies implemented in other industries (e.g.
618 warning labels on tobacco products), which have been successful in increasing
619 community awareness about the health risks associated with smoking (Azagba and
620 Sharaf, 2013, Scollo and Winstanley, 2012). The responses from young people
621 further suggest that when developing and implementing harm prevention and health
622 promotion strategies, they would rather be 'engaged with' as opposed to 'talked to'.
623 Young people noted the potential positive influence that sporting personalities or
624 individuals with a lived experience of gambling harm may have when being educated
625 about gambling harm. Given the high level of awareness about gambling among
626 young people, it is important to consider ways for public health advocates to more
627 effectively engage with young people. Projects that have demonstrated success with
628 parents could be adapted to engage young people, for example "Parents Voice"

which, particularly through its “Parents Jury”, has been effective in communicating parental concerns around their children’s exposure to inappropriate food promotion (Gannon et al., 2014). Youth ambassadors have also been used successfully to advocate for a variety of tobacco control measures (Tobacco Free Kids, 2018). Consequently, there should be scope for those working to address gambling harm to create similar opportunities to directly engage with and use young people’s voices in both policy and education efforts. However, this study shows that young people are at times sceptical about their role and engagement with governments when addressing gambling harm. It is important to ensure that those who engage with young people in the future fully investigate their attitudes and opinions, present their views, and encourage their active involvement in developing and supporting the most effective public health advocacy strategies to prevent and reduce gambling harm.

This study has a number of limitations. First, the study recruited family groups whose children were fans of the AFL which has a high saturation of sports betting marketing (Thomas et al., 2012). Therefore, these young people may have had a greater level of awareness of sports betting advertising and marketing compared to those who are fans of other sports with a lower saturation of advertisements. Consequently, their views, particularly towards sporting codes may not apply to young people who are not fans of AFL. The use of convenience and snowball sampling techniques in this study resulted in family groups from more affluent socio-demographic backgrounds. This reduces the generalisability of the current study and should be considered in future research into community attitudes of sports betting and its potential for harm. Further, the majority of parents sampled in this study were mothers, and the majority

of young people interviewed were boys. These sub-groups may have different perspectives towards sport and betting. Future research into community attitudes and opinions should seek to sample a more even distribution of boys and girls, and mothers and fathers.

Conclusion

Parents and young people clearly identified and recommended a number of strategies to reduce gambling harm including restricting sports betting advertisements, increasing gambling awareness, and education. The common view of the study participants was that there is a need for greater advertising restrictions. This could include the removal of sports betting advertising during all live sporting telecasts (inclusive of advertising breaks and breaks in play), restricting the imagery and depiction of gambling in advertisements and restricting the number of sports betting advertisements in a given time period. Implementing these types of regulatory changes appears to be warranted and reflects the sentiments of parents and young people. Further, given the demonstrated level of understanding about the issue of gambling from parents and young people, engaging with this group through similar programs to the “Parents Jury” may provide a unique opportunity to ensure that the attitudes and opinions of the community are recognised during future advocacy efforts and policy debates. Finally, those working in public health should explore the various measures used in other areas of public health and health promotion to more effectively engage with and involve the community, and particularly young people, in future harm prevention and health promotion initiatives.

LIST OF ABBREVIATIONS

679 Australian Football League: AFL
680 Constructivist Grounded Theory: CGT

681 **DECLARATIONS**

682 **Acknowledgements**

683 We would like to acknowledge our study participants for their contribution to this
684 project.

685 **Consent for publication**

686 Participants consented to the data being used for publication.

687 **Availability of data and material**

688 This data will not be made available to ensure the privacy and confidentiality of the
689 study participants.

690

691 **References (1,155 words)**

- 692 Australian Bureau of Statistics. Snapshots of Australia: Census of Population and
693 Housing. Commonwealth of Australia. 2011. Available:
694 http://stat.data.abs.gov.au/Index.aspx?DataSetCode=ABS_SEIFA_LGA
695 [Accessed 22nd March 2018].
- 696 Australian Communications and Media Authority. 2018. *Broadcasting Services*
697 *(Online Content Service Provider Rules) 2018* [Online]. Available:
698 <https://www.legislation.gov.au/Details/F2018L01203> [Accessed 26 Nov 2018].
- 699 Azagba, S. & Sharaf, M. F. 2013. The effect of graphic cigarette warning labels on
700 smoking behavior: evidence from the Canadian experience. *Nicotine and*
701 *Tobacco Research*, 15, 708-17.
- 702 Bestman, A., Thomas, S. L., Randle, M. & Thomas, S. D. 2015. Children's implicit
703 recall of junk food, alcohol and gambling sponsorship in Australian sport. *BMC*
704 *Public Health*, 15, 1022.
- 705 Bond, L., Daube, M. & Chikritzhs, T. 2010. Selling addictions: similarities in
706 approaches between big tobacco and big booze. *Australasian Medical*
707 *Journal*, 3, 325-332.
- 708 Carlisle, S. 2000. Health promotion, advocacy and health inequalities: a conceptual
709 framework. *Health Promotion International*, 15, 369-376.
- 710 Charmaz, K. 2006. Constructing grounded theory: a practical guide through
711 qualitative analysis (Introducing Qualitative Methods Series).
- 712 Conlisk, E., Proescholdbell, S. K. & Pan, W. K. 2006. Support for tobacco control
713 policies among youth in North Carolina. *North Carolina Medical Journal*, 67,
714 175-9.

- Crawford, M. A., Balch, G. I. & Mermelstein, R. 2002. Responses to tobacco control policies among youth. *Tobacco Control*, 11, 14-19.
- FARE Australia. Annual Alcohol Poll 2017: attitudes and behaviours. Foundation of Alcohol Research and Education. 2017. Available: http://fare.org.au/wp-content/uploads/FARE-ANNUAL-ALCOHOL-POLL-2017-REPORT-FINAL_DIGITAL.pdf [Accessed 12th March 2018].
- Frieden, T. R. 2014. Six components necessary for effective public health program implementation. *American Journal of Public Health*, 104, 17-22.
- Gannon, D., Pryor, A. & Mallon, A. 2014. The parents jury healthy checkouts campaign. *Obesity Research & Clinical Practice*, 8, 34.
- Hesketh, K., Waters, E., Green, J., Salmon, L. & Williams, J. 2005. Healthy eating, activity and obesity prevention: a qualitative study of parent and child perceptions in Australia. *Health Promotion International*, 20, 19-26.
- Kickbusch, I. Action on health promotion: approaches to advocacy and implementation Copenhagen, Denmark: World Health Organization. 1995. [Accessed 18 January 2018].
- Lancaster, K., Ritter, A. & Matthew-Simmons, F. Young people's opinions on alcohol and other drugs policy-national survey results. Australian National Council on Drugs. 2014. Available: <https://ndarc.med.unsw.edu.au/sites/default/files/newsevents/events/RP27-young-peoples-opinions.pdf> [Accessed 12th March 2018].
- Lopez-Gonzalez, H., Estévez, A. & Griffiths, M. D. 2017. Marketing and advertising online sports betting: a problem gambling perspective. *Journal of Sport and Social Issues*, 41, 256-272.
- McAllister, I. 2014. Public opinion towards gambling and gambling regulation in Australia. *International Gambling Studies*, 14, 146-160.
- Miller, P. G., De Groot, F., McKenzie, S. & Droste, N. 2011. Vested interests in addiction research and policy. Alcohol industry use of social aspect public relations organizations against preventative health measures. *Addiction*, 106, 1560-7.
- Montini, T., George, A., Martin-Mollard, M. & Bero, L. A. 2010. The role of public participation in public health initiatives: an analysis of the WHO Framework Convention on Tobacco Control. *Global Public Health*, 5, 48-61.
- Nutbeam, D. 2000. Health literacy as a public health goal: a challenge for contemporary health education and communication strategies into the 21st century. *Health Promotion International*, 15, 259-267.
- Odukoya, O. O., Chife, J. O., Odeyemi, K. A. & Nwangwu, G. I. 2015. Young peoples awareness and support for tobacco control legislation: a study among in-school youth in Lagos, Nigeria. *Nigerian Quarterly Journal of Hospital Medicine*, 25, 193-201.
- Pettigrew, S., Rosenberg, M., Ferguson, R., Houghton, S. & Wood, L. 2013. Game on: do children absorb sports sponsorship messages? *Public Health Nutrition*, 16, 2197-2204.
- Pitt, H., Thomas, S. L., Bestman, A., Stoneham, M. & Daube, M. 2016a. "It's just everywhere!" children and parents discuss the marketing of sports wagering in Australia. *Australian and New Zealand Journal of Public Health*, 40, 480-486.
- Pitt, H., Thomas, S. L. & Bestman, A. 2016b. Initiation, influence, and impact: adolescents and parents discuss the marketing of gambling products during Australian sporting matches. *BMC Public Health*, 16, 1-12.

- Pitt, H., Thomas, S. L., Bestman, A., Daube, M. & Derevensky, J. 2017a. Factors that influence children's gambling attitudes and consumption intentions: lessons for gambling harm prevention research, policies and advocacy strategies. *Harm Reduction Journal*, 14, 11.
- Pitt, H., Thomas, S. L., Bestman, A., Daube, M. & Derevensky, J. 2017b. What do children observe and learn from televised sports betting advertisements? A qualitative study among Australian children. *Australian and New Zealand Journal of Public Health*, 41, 604-610.
- Potvin, L., Cargo, M., McComber, A. M., Delormier, T. & Macaulay, A. C. 2003. Implementing participatory intervention and research in communities: lessons from the Kahnawake Schools Diabetes Prevention Project in Canada. *Social Science & Medicine*, 56, 1295-1305.
- Ritchie, J., Lewis, J., McNaughton Nicholls, C. & Ormston, R. 2014. *Qualitative research practice: a guide for social science students and researchers*, Los Angeles, California, SAGE Publications, Inc., Second edition.
- Rosenberg, M., Pettigrew, S., Wood, L., Ferguson, R. & Houghton, S. 2012. Public support for tobacco control policy extensions in Western Australia: a cross-sectional study. *BMJ open*, 2.
- Sadler, G. R., Lee, H.-C., Lim, R. S.-H. & Fullerton, J. 2010. Recruitment of hard-to-reach population subgroups via adaptations of the snowball sampling strategy. *Nursing and Health Sciences*, 12, 369-374.
- Scollo, M. & Winstanley, M. Tobacco in Australia: facts and issues. Melbourne 2012. Available: <http://www.tobaccoinaustralia.org.au> [Accessed 14th March 2018].
- Smith, M., Signal, L., Edwards, R. & Hoek, J. 2017. Children's and parents' opinions on the sport-related food environment: a systematic review. *Obesity Reviews*, 18, 1018-1039.
- Story, M. & French, S. 2003. Food advertising and marketing directed at children and adolescents in the US. *International Journal of Behavioral Nutrition and Physical Activity*, 1.
- Thomas, S. L., Lewis, S., Duong, J. & McLeod, C. 2012. Sports betting marketing during sporting events: a stadium and broadcast census of Australian Football League matches. *Australian and New Zealand Journal of Public Health*, 36, 145-152.
- Thomas, S. L., Pitt, H., Bestman, A., Randle, M., Daube, M. & Pettigrew, S. Child and parent recall of gambling sponsorship in Australian sport. Victorian Responsible Gambling Foundation. 2016a. Available: <https://responsiblegambling.vic.gov.au/resources/publications/child-and-parent-recall-of-gambling-sponsorship-in-australian-sport-67/> [Accessed 17th August 2017].
- Thomas, S. L., David, J., Randle, M., Daube, M. & Senior, K. 2016b. Gambling advocacy: lessons from tobacco, alcohol and junk food. *Australian and New Zealand Journal of Public Health*, 40, 211-217.
- Thomas, S. L., Randle, M., Bestman, A., Pitt, H., Bowe, S. J., Cowlshaw, S., et al. 2017. Public attitudes towards gambling product harm and harm reduction strategies: an online study of 16–88 year olds in Victoria, Australia. *Harm Reduction Journal*, 14, 49.
- Thomas, S. L., Bestman, A., Pitt, H., Cassidy, R., McCarthy, S., Nyemcsok, C., et al. 2018. Young people's awareness of the timing and placement of gambling advertising on traditional and social media platforms: a study of 11–16-year-olds in Australia. *Harm Reduction Journal*, 15, 51.

814 Tobacco Free Kids. 2018. *Tobacco Free Kids Youth Advocacy Initiatives* [Online].
815 Available: [https://www.kickbuttsday.org/for-youth-](https://www.kickbuttsday.org/for-youth-advocates/advocacy_initiatives/)
816 [advocates/advocacy_initiatives/](https://www.kickbuttsday.org/for-youth-advocates/advocacy_initiatives/) [Accessed 6th March 2018].
817 Tobin, C., Moodie, A. R. & Livingstone, C. 2011. A review of public opinion towards
818 alcohol controls in Australia. *BMC Public Health*, 11, 58.
819 World Health Organization. 1986. *The Ottawa Charter for Health Promotion* [Online].
820 Genva, Switzerland: World Health Organization. Available:
821 <http://www.who.int/healthpromotion/conferences/previous/ottawa/en/>
822 [Accessed 12th March 2018].
823