



Seniors and Gambling: A Hidden Problem?

A Report on the Seniors and Gambling Project

Prepared by Community Links
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1.0 Executive Summary

Community Links conducted a project in 2009-2010, funded by the Nova Scotia Gaming Foundation, to explore some issues around seniors and gambling. The three methods used to obtain information on this issue were: a survey sent to 190 senior leaders and senior-serving organizations, 5 focus groups made up of 41 seniors and a review of the literature on seniors and gambling. The underlying purpose of this work was to explore the extent to which gambling is considered a serious issue for seniors in our province.

Based on analysis of the research on seniors and gambling, 51 responses to the survey and discussions with 41 seniors in the 5 focus groups, several key issues were identified. It was interesting to observe the consistency between what is said in research papers and what senior leaders, senior servers and seniors themselves said in the project survey and in the focus groups.

Seven themes are described in the report:

1. Gambling is a 'hidden problem' for seniors. Many more seniors are either at risk for having a gambling problem or are experiencing gambling problems than is indicated in prevalence studies and most research.
2. People who work with or for seniors and seniors, themselves are concerned about the growing number of seniors involved in gambling activities and the growing number of gambling activities promoted to seniors.
3. Seniors' organizations are increasingly dependent on the revenues from gambling activities, but there is little understanding of the implications that this has both for them and their members and users.
4. Advertising and promotional campaigns appear to promote gambling much more than caution against it or provide information for those who have problems with gambling.
5. Seniors perceive that the role of the government in gambling activities is confusing, contradictory and disturbing. As one senior said, "the government's foot is on the gas and the brake at the same time".
6. Peer support is indicated as the best way to reach and help seniors who are at risk for or who have gambling problems.
7. Strategies and methodologies used in prevalence studies do not always suit the senior population. Seniors are very reluctant to admit to having gambling problems, particularly in a survey.

Research, seniors and those working with seniors suggested the best ways to reach and help seniors who are at risk or who have gambling problems is through education and peer support.

The material incorporated in this report suggests several recommendations:

1. Develop preliminary knowledge translation tools, geared at seniors and senior servers;
2. Review and analyze the ways in which seniors who are problem gamblers could be identified;
3. Evaluate strategies used to reach those at risk; and
4. Research the impact (both positive and negative) of revenues from gambling on senior-serving organizations and community groups as a whole.

Gambling activities are a normal part of human life. Too much involvement, however, may be problematic not only for seniors and those who are concerned about the quality of life of seniors, but also for the overall quality of life in Nova Scotia.

Introduction

2.0 Gaming Foundation

The “Seniors and Gambling Project” was funded by the Nova Scotia Gaming Foundation, whose vision is “individuals, families and communities free from gambling harm”. The Foundation’s core values include ethical gaming policy, transparency and accountability, informed decision making and collaboration and community capacity building. The primary purpose of the Foundation’s Community Funding Projects is “to disburse seed money for projects that will address the unmet needs of problem gamblers, their families and their communities”. Reflecting this purpose, the Foundation provides grants for qualified applicants for projects addressing prevention, treatment, education, remedial intervention and research.

3.0 Community Links

Community Links is a provincial organization with a membership of 240 mainly senior and senior-serving organizations with a mandate to support seniors’ well-being in Nova Scotia. The organization has considerable experience in undertaking both large and small projects and efforts which engage seniors around issues of concern to them and the community.

Community Links submitted a proposal on “Seniors and Gambling” in the spring of 2009 after being approached by the Nova Scotia Gaming Foundation to explore issues of problem gambling among seniors in the province. Work began on the project in June 2009 and it was completed in March 2010, as projected. Community Links drew on its extensive provincial networks in undertaking this project.

4.0 Goal and Objectives of the Seniors and Gambling Project

The goal of the project is to gather information about seniors in Nova Scotia who gamble, to identify the types of gambling most often engaged in by them, what can be done to support seniors with gambling problems, and who could be at risk for having gambling problems.

The project is an explorative study based on seniors' perceptions and experiences concerning games of chance and it is based on anecdotal evidence, not scientific research.

The objectives of the project are:

- To provide an overview of the research on seniors and gambling.
- To conduct a pre-survey on seniors and gambling with seniors' leaders and senior servers throughout the province.
- To conduct six focus groups throughout the province with targeted groups of seniors.
- To review the literature on seniors and gambling.
- To prepare a report and recommendations for future action or research. based on the literature scan, pre-survey and focus group results by March 2010.

5.0 Activities

Activities undertaken by the project included:

- Beginning in June 2009, the Project Steering Committee met on a regular basis to provide overall direction for the committee, to assist in planning for the focus groups, developing the focus group guide and provide on-going information and expertise in addressing issues related to the project.
- Beginning in June 2009 a review of the literature on seniors and gambling, using available materials and the Internet, identified several studies relevant to the project.
- In June of 2009, a survey was sent to seniors' leaders and seniors' servers throughout Nova Scotia (See Appendix A) and responses (51) were used to develop questions for the provincial focus groups.
- Based on the responses to the Survey and the advice of the Steering Committee, six locations were selected in which to hold focus groups. Two of the groups had participants who frequently went to the casinos, one focus group was with African Canadian seniors and two were held in rural communities. Due to the H1N1 flu, winter weather and a death in

the community, the focus group planned in the First Nations Community did not take place, despite many attempts to do so.

- A Focus Group Facilitators Guide (See Appendix B) was prepared and reviewed by the Project Steering Committee and Provincial Facilitators. A discussion on how to use the Guide took place during a Facilitators' Teleconference.
- Using the Facilitators guide, five Focus Groups were held in October – November 2009.
- Focus Group Reports were prepared by the Provincial Facilitators and sent to the Provincial Coordinator.
- Based on a review of the literature, results from the Survey, results from the Focus Groups and advice/input of the Steering Committee, the Seniors and Gambling Report was prepared, reviewed and distributed.

6.0 Research on Seniors and Gambling

6.1 A Brief History of Gambling in Canada

A review of the history of gambling indicates that there has always existed an attempt to strike a balance between “out-right prohibition and regulation” (Colin S Campbell and Garry J Smith, “Gambling in Canada – From Vice to Disease to Responsibility: A Negotiated History”, *Canadian Bulletin of Medical History*, Vol.20, p.121, 2003). A person who gambled went from being seen as a derelict/immoral criminal to having a problem that needed a government sponsored intervention to a person who needed to be a ‘responsible gambler’. The underlying question has always been the degree to which problem gambling is a pathology and/or the degree to which it can be controlled by one’s free will.

The first legal gambling was limited to race tracks, where it is interesting to note that, among the many arguments given for supporting horse racing, was the need to have ‘horse stocks’ to supply the British military with 800,000 horses for the Boar War (Colin S Campbell and Garry J Smith, “Gambling in Canada – From Vice to Disease to Responsibility: A Negotiated History”, *Canadian Bulletin of Medical History*, Vol.20, p 125, 2003). Despite strong efforts to prohibit gambling, the introduction of ‘games of chance’ in agricultural fairgrounds during annual fairs began to flourish. It is argued these games were needed to promote rural life, to help the farmers and local businessmen and to attract new residents, in other words, to promote economic growth and prosperity in the community. During the Great Depression there were several attempts to introduce lotteries as ways to get funds for good causes, using the model of the Irish Sweepstakes that brought in sizable funds for Irish hospitals.

From early on in Canada, there was a disagreement as to whether bingos and raffles run by non-profit organizations for the purpose of doing good works were gambling or not. These games continued despite the formal prohibition in the Criminal Code. Public hearings began in 1955 to look into liberalizing Canadian laws governing gambling. Citing the fact that prohibition against alcohol did not work but that licensing and regulation had proved effective, changes to the Criminal Code began to be made.

What some histories call the ‘third wave in gambling in North America’, was brought on in 1963 by the introduction of the New Hampshire State Authorized Lottery (Colin S Campbell and Garry J Smith, “Gambling in Canada – From Vice to Disease to Responsibility: A Negotiated History”, *Canadian Bulletin of Medical History*, Vol.20, p 128, 2003). This lottery signaled the beginning of many forms of legal gambling in both the United States and Canada. In 1969, the Criminal Code was amended to facilitate a significant change in the nature and scope of legal gambling in Canada. By 1976, every province had government-run lotteries and, through the influence of casino profits in the US, Western Canada had introduced casinos. In 1985, after the federal government gave the provinces

exclusive control gaming, forms of gambling such as video lottery terminals, computer gaming, and slot machines were legalized in most provinces (video lottery terminals are not legal in BC or ON). Now, as asserted by Azmier and Smith, "...of all current gambling stakeholders, Canadian provincial governments have become the largest beneficiaries of gambling revenues". (Jason Azmier and Gary Smith, *The State of Gambling in Canada: An Inter Provincial Roadmap of Gambling and its Impact*, Calgary: Canada West Foundation 1999)

Gambling was legalized in Nova Scotia in 1976 with the introduction of lottery tickets. Video lottery terminals (VLTs) were legalized and then brought under the control of the government in 1991 (until then they were owned privately). In 1993 the VLTs were restricted to locations with a liquor license. Bingos continued to be operated by non-profit institutions, while horse racing declined in locations and revenues. Despite the fact that a 1993 Nova Scotia government-commissioned poll revealed that 58% of the respondents were opposed to the introduction of casinos and a 50,000 signature anti-casino petition was presented to the government, casinos were legalized and the first casino in Halifax opened in 1995.

The Gaming Control Act of 1995 set up agencies to regulate gambling in NS. The Nova Scotia Gaming Corporation manages the lottery and VLTs and the western-based Great Canadian Gaming Corporation took over ownership and operation of the casinos in 2005. The Alcohol and Gaming Authority regulates and licenses the VLTs, except for those on First Nations Reserves which are administered by the Office of Aboriginal Affairs.

Recently new forms of gambling have been introduced by the Atlantic Lottery Corporation, including PlaySphere, an online website for gambling activities, including bingo (www.playsphere.ca) and 'PlayStar Bingo', which is an electronically linked bingo game that connects to various bingo sites across the province (www.alc.ca/SuperStatBingo.aspx).

In 1998 the Nova Scotia Gaming Foundation was established to fund research and treatment of problem gambling. The purpose of the Nova Scotia Gaming Foundation is to receive, maintain and disburse VLT Problem Gaming Fund monies in furtherance of the purposes set out in the Gaming Control Act, including research or education with respect to gambling and treatment and remediation of the negative affects of gambling.

6.2 Gambling Prevalence and Revenues in Nova Scotia

In the 2007 Adult Gambling Prevalence Study (Nova Scotia Department Health Promotion and Protection, 2008) statistics indicate that although the amount of wagering went up between 2003-2007, the revenues went down. The report said this was because the amount paid out went up, especially out of the revenue from VLTs (up 54.3%), ALC lotteries (up 27.%) and casino gambling (up 17.9%). As a result of the loss in gambling revenues, the net revenue to the province dropped by 4.5% due to “the decline in gambling profitability especially for video lottery”(p. iii). The exceptions were ‘charitable gaming’, bingo and charity tickets, where the rates remained the same.

There appears to be a disagreement between data on gambling coming from various sources in Canada. For example, the Canada Gaming Association data on gaming revenues presented by Statistics Canada (Statistics Canada *Gambling Data: Perspectives on Labour and Income*, September 2008) differs significantly from the data used in the *Canada Gaming Association’s Economic Impacts of the Canada Gaming Industry Study* (2008). The Canadian Gaming Association claims that Statistics Canada excludes “a large part of revenues from charitable and First Nations gaming and this amounts to an underreporting of \$810 million”. (“A Caution Regarding Recent Statistics Canada Gambling Data”, *Everybody Wins*, October 28, 2008). Whatever the accurate numbers are, it is very difficult for the average Nova Scotian to understand the financial picture of the gambling industry. The NS Gaming Corporation puts out ‘Fact Sheets’ that present the financial picture, gambling revenues and expenditures in our province and the amounts that go to ‘the community’, but it may take an accountant to understand what these numbers mean.

It is not easy for the average citizen of Nova Scotia to find out where the money from gambling goes. The Nova Scotia Gaming Corporation states in its Web Site ‘Accountable’ page, that “100% of the revenue generated from gambling in Nova Scotia is given directly back to the province to help pay for programs and services that benefit all Nova Scotians” and the Corporation notes that in 2008-2009, \$152.7 million was used in the communities, including, for example, paying for construction of 15 elementary schools, salaries of almost 2,800 registered nurses and the construction of roads (<http://www.nsgc.ca/moneyGoes.php>).

Some \$7.5 million was used for responsible gambling programs and problem gambling treatment and preventions that reached 41,000 people. Other funds were given to community programs including ‘charitable sector support programs’. The degree to which seniors, seniors’ organizations or senior serving organizations are directly or indirectly helped by these revenues is not clear

The overall statistics in 2009 showed there were 2,234 VLTs in Nova Scotia and an additional 595 on First Nations Reserves, plus 655 in the Halifax Casino and 310 in the Sydney Casino. The VLTs were located with 368 retailers and, in addition, there were 1,230 lottery ticket retailers throughout the province. There are VLTs in 97 Royal Canadian Legions. Some 60% of gambling revenues come from VLTs, 22% from lottery tickets and 18% from Casino Nova Scotia (Nova Scotia Gaming Corporation, *Fact Sheet*, September 2009).

The data indicated that 94% of Nova Scotians had gambled at some time in their lives and 87% had gambled in the survey year of 2007. Of these, 93% said they gambled with no problems. Of those who gambled frequently, playing the VLTs or daily lotteries were at highest risk for having gambling problems. Another study claimed that 50% of the revenue from VLTs in Nova Scotia came from problem gamblers (Peter Nestman, *Briefing Note on Provincial Gaming and Video Lottery Terminals*, Nova Scotia Association of Health Organizations, 2005).

6.3 Gambling Revenues and Seniors' Organizations

There is a great deal of confusing information and conflicting evidence in research on seniors and gambling. This is a part of the greater confusion regarding gambling statistics in Canada as noted above. This issue is beyond the scope of this project, but it is noted for example, that revenues may be larger or smaller than reported and that the community may or may not benefit from revenues to any significant degree.

Research indicates that seniors are conflicted concerning the dependence of seniors' organizations on the revenue from gambling. Gambling has always been a controversial activity and one that is becoming even more controversial as the number of gaming sites and revenues increase with governments and non-profits becoming even more dependent on these activities for financial viability (Jennifer Higgins, "Exploring the politics and policy surrounding senior centre gambling activities", *Journal of Aging Studies* (Vol.19, pp. 85-107, February 2005).

Charities have benefited from the revenues of gambling in Canada for over 100 years. As non-profits have grown to count on gambling revenues as a way to sustain their organizations, government involvement in gambling has continued to grow. One study of charitable gambling trends in Canada states "...revenue trends suggest that increased government involvement in gambling occurs at the expense of charitable involvement in gambling. Simply put, in recent years governments have been "crowding out" charitable gambling" (Jason J. Azmier and Robert Roach, *The Ethics of Charitable Gambling: A Survey*, Canada West Foundation, p. 2, 2000).

Although bingo has been traditionally viewed as a 'charity game', the introduction of SuperStar Bingo may have a significant impact on this game. SuperStar Bingo is played daily in 43 bingo sites in the province. There are two minimum prizes depending on what kind of card is played; \$500 and \$10,000. The

SuperStar site says “This linked bingo game supports local charities throughout Nova Scotia” and that 25% of the revenues from the game are ‘shared’ with participating charities and 47% of revenues go to the prizes, but it does not state where the remaining 28% goes.

The question is whether bingo is morphing into a game that is quite different from the one traditionally played in the province and what effect this new game of bingo will have not only on seniors’ gambling patterns but on the way in which revenue from this form of gaming is managed and distributed. SuperStar Bingo could be the ‘camel’s nose in the tent’, the beginning of a gradual and unavoidable change from a game which is run by and for charities to a game that is managed by and for the government.

Several studies examining the role that revenues from gaming, such as bingo and VLT’s, have on charities, suggest the possible negative impact of dependence on gambling for both the seniors’ organizations and their members (Jennifer Higgins, “Exploring the Politics and Policy Surrounding Senior Center Gambling Activities”, *Journal of Aging Studies*, Vol. 19, pp. 85-107, February 2005; Laurie Paarlberg, et al, “Charitable Bingo in Indiana, Issues and Implications, *Nonprofit Management and Leadership*, Vol. 15, pp. 443-448, June 2005).

At the same time the non-profit sector, including seniors organizations, is beginning to question the ethical implications of charitable involvement in gambling. The Canada West Foundation’s national survey conducted in 2000, looked at this issue. The first half of the two-part report provides an overview of charitable gambling in Canada and ‘an analysis of its pros and cons’. The second half of the report presents charitable gambling issues as seen through the eyes of persons in those organizations. At the end, the report provides recommendations for ‘improving charitable gambling policy in Canada’. Included in its 8 recommendations is the need to ‘establish a long-term funding strategy for charities that reflects the changing nature of gaming policy’. These recommendations specified four reforms: develop gambling grant systems that better reflect charitable sector needs, maintain current levels of gambling funding to the nonprofit sector, reduce the incentive to use charitable gambling and grants and research the effects of gambling on charities. (Jason J. Azmier and Robert Roach, *Gambling in Canada Research Report No 10: The Ethics of Charitable Gambling: A Survey*, Canada West Foundation, December 2000).

Terminal Damage (2008) controversial book about VLTs in Atlantic Canada by Peter McKenna, argues that the quality of life of our regions has been negatively affected by the introduction of these VLT ‘killing machines’. He claims that government has profited from gambling and has therefore kept policies at the ‘symbolic’ rather than ‘substantive’ level and individuals and families have been the losers in more ways than one.

6.4 Prevalence of Gambling Among the Older Population

There is general agreement in research and popular media that seniors are one of the fastest growing groups of gamblers. Between the 1970s and 1990s, the percentage of seniors who recently gambled increased from 20% to 50% (National Council on Problem Gambling Website: www.ncpgambling.org) and most recent data suggests between 65% and 80% of older persons have gambled at least once during the previous year (K. Neufeld, et. al., *Report on Seniors and Gambling in British Columbia: The Canadian Approach*, 199; Jamie Wiebe, *Gambling Behavior and Factors Associated with Problem Gambling Among Older Adults*, University of Manitoba (Dissertation), 2002; W. Thomas, *Report on Senior Citizen Gambling Study for the Whitecourt Area of Alberta*, Alberta Alcohol and Drug Commission, 1996; Jamie Wiebe, and Brian Cox, "Problem and Probably Pathological Gambling Among Older Adults Assessed by the SOS-R", *Journal of Gambling Studies*, Vol. 21, June 2005).

Trying to determine the degree to which gambling is a problem among seniors is not an easy task. A review of the literature on seniors and gambling (Brenda Munro, et. al., *Seniors Who Gamble: A Summary Review of the Literature*, Alberta Gaming Foundation, 2003) presents 153 annotated studies that indicated many gaps in the knowledge and need for further research. Research is generally divided into those who find gambling is a safe, benign and even healthy activity for seniors or those who think it is or is becoming a serious problem for older adults. Most of the research on the 'positive side' comes from prevalence studies, research funded by or presented by gaming related bodies.

Although prevalence studies and other research indicate that the risk of problem gambling is much lower among older adults, this may not be the case. Inconclusive, misleading or inaccurate data on the gambling patterns of older adults may be due to the fact that the "research tools commonly being used to identify problem gambling may not be sensitive to the types of gambling problems or gambling effects that seniors are likely to experience". (*Alcohol and Seniors: Gambling*, October 26 2009, www.agingincanada.ca; Jamie Wiebe and Brian Cox, "Problem and Probable Pathological Gambling Among Older Adults Assessed by the SOGS-R", *Journal of Gambling Studies*, Vol. 21:2, June 2005; "Seniors and Problem Gambling", *B.C. Partnership for Responsible Gambling* October, www.bcresponsiblegambling.ca)

The South Oaks Gambling Screen-Revised (SOGS-R) is the screening tool most commonly criticized but other tools such as the Canadian Problem Gambling Index (GPGI) are also criticized as having problems that limit their value for gathering data on seniors gambling behaviour. It is suggested that other screening tools such as the Windsor Problem Gambling Screen developed for screening persons over 55 may provide more valuable information (Joan Norris and Joseph Tindale, "The Meaning of Gambling Among Ontario Seniors in Small and Rural Communities", Ontario Problem Research Centre, 2003).

The main reasons why current research strategies/methodologies aimed at getting information on the gambling patterns of seniors are problematic are that seniors either do not admit they may be at risk for a gambling problem or have one already, or, if they do recognize the problem they usually will not seek help. Reasons range from the reluctance of this generation to admit or discuss personal problems with others, distrust of going to outsiders for help or a perceived or real lack of appropriate services/programs in their communities.

An example of the conflicting data is found in the *2007 Adult Gambling Prevalence Study* (Nova Scotia Department Health Promotion and Protection, p. 54, 2008). The Report states, "There is a strong relationship between age and risk for gambling problems; risk for gambling problems declined with age". The study also notes that gambling problems are highest among those under 35 and only adults over 65 had significantly lower rates of gambling problems". Yet the report also states that those over 65 had the same regular slot machine playing patterns as all age categories, including those 19-25 year olds" (p. 12) and they also had the same levels of participation as adults aged 25-64 in casino gambling over the past year" (p. 12). Thus seniors have the same gambling patterns as other age groups in two major areas of gambling, regular slots and casino, but are still at lowest risk for problems. Generally, if different groups have similar behaviour patterns, it is hard to see the logic of one group having results different from the rest.

The *2007 Adult Prevalence Study* lists the factors that may lead to problem gambling such as lower levels of education, low income, being single and having physical disabilities, but uses these factors to explore gambling patterns for younger not older populations (see ***Seniors and Gambling***, p. 12 for further discussion of this disconnect).

6.5 Why Seniors Gamble

There are many studies that focus on why seniors gamble and the factors that influence their gambling. Most of their conclusions were also reflected in our survey and focus group findings. In general, the reason given for why seniors gamble is the opportunity to socialize, to be entertained and to have fun. Seniors also say they gamble to support charitable causes, to relieve boredom, to escape loneliness and loss, and to either make money or hope to make money, the fantasy being part of the appeal. As well, they are attracted to the comfortable, safe atmosphere of the bingo hall or the casino, or attracted to the exciting atmosphere and 'glitter' of the casino, or to escape problems and go to a place where they would not be judged and it is acceptable to go 'alone.' (Joni Vander Vilt, et.al., "Gambling Participation Among Older Adults: A Longitudinal Community Study", *Journal of Gambling Studies*, Vol. 20, December 2004, p 373, Natalie Taylor, "Gambling with Peace of Mind", *Windsor Star*, July 20, 2001, K. Neufeld and W.J. Burke, *Aging, Money and Life Satisfaction: Aspects of Financial Gerontology*, pp 225-41, New York: Springer Publishing Company, 1992).

Another reason why seniors may gamble, particularly those with lower literacy rates or those for whom English is not a first language, is that it is an activity where language is not a barrier – they can gamble comfortably.

External factors which influence gambling included promotions offered to seniors, easy access to gaming sites, friends or family asking them to go, perks at gambling facilities such as meals and free tokens, and advertising in the media.

6.6 Seniors and Gambling Problems: A Low Risk?

It is generally reported that seniors are at low risk for being problem gamblers. Most studies state that about 2% of seniors are problem gamblers (*Seniors and Gambling*, Alberta Alcohol and Drug Abuse Commission, 2001; *2007 Adult Gambling Prevalence Study*, Nova Scotia Health Promotion and Protection, 2007).

Over and over again this research states that seniors gamble for ‘social reasons’, not to ‘make money’. As well, it is asserted that seniors have lived through difficult economic times (including the Great Depression and recessions), are aware that they have to live on limited incomes, and they know their limits. Cultural reasons are also given for their low risk. They did not grow up in a culture that either condoned or permitted gambling, so they did not have opportunities when younger to gamble in places such as casinos or on video lottery terminals. Finally, the games they enjoyed, such as bingos and raffles, were played for the good of the community and involved small, manageable amounts of money.

Many studies describe gambling as a ‘safe recreational activity for seniors’. It is argued that older people gamble safely and do not want to put their retirement or their children’s inheritance in danger. One example, cited often in gambling research, is a University of Guelph study of 2,200 rural seniors, of whom 80% were regular gamblers. The study found “only 6% were moderate risk gamblers and 1% were problem gamblers” and “in contrast to concerned research reports about gambling and seniors, the vast majority in this sample of older people enjoyed gambling as recreation, recognized its dangers, and had largely effective attitudes and behaviors to minimize problem gambling risk” (Joseph Tindale and Jean Norris, *The Meaning of Gambling among Ontario Seniors in Small and Rural Communities*, Ontario Problem Gambling Research Centre, p. 32, 2003, also at www.gamblingresearch.org).

Research, often by gaming-related research organizations, describes the many positive aspects of gambling for seniors. In a study of bingo, Dr. Sandy O’Brien Cousins found that the ‘bingo experience’ contributed to a ‘good old age – health, wellness and quality of life’. She suggests that bingo is popular, especially for older females with physical disabilities, because they have few choices of where to go where they can have fun. She acknowledges a few may be problem gamblers but ‘on the balance’ her research indicates bingo is a good thing for seniors. (Dr. Sandy O’Brien Cousins, “The Bingo Experience: Is it Really

Negative”, *Research Reveals: An Update On Gambling Research in Alberta*, (Vol. 2, April-May 2003). Another study, focused on casinos, “finds no evidence that casino gambling threatens the [financial or physical] wellbeing [of seniors]” (Janet Hope and Linda Havir, “You bet they’re having fun! Older Americans and Casino Gambling”, Vol. 16, pp 177-197, *Journal of Aging Studies*, May 2002). She suggests that any assumptions that seniors may have problems come as a result of ‘public concerns and media images that may be based on socially constructed assumptions and fear’. It is interesting to note that most of the sample in this study did not approve of gambling and would not be disappointed if the ‘casinos disappear’.

Many studies indicate that while the current generation of older adults may not be at risk for serious gambling problems, this may not be true of Baby Boomers. They have grown up with gambling and therefore have different attitudes towards this activity. They also have more disposable income and may be greater risk takers. Participants in most of the focus groups also stated this opinion.

There were several studies that focus on bingo. Generally it is seen as either a relatively harmless way to pass the time or a way of life that has existed in many communities for a long time. A few studies indicate it is either changing (Laurie Paarlberb, et. al., “Charitable Bingo in Indiana: Issues and Implications”, *Nonprofit Management and Leadership*, Vol. 15, pp. 433-448, June 2005)) or that those who participate in bingo are more likely than those who participate in other activities in seniors centers to have a lifetime experience of gambling (George T Ladd et al., “Gambling Participation and Problems Among Older Adults”, *Journal of Psychiatry and Neurology*, Vol. 16, pp. 172-177, 2003).

Even those who find in their research that the number of seniors with gambling problems is not ‘significant’ acknowledge the fact that the suffering for an older adult with a problem can be devastating. With little if any opportunity to recoup financial losses, their health and well-being is even more at risk because of their age and they could become increasingly socially isolated due to the sense of shame that causes them to hide their problems from friends and family.

6.7 Seniors and Gambling Problems: A High Risk?

Although prevalence studies and several other studies indicate seniors are at low risk for gambling problems, other research, both by academics and in the media, as well as information gained from the surveys and focus groups in this project, suggest that gambling may be a ‘hidden problem among seniors’. This comes as no surprise to many researchers, since most adults gamble and seniors are ‘adults’. It is an activity that is particularly attractive for older persons - “gambling suits the needs of older adults very well – gambling opportunities are close to home or bus trips to gambling places are provided. Casino, bingo halls, lottery kiosks, VLT sites tend to be in buildings that are on one level ...and older adults can go any time of day or night or any day of the year. The games are easy to learn and an older adult can interact with other people as much or as little as they like and still feel comfortable” (“Older Adults and Gambling”, Addictions

Foundation of Manitoba Website: www.afm.mb.ca, 2005). Accessibility provided by new types of transportation (casino buses) is an additional attraction.

At least 68% of persons over 65 frequently participate in some games of chance according to most Canadian studies as well as the information from our survey and focus groups. This could be due to a combination of factors, including the growing number of seniors combined with the increasing opportunities to gamble and the change in attitudes among the senior population towards gambling. Some studies indicate that the number of seniors with at least one symptom of problem gambling has grown in the past decade. A study in New Jersey found that 23% of New Jersey residents over 55 had at least one symptom (“Seniors May be at Risk for Gambling Problems”, www.ncpgambling.com).

Research also indicates that gambling among seniors may be changing because gaming is so much more acceptable than it used to be and there are also so many more opportunities to gamble. Also the places to gamble are accessible or made accessible to the older adult. As gambling evolves in their minds from being a vice to being entertainment, it may become increasingly acceptable to older adults. While the *Alberta Seniors and Gambling Study* (Alberta Alcohol and Drug Abuse Commission, Government of Alberta, 2001) stated that less than 2% of seniors are problem or pathological gamblers (as measured by the SOGS-R), 83% of those surveyed believed that gambling could become an addiction for seniors, like smoking, alcoholism or drug use. Another study suggested that an estimated 8% of seniors might have a gambling addiction (Helena Katz, “Casino Excitement Attracts the Elderly”, www.mcgill.ca, 2009). It is no longer accepted by most researchers that age protects people from gambling problems. This finding in earlier research may be inaccurate because it could be based on the small numbers of older people who seek help and prevalence studies that tend to report low levels of current and past gambling problems (Sean Sullivan, “A New Retirement Hazard”, www.gamblingwatch.org.nz).

Studies indicate that gambling activity is distributed more or less evenly among age cohorts, but suggest new patterns are beginning to form, with the youngest and oldest age groups having the strongest likelihood of gambling more intensively, especially in Nova Scotia (Martha MacDonald, John L. McMullan and David C. Perrier, “Gambling Households in Canada”, *Journal of Gambling Studies*, Vol. 20, September 2004). In other words, research does indicate that gambling may be or is becoming a problem for older adults in Nova Scotia.

Although data in the 2007 Adult Gambling Prevalence Study indicates that seniors appear to be the least likely to have gambling problems ('appear' because many numbers are not statistically significant), the factors the survey cites as precipitating problem gambling, such as lower levels of education and income, single status – mostly female and having disabilities, seem to be more highly reflected in the older population. Added to these 'life factors' are factors specific to seniors such as:

- Social isolation
- Loss of family and friends through death or relocation
- Care giving to adult children or spouses
- Possible reduction in capacity to make decisions concerning amount one can afford to gamble
- Experiencing financial losses or decreasing income with no hope for any change

Also there are medical conditions that could affect gambling behavior, including drugs given to persons with Parkinson's Disease that may 'cause' gambling problems ("Class Action Lawsuit Links Problem Gambling with Parkinson's Drug", *Touchpoint*, February 19, 2010). Since most people with this disease are older, this could be another reason why some older persons could be more at risk.

Another factor making seniors more vulnerable is the deliberate effort to attract seniors to many of the gambling venues. Promotions are aimed at older adults in the media, on the internet, in mail outs, in senior centres and many locations in the community, enticing them to participate in gambling activities.

Research indicates that the greatest risk for problem gambling is among older adults who are frequent gamblers and most have gambled throughout their lives. These problem gamblers were also more likely to have health and psychosocial problems compared to older adults who either did not gamble or gambled infrequently (Robert H. Pietrzak, et. al., "Health and Psychosocial Correlates of Disordered Gambling in Older Adults", *American Journal of Geriatric Psychiatry* (Vol. 13, June 2005; Alesia N. Burge, et. al., "Age of Gambling Initiation and Severity of Gambling and Health Problems Among Older Adult Problem Gamblers", *American Psychiatric Association*, December 2004). Although there is disagreement over whether there is such a thing as 'an addictive personality', if it is accurate to say that a person had an addictive personality, then it could be said that once one is an addict, he/she will always be an addict. Such a conclusion implies that addictions such as alcoholism, drug abuse and gambling would be expected continue into old age. The difference is that many older adults in Nova Scotia who could have a gambling addiction may not have had the time or opportunities to express this behaviour when younger. Today, they now have both.

It is often stated that 'seniors know how to live within their means'. Were this assumption to be inaccurate to any degree, then the risk to seniors' economic wellbeing is serious. In Alberta it was reported that VLTs and Casino gambling are partly to blame for the huge 15% bankruptcy rate among seniors ("Seniors and Gambling: The Losses and Costs of Gaming", www.communityherald.ca, May 21, 2009). Since a loss of income affects all aspects of a persons well being including physical, mental and emotional, the risks are manifold. Seniors also experience many losses and face their own mortality. Coping with all the downsides of aging may be relieved even temporarily by gambling. Research indicates that, "these factors may predispose a senior to the hypnotic, anaesthetizing effect of gambling" ("Seniors and Gambling: The Losses and Costs of Gaming", www.communityherald.ca, May 21 2009).

A report in 2002 on seniors and gambling (Lynn Langille and Eric Hemhill, *Seniors and Gambling Project*, Dalhousie University, funded by Nova Scotia Gaming Foundation, p. 47, February 2002) presented the results of a survey of Nova Scotia seniors (1,314) and 13 focus groups (91 senior participants). The focus group findings present mixed views of gambling. Of the 91 focus group participants, 21 felt gambling was not a problem for seniors, 12 felt it could be a problem and 53 thought it was or was becoming a significant problem for seniors. In the surveys sent to seniors in the Halifax Regional Municipality, 64% of the respondents thought that gambling was a problem for some seniors.

Recently there have been several articles in the media describing problem gambling by seniors. An article in the *Detroit Free Press* described the suicide of a senior caused by a gambling addiction. The article suggested that this gives 'fresh evidence' that gambling addictions are growing amongst the older population. It cited one study by Wayne State University that suggests that 18% of Detroiters older than 60 who frequently went to the casino showed signs of being addicted to gambling. The article argued that unless this problem is faced and seniors with gambling addictions are identified early, it may be too late for many because of limited ways to recoup income, declining mental and physical health and loss of social support networks. (Heather Newman, "Addiction to Gambling Among Seniors is on the Rise", *Detroit Free Press*, June 7, 2008). A similar tale was told in *The Globe and Mail* in which a 76 year old man hung himself because of his gambling problem. In the article the daughter blamed the Casino because no one there 'red-flagged' her father's problem. This article was part of a series on the growing number of gambling related suicides in Canada ("A Family Man's Tragic Transformation", *The Globe and Mail*. pp. 10-11, Saturday October 3, 2009).

According to a research study which compared 1,601 self-described younger and older gamblers in Australia, older gamblers who ask casinos to bar them from returning to the gambling casino are three to four times more likely to do so [to ask to be barred] because they fear they will kill themselves if they don't stop betting" (Lia Nower and Alex Blaszczynski, "Aging: Gambling May Increase Suicide Risk in Older People", *Psychology and Aging* Vol. 23:2, September

2008). This study implies that older problem gamblers could be as likely or more likely to commit suicide as younger problem gamblers.

Therefore, the factors are there that indicate a gambling problem; the barriers that might have prevented seniors from becoming involved in gambling activities have to a great extent been removed, and the encouragements to go to gambling venues aimed at seniors continue to grow. All these factors indicate there could be a hidden problem among older Nova Scotians.

6.8 Prevention and Treatment for Seniors with Gambling Problems

As noted earlier, the first challenge is to find ways to identify and reach seniors who are either at risk or who have gambling problems. Several new approaches have been suggested. The University of Windsor conducted a study that demonstrated that a 'Participatory Action Research Approach' may be more effective in developing community-based research and prevention programs for seniors and that screening tools used to identify problem gamblers in the younger population may not be as useful with the older population. This approach would involve observation, focus groups and personal interviews rather than surveys that are sent by mail/e-mail or over the telephone.

Analysis of services and programs designed to provide appropriate information and services to seniors concerning gambling suggest that a wide range of strategies need to be used. Research indicates that peer support (seniors helping other seniors) would have the most influence on those with a gambling problem or those at risk for a gambling problem. It is also suggested that "service providers address the unique nature and impact of problem gambling within this population... recognize the needs, view and concerns of seniors, and receive input from individuals within this age group in the development of programs in order to increase the likelihood of participation and success" (Michelle MacIntyre, "Obstacles Preventing Seniors from Obtaining Assistance", Dialogue, Nova Scotia Gaming Foundation, Vol.2, p5, April 2008).

There are workshops and presentations about problem gambling. Several Canadian communities provide workshops and counseling for seniors with gambling problems (Agewise in Hamilton, Ontario; Seniors and Gambling Prevention and Education, Manitoba; Older Adult Gambling Program, Thunder Bay, Ontario; Lifestyle Enrichment for Older Adults, Ottawa, Ontario; Community Outreach Programs in Addictions, Toronto, Ontario). One example of seniors helping seniors is the 'Senior Peer Mentoring Program for Seniors with Gambling Problems' in Kelowna, BC (www.kelowna.cioc.ca).

Services and programs designed specifically for older adults who have gambling problems are increasing in number. Research, articles in the media and results from focus groups and surveys of seniors in Canada suggest that friends or other seniors are the "most likely sources of support" (Lynn Langille and Eric Hamphill, Seniors and Gambling Project, Dalhousie University, Funded by Nova Scotia Gaming Foundation, p. 29, February 2002).

Materials designed to help prevent or treat gambling problems among seniors are available, such as *Gambling Away the Golden Years: Problem Gambling Kit* and *In Search of a Balance Educational Kit*. Most of this material is from the late 1990s and from the United States. New Canadian materials address reducing the gambling risks among seniors by promoting alternative activities, such as encouraging 'wellness activities' (Colchester East Hants 'Wager on Wellness Brochure').

Several studies suggest that a public health approach is valuable in designing and delivering addiction programs and services for seniors. A public health perspective focuses on the person and the community and includes participation of all the stakeholders, including seniors. (Best Advice or Preventing Gambling Problems in Nova Scotia, Nova Scotia Health Promotion and Protection, Addiction Services, November 2003) This approach should be tailored to suit local circumstances and conditions of the community and include strategies which "target both the persons experiencing gambling problems and the circumstances which led to these problems" (David Marshal, "Gambling as a public health issue: The critical role of the local environment", *Journal of Gambling Issues*, Issue 23, June 2003).

7.0 Survey Findings

Based on the input of the Steering Committee, questions were developed for the Survey on Seniors and Gambling that was sent to 190 leaders in seniors' organizations and staff who work in senior serving organizations in Nova Scotia using a survey-hosting web site, Surveymonkey.com. There were 51 responses to the surveys. The results are presented below.

1. Which of the following gambling activities have you noticed seniors taking part? (See Survey for a list of activities, Appendix A)

Responses: Of the 51 responses, bingo was cited by 47, scratch or lottery tickets was cited by 44 and raffle tickets/draws was cited by 36 of the respondents. VLT's (30), slot machines at the Casinos (25) and card games (25) were also described as popular with seniors. Respondents listed more than one gambling activity but it appears that bingo, scratch/lottery tickets, and charity raffles were gambling activities in which seniors participated the most frequently, followed by VLTs and slot machines at the casinos.

2. List some of the reasons you think seniors might gamble.

The main reasons given why respondents felt that seniors gamble were:

- Socialization.
- Hope of financial gain.
- Entertainment.
- Relief from boredom.
- Support a good cause such as a charity.
- To forget problems.

3. Do you think people gamble more or less after retiring?

Most replied that they thought seniors gambled more (28 of the 48 respondents), some though they gambled the same (16) and a few thought they gambled less (9).

One of those who provided additional comments said "Some of our clients with disposable income think nothing of spending \$200 for an evening's entertainment at the casino 2 or 3 times a week, not including the price of food or drinks". One said they saw women going to bingo more frequently after being widowed. Time was cited as a major reason why the participation rates increased after retirement.

4. What would be a sign that a senior might be struggling with gambling?

Respondents described the signs that a senior might be struggling with gambling:

- Many comments were made concerning not having enough money for groceries, medication or other bills.
- Defensiveness about the way they spend money on gambling, with seniors saying they win more than they lose or they will make up the loss in the near future.
- Respondents see seniors at the Legion whom they know do not have money to spend on the VLTs.
- Respondents see the same seniors at the VLTs day after day.
- They observed preoccupation about gambling and juggling bills to have more money for gambling.
- Eventually they see that health becomes a factor (emotional and physical) when the gambling becomes a 'lifestyle' and seniors arrange their day around gambling.
- Seniors borrow money from family or friends.
- Several respondents described 'depression', increasing isolation from friends and family, and growing agitation, especially when the seniors are worried about getting their lottery ticket or getting to the casino.
- A change in appearance (sloppier, agitation) is seen as a sign that the senior might have a gambling problem.
- Going to the food bank was a concrete sign that some spent money on gambling rather than food or the basics.

5. Approximately how many seniors in your club or who receive services from your organization do you think might have financial issues due to gambling?

Respondents said it was difficult to know how many seniors had financial problems due to gambling, but indicated that either "very few" (15 of the 47 respondents) or 'some' (15) had problems. In their comments, they assumed that those with the least income would have the greatest problems and would suffer the most, but there were several reasons why those with problems could not be 'quantified'. Respondents indicated that seniors are very reluctant to admit they have a problem with gambling. They may not want to show 'by action', that is by attending meetings or information sessions on problem gambling or by talking to others that they have a problem. Some do speak privately to service providers or volunteers.

6. Are you aware of any situations where immediate family members of seniors, such as children, gamble?

More than half of the respondents (26 of 50) were aware of situations in which family members of seniors gambled, 18 were unsure or did not know and 6 said they did not know of this situation.

7. If you answered 'Yes' to question 6, do you know if this person or persons ever borrowed money from seniors to gamble?

About half of the 34 respondents said that they were aware of situations in which immediate family members, such as children, borrowed money to gamble (16), but many were unsure or did not know (14). Of the 5 who gave additional comments, examples were given of seniors who gave money to caregivers, such as children who were 'constantly borrowing money for this purpose'. The respondents described how they provided seniors affected by this problem with information and sources of support.

8. Are you aware of promotions aimed at getting seniors to gamble, such as a bus trip to a casino along with free meals?

39 of the 51 respondents said they were aware of promotions aimed at seniors and 12 were not aware of these promotions.

9. If you answered 'Yes' to the above questions, please describe briefly.

Most of the 51 respondents were generally aware of promotions to seniors (39), such as local bus trips provided by the casinos (30), free entertainment at casinos (24), advertisements including websites and telephone promotions (12), mail promotions (11), TV commercials (8) and in-store commercials (4).

10. Regarding the above question, have any seniors in your club or ones who receive service from your organization ever participated in a promotion?

Most of the 48 respondents were unsure or did not know (32), some said they knew of seniors who participated in gambling promotions (11) and 3 did not know of any seniors in their organizations who participated in a promotion.

11. Do you consider a form of gambling to be the main leisure activity for seniors?

Of the 48 respondents, 21 did not think gambling was main form of leisure for seniors, but 11 thought that it was (17 were unsure or did not know). In the additional comments of 10 respondents, it was noted that for those living closest to casinos, gambling was a leisure activity and seniors who played bingo saw it as a social activity, not a gambling activity. For some seniors, mainly “a substantial number of lonely, isolated widows” gambling was a ‘main’ leisure activity.

12. Do you feel seniors would gamble less if there were more leisure activities made available for them?

Based on the comments made by respondents, several felt this was a difficult question to answer. Those that agreed that more leisure activities might affect gambling participation rates (22 of the 51) said they needed more money for activities that would attract seniors and promote new friendships. Those who felt additional activities would not make a difference (8 of 51) provided several reasons. First, many seniors are not ‘participants’ and would rather not be involved in public or community activities, so additional services would not mean anything to them. Others felt there were enough things for seniors to do in the community. About half of the respondents were not sure or did not know (21).

13. Are you aware of the Problem Gambling Help Line, administered by Nova Scotia Health Promotion and Protection?

Most of the 51 respondents were aware of this service (45).

14. Do you think seniors are aware of the Problem Gambling Help Line?

Only 14 of the 51 respondents said that seniors seemed to be aware of the Help Line. Most were unsure (24) or said that seniors were not aware of the Help Line (12). In the additional comments the respondents said their organizations did promote the Help Line in various ways such as in Health Fairs, Workshops, on bulletin boards, in newsletters and brochures. They also thought seniors may not become aware of this service until they ‘have lost so much’ they know they have a problem. Even then, several said that seniors would be reluctant to either categorize themselves as problem gamblers or seek out help if they did. Concern about privacy issues and reluctance to go to ‘government’ for help with problems were two reasons given why seniors with gambling problems would be unlikely to use services such as the Help Line.

15. Focus groups will be held in the fall to help better understand the gambling habits of Nova Scotia seniors. Would you or your organization be potentially willing to help us with a focus group in your community?

Of the 51 respondents 15 said they would and 25 were unsure or did not know. Only 9 said would or could not help.

Note: Some respondents indicated that there might be problems holding focus groups related to gambling problems because attempts to do so by some of the respondents' organizations were not successful. For example, one organization had organized a workshop on gambling and addictions for seniors in their area and only 3 people showed up, whereas workshops on other topics would usually bring in over 25 seniors.

8.0 Focus Group Findings

Based on the responses to the Survey distributed to seniors' organizations in the summer and the advice of the Project Steering Committee six locations were selected in which to hold focus groups. As indicated in the proposal for the project, two of the groups would target seniors who go to the casinos (in Halifax and Sydney), one focus group would include African-Nova Scotian seniors, and one for seniors in First Nations communities. It was also suggested that focus groups be held in East Hants, Antigonish, Digby or the Valley region. Since there were funds for only 6 focus groups, East Hants and Clementsport were selected because interest in holding a focus group was expressed in the survey by respondents in these places.

8.1 Profiles of the Focus Groups and Participants

Six locations were identified for focus groups and five focus groups took place in the fall of 2009. Over 40 participants, most of them over 65 and female, attended focus groups in Elmsdale, Sackville, Sydney, East Preston and Clementsport. As described in our proposal to the Nova Scotia Gaming Foundation, the project focused on 5 target groups, African-Nova Scotian Seniors (North Preston), seniors who went to casinos in Halifax (Sackville), seniors who went to casinos in Sydney (Sydney), and seniors in rural areas (Clementsport). We planned for a focus group that would include First Nations seniors, but the H1N1 flu, weather and a death in the community in addition to time constraints meant we were unable to meet with this target group.

In the focus groups, many of the participants knew each other and were comfortable discussing the questions. Most of the participants came from the local communities in which the focus group was held. All but a few of the participants were over 65. There were 8 men and 32 women. Most were members of seniors' organizations or community groups. With a couple of exceptions, all were involved in many community activities. With only a few exceptions, all either had been involved or were involved in gambling activities. The ones who were not currently involved either were unable to do so because of family responsibilities (1), lack of transportation (1), opposition to gambling (1) or problems with gambling (4).

8.2 Description of Leisure Activities

Seniors described a wide variety of leisure activities. Most of the activities were social, including volunteering, membership in clubs, participation in church and family activities, playing cards, and other games. Some social activities were also physical such as bowling, dancing, hiking/walking, bird-watching, going to the gym and swimming. Other activities may or may not have involved others, such as piano playing, knitting, building things, cooking and crafts.

Other leisure activities were more solitary, such as reading, crosswords, making puzzles, gardening and 'washing and ironing'. A computer could be used to play games alone/playing against the computer, such as playing bridge or Texas Holdem, or it could be used to play games with others on-line (not for money) or communicating with friends and family by e-mail.

Most of the activities listed were 'social,' in that they involved participants either in interpersonal contact or contact through the computer. This should be expected since most of the participants were 'joiners'. (Note: a criticism of this and other focus groups or information sessions was that it attracts mostly seniors who are joiners). A common comment was "I'm never home".

In all but one of the focus groups, seniors listed games of chance as one of their leisure activities. In these focus groups all mentioned bingo and playing scratch or lottery tickets as part of their leisure activities and they described going to the casino. This was particularly true in the focus groups in which the target group was meant to include casino 'goers', as in Sackville and Sydney.

8.3 Participating in Games of Chance

When prompted by the question concerning participating in games of chance, everyone described participating in these activities, either currently or in the past. Most had purchased lottery or scratch tickets, charity or raffle tickets, played bingo and had gone to the casino (either in Halifax, Sydney, in other provinces or on vacation (cruises or trips to the U.S.)).

All of the participants had purchased tickets for lotteries, raffles or charities and the majority had participated in bingos. About three quarters said they had gone to the casinos. In five of the focus groups, 8-12 had played on VLTs in the Legions or other community locations. Several played card or board games for small winnings and 3-4 had gone or were going to the horse races where they placed small bets.

8.4 Social Aspect of Games of Chance

In their initial discussions, almost everyone described their participation in games of chance as a social activity involving others. In fact, this was given as one of the main reasons for involvement in these games – 'I only go to bingo because it is a social event'. Others also saw going to the casino as a social activity, but only one person saw the VLTs in any way being a social activity. This participant frequently went to the Legion or Dooley's to play the VLTs and usually went with others.

Yet it was interesting to note that many saw differences not just between different types of gaming but also within the specific type of gaming itself. For example, bingo was described overwhelmingly as a social activity and not a 'serious' game because it is an older game with a long tradition in the community. Others said bingo is not all 'social' and that, once the game began, talking was

discouraged. They also gave examples of how the unwritten rules of bingo affected social interaction. They felt that it is changing into a much more serious game, and for many becoming a serious form of gambling (from 'soft' gaming to 'hard' gaming). They described how those playing bingo often played at the same location at the same time on the same day, and it was not a good thing to get in the way of long standing practices. Two similar examples were given. In one bingo a 'new lady' won the 'cookie jar' and the 'regulars' wanted the rules changed to prevent new people from winning – "She put no money in [from not winning on previous nights as the pot rolled over] and could have won \$300 with a \$.25 card, which was not fair". In another story, an outsider came into a bingo and won a large jackpot and there was almost a serious fight. Many were mad at the caller and it was quite a loud night. One senior who attended this bingo said, "Lots of unhappiness if the regulars don't get the money." Many told of how seriously seniors took the game, how the numbers going to many of the bingo halls were growing and that seniors were putting much more money into playing.

Another way that bingo was perceived as changing from a merely social activity to a form of 'serious' gambling was with the introduction of the on-line bingo game "PlaySphere" to the 'local' bingo games. Some compared this new type of bingo unflatteringly to the old community based church hall bingos. In the beginning, even these bingos were considered a 'vice' and a form of gambling, but this gradually changed into bingo becoming an acceptable social activity. Now it may be going in the other direction, where it is once again considered 'gambling' and viewed more negatively.

Also in the casinos, which most again described as a social activity, social interaction decreased as playing the slots or other games began. The social interaction took place before, during the breaks and after, but it was emphasized as very important. The trip to the casino on the bus, going to the casino with friends and family were 'social events'.

As one senior put it, "gambling permeates the leisure world of seniors, on land or on sea". She was talking about the prevalence of casinos and other gaming places in all cities where seniors live and on every cruise ship in the world.

8.5 Differences Between Games of Chance

There were quite vocal opinions expressed concerning different games of chance. A few were strongly against the casinos and most were very concerned about the use of VLTs by seniors and others in their communities.

There were interesting discussions concerning bingo. Most felt it had always been a social community activity that benefited not only those attending but also seniors' groups themselves because of the funds that bingo brought in. As noted above, many thought bingo was evolving into a different game, one that could be as potentially dangerous to persons susceptible to having gambling problems as other games like VLTs and slots.

Generally, participants perceived that there was a clear difference between the various games of chance, with bingo being primarily a social activity, one that has been around for a long time and which the community relies on to support local causes. This is also true of community lotteries or raffles which most felt benefited the community and had little threat to individuals. Some said they were “very enthusiastic bingo players” and said “bingo is not a high-priced affair like the VLTs”. In other words, it was a safe social activity that benefited the person and the community. One participant cited a report that showed bingo was good for the ‘brain’.

On the other hand, there was quite a bit of difference of opinion on casinos. Many felt that it was a social outing for seniors and that seniors knew their limits when it came to playing the various machines. Others felt that seniors were losing more at the casinos than is believed and all one has to do is to look around the casinos to see how many seniors are present to realize that these places could present a real threat to seniors’ financial security and physical and mental health.

It was also suggested that all games of chance are the same, it depends on your reason for playing. As one participant said, “If you go in there with your money, you take a chance with winning or losing and come back a little poorer than you left. You think you’ve learned your lesson after losing but it’s like you get addicted to it and you just keep going, as you have the thought at the back of your head that you might win the next time. Whether you go to the casino or play scratch tickets, they are all games of chance”.

It also appears in analyzing the reports from the focus groups that many seniors associated the casinos and VLTs (and scratch tickets) with the government, but saw raffles and bingo as more of a community and social activity.

8.6 Spending Time and Money on Gambling Before and After Retirement

With only a couple of exceptions, seniors said they spent at least as much time, if not more, on games of chance since retirement. The two main reasons are that they have more time and that there are more opportunities. Since they have more time, they go to the Senior Centres, the Legion and other places during the day. Also, when they were younger, there were not as many opportunities to play games of chance. Casinos, many lotteries and raffle tickets were either not around or not as prolific before they retired. As one senior stated, “We did not get into the habit of gambling. There were no casinos, few lottery tickets, and no computers to play games on line. Bingo was a community affair and VLTs were just beginning to develop”.

With some exceptions, seniors all said they knew their limits or spent very little in the first place. Many only bought the occasional lottery ticket and went to bingo or the casino rarely, so this was not a problem for them. But there were many stories about other seniors who lost everything after retirement. With more time and a limited income, the impact on senior's lives, social, physical, mental and financial, was often devastating.

8.7 Participation in Casinos

All of the participants had gone to the casino, though some of them only once or twice. In two of the focus groups, all had gone to the casinos and most went frequently, especially when the buses took them from the Seniors' Centres to the Casinos. When the Casino decided in the fall to discontinue the bus service from Sackville, the seniors were disappointed and wondered why this happened. They were told the Casino was not making enough money off this venture, but doubt was expressed concerning this explanation. Seniors thought that the casino did not know exactly how much the seniors were spending because many did not use their 'user cards' at the casino or leave them there when leaving, thus there was no way of tracking how much individual seniors really were spending. It was known that both casinos in the province were having a downturn in revenue, but cutting out the bus service was not going to make the situation better, they suggested.

Two had very strong feelings against the casino and many were not sure that casinos were good for our province.

8.8 Participation in VLTs

Although most seniors said they never played VLTs, some said they did. One said "I like to gamble and play when I get the urge and play VLTs. I am lucky. I can't stand to go where people stink (convenience stores with VLTs) so I go to the casino, 'one-hourish' distance away". Another told of losing everything at the VLTs and gave an example of a senior who spent over \$1,000 in two nights at the Legion. Several told stories of going to either Dooleys or the Legion to play VLT's and said 'Lots of seniors play the VLTs at Dooleys, to try to get their bonus points'.

8.9 Participation in Bingo

Almost all the participants had played bingo. Most perceived it as a social activity but others said that they felt more and more seniors were spending more time and more money on the game. Several participants talked about the 'new bingo' that was increasingly popular in the bingo halls in the province. They told of the sign that went up on the screen before the game that said 'Know Your Limits!', but most people will not remember what the sign said if they were asked shortly after. One of the seniors described the new game, run by the Atlantic Lottery, and said she thought this would change the game of bingo forever and not for the better.

8.10 Reasons for Participating in Games of Chance

The main reasons given why seniors played games of chance were the need for more social interaction and for something to do. One senior summed up the reasons given by many, "They gamble out of boredom and the need for social contact". Some said they used to take their parents to bingo to help them get out and be with others, and now they are going for the same reasons themselves. Many went with friends as an 'outing'. It is a form of entertainment, provided a chance to have fun and let you feel younger.

Casinos are another 'fun place' where seniors can feel young once again. "They get fascinated with the light and the décor of the place – it's Hollywood-like, and it draws them in... There is a little blue thing that is put in the machine and they tell you it helps you to win but they [casino workers] just want to know how much you are putting in."

In one focus group all the seniors said they viewed games of chance as a social activity and money was not a reason to play these games. They said they go as a group and love playing together because "it is a very uplifting experience".

Seniors described their physical/psychological/emotional reasons for participating in games of chance. They talked about "the rush you get when you win" and that it gives you a way to fantasize – to dream about things you could do. It gives you the opportunity to hope. Playing was a way to compete –it fulfilled the competitive spirit. With so many losses happening as a person ages, loss of spouse, friends, family moving away, loss of job and loss of any potential for an increase in income, participating in games of chance filled the vacuum and provided ways to remain connected with the bigger world. That, plus the possibility of 'winning something', either a small amount or 'the big one', made life a bit more exciting.

In many different ways, the seniors said that playing games of chance relieved the loneliness that comes with aging. Some said there is little going on in rural communities which is what drives seniors to the casinos.

Many commented on the promotions aimed at seniors to go to the casinos or to buy lottery tickets. The promotions were also given as reasons seniors went to the casinos.

8.11 Negative Impact of Games of Chance

In the initial discussions, few said they personally knew of seniors who had a problem with gambling. Yet, as the discussion continued, several seniors said they knew seniors who had gambling problems. They described the impact on the seniors' lives. Examples were given of senior's gambling problem, e.g. seniors spent most of their pension cheque at the casino, seniors who spent large amounts of money weekly or daily on bingo and seniors who lined up at the lottery counter right after they received their pension cheque. Many participants were worried that seniors with limited income could be spending beyond their means and have to cut costs in other areas, such as food or prescription drugs.

In addition to describing the problems of others, some described their own experiences. One described losing everything and has made sure that the casino or places with VLTs will not allow him/her to play. One told of her experience with bingo: "The reason I came here today is because I used to be a big bingo player. I gambled every day of the week."

Seniors in the focus groups often spoke of the gambling problems of 'the younger generation' and their concern that this problem is increasing. A few seniors described situations where younger family members had a gambling problem. They told of the ways in which seniors tried to help; for example, by leaving brochures on 'problem gambling on the coffee table' for them to see.

There was an awareness in the focus groups that gambling funds supported community infrastructure which supports many non-gambling services and activities. No one was sure, however how this money was managed or distributed. They said transparency concerning the revenues from gambling is extremely important. Most had no idea if or how the money that came in from gambling (in lotteries, casinos and VLTs) was used to help local communities. Except for the revenues that came in from bingo, 50/50 draws and the VLTs in the Legion, no one had any idea where the money went. As one senior put it, – "We don't know where the money is going...look at the fiasco with 6/49. Never fixed it yet".

One theme appeared over and over: gambling is a double edged sword; one that both benefits the community and hurts it at the same time. "It is a way to make money for the Legion, but it comes with a price tag". A seniors apparently familiar with the legion said that 73.8% of VLT revenue from the Legion went to the government and a maximum of 26.2% came back to the Legion, which used it to support many community activities.

8.12 Signs a Senior Has a Gambling Problem

The participants described many signs that a senior might have trouble with gambling. Some were based on personal observation or experience: others were opinions or speculations. They are presented here as financial, social, physical behavior patterns or actions.

Financial Signs:

- “When you spend money you don’t have.”
- Lack of funds for medication and food and other necessities.
- Inability to pay bills, such as utilities or rent.
- Going to the food bank.
- Loss of their house or having to move to a place where rent is lower
- Asking family or friends for financial help.
- Spending all their money before their pension cheque arrives.
- Appearing in a gambling venue as soon as their pension cheque arrives.
- Losing their car and bumming rides.
- Stealing money from others.
- Talks about winning the big one or winning back the money.

Social Signs:

- Withdrawal from church or other public activities.
- “Being shunned by members of the community”.
- Spending more and more time on bingo, in casinos, in queues for lottery/scratch tickets, in places such as the Legion or Dooleys that have VLTs, or playing on-line games for money. Never wanting to leave the place where they gamble.
- Seeing the same faces at the casino or VLTs all the time.
- Seeing the same faces at bingo many times a week, playing many cards each time.
- Arranging their day around gambling. Being irritated if something or someone disrupts their schedule.
- Less contact with friends and family, even divorces.

Physical Signs:

- Decline in physical and mental well being - shabby appearance, weight loss, inability to concentrate, forgetting things
- “It is number one on their list... they neglect even their own selves as they get too involved in gambling that they no longer take care of their bodies.”
- Not eating or sleeping

Psychological Signs:

- Increasing depression and/or anxiety
- Lying to others and to themselves
- Becoming very defensive when asked about the amount of time they are spending gambling
- Having a sudden problem with alcohol, as gambling problems can exacerbate drinking problems
- Obsessive thinking about gambling
- Agitation when gaming

In general, seniors said that to the degree that there is a gambling problem among seniors it is a ‘hidden problem’. Psychological and attitudinal problems related to problem gambling may only appear gradually, and because it is an older person, the wrong assumptions may be made about them. One could think such changes are a natural part of aging or that the economic times are especially hard on those with very limited incomes. This may not be the case at all.

8.13 Best Ways to Help Seniors with Problems

In asking participants where seniors would go for help if they had a gambling problem, most noted the advertisement on TV for problem gamblers, some knew of the addiction services, but most said such people should go to their church, to Senior Centres or talk to friends. Peer support or mutual support services for problem gamblers was suggested by several participants as a way to help seniors with their gambling problems.

One participant expressed what many felt about handling addiction, “Knowing you have a problem, admitting you have a problem and accepting help for your problem are all different”.

Many felt the problems with gambling could be traced to government involvement. Several described the effort the government made to ensure there

was a casino in Halifax despite community opposition. They talked about how the number of opportunities to gamble has grown over the years and how it is promoted in the media and marketed to seniors' organizations/centers.

Education, mutual support and appropriate treatment are all needed, but we also need to be non-judgmental. One senior said, "Education is a beautiful thing so they know what is happening." Another said, "The church needs to be helping instead of being judgmental. The church needs to find a way to explain to people rather than criticize them. We need to find out what is the root of the problem".

Several spoke of the need to acknowledge what was happening in their community and find ways to take action, "We need to be able to educate our community. We try to hide it but in hiding it we are not helping ourselves and the community. When a person has a problem, we tend to put them down...they are lonely and they are doing these things because they want to be out with other people". "There are people who sit all day in the bingo hall wearing pampers because they don't want to leave their place and go to the washroom. So it is a mental thing".

One main theme in all the focus groups is the dependence of the government and of the community on the revenue that came in from gambling. One participant said that when she went to the casino and expressed concern about the number of seniors participating in the casinos she was told by someone associated with the casino (according to the participant) that 'you had better keep coming or you may lose a nurse in your community'. Many seniors said the government was addicted to the money from gambling, as were community groups.

8.14 Evaluation of Amount of Community Leisure Activities in Community

Most of the participants felt there was a lot going on in their communities for seniors. Transportation to activities as well as getting information on activities to seniors who might like to be active but are unaware of what is available were the main problems. Several seniors said there was a lack of activities in rural areas. They had to travel to nearby towns to participate in activities and were fortunate they could drive or get a drive otherwise they would have nothing to do but 'watch the tube'.

Participants suggested a wide variety of leisure needs for their communities, such as libraries geared to the interests and needs of seniors (comfortable sitting areas, wide variety of content/books for seniors to borrow, lectures, discussion groups), bowling alleys, theatres, skating rinks, more space in Seniors' Centres for physical activities, etc. But it was interesting that beneath all the suggestions was the need for someone to take a leadership role in organizing and sustaining leisure activities for seniors.

8.15 Relationship Between Leisure Activities and Participation in Games of Chance

As a follow up to a discussion of the kind of leisure activities that were needed in the community, we asked if they were more of these activities, did they think there would be a change in the gambling patterns of seniors. Most felt that the addition of leisure activities would have no impact on gambling. Some felt that if the appropriate activities were promoted, particularly to those who gambled, it might make a difference, but you would first have to find out what types of activities would attract these seniors.

Several felt that if transportation were available, it would make a difference. For example, the Casino buses certainly increased involvement in gambling so transportation to various senior activities might increase participation rates in other activities. One focus group stated that if social events were organized often, events in which seniors came together as a group, such as bowling, tea parties, bus trips to interesting places, then the rate at which seniors get involved in games of chance will reduce as they “have fun activities in their communities to take part in”.

8.16 Final Comments by Participants

In all of the focus groups, the participants said they enjoyed the experience. Many stayed on to talk afterwards. In one of the sessions, a person said “it was very refreshing to sit as a group and discuss issues plaguing our community and talk about some of the things that need to be done to reduce the rate at which seniors gamble”. Many said it was good to be able to express their opinions and concerns about what was happening with gambling in our province.

The main complaint, as expressed earlier, was that while lots of money was spent on advertising and promoting gambling and lots was made on gambling itself, no one knew where and how the money was spent. A common statement was “The big question is what is happening to the ‘gambling dollar’ – don’t believe it is going into programs and recreation”.

9.0 Conclusion

It is interesting to observe the consistency between what is said in the research and what senior leaders, senior servers and seniors themselves said in the project survey and the focus groups. Seven themes thread through all that has been written and spoken in this project and these help to create a clearer understanding of the complex issue of seniors and gambling in our province.

1. Gambling is a 'hidden problem' for seniors. Many more seniors are either at risk for having a gambling problem or are experiencing gambling problems than is indicated in prevalence studies and most research.
2. People who work with or for seniors and seniors themselves are concerned about the growing number of seniors involved in gambling activities and the growing number of gambling activities promoted to seniors.
3. Seniors' organizations are increasingly dependent on the revenues from gambling activities, but there is little understanding of the implications that this has both for them and their members and users.
4. Advertising and promotional campaigns appear to promote gambling much more than caution against it or provide information for those who have problems with gambling.
5. Seniors perceive that the role of the government in gambling activities is confusing, contradictory and disturbing. As one senior said, "the government's foot is on the gas and the brake at the same time".
6. Peer support is indicated as the best way to reach and help seniors who are at risk for or who have gambling problems.
7. Strategies and methodologies used in prevalence studies do not always suit the senior population. Seniors are very reluctant to admit to having gambling problems, particularly in a survey.

10.0 Recommendations for Further Work

1. Develop preliminary knowledge translation tools, geared at seniors and senior servers based on these research findings (Short term – Community Links).
2. Review and analyze the ways in which seniors who are problem gamblers are identified and the strategies used to reach those at risk by:
 - Analyzing the different and alternative methodologies used to gather information on seniors and gambling.
 - Identifying methodologies that could be piloted and used to more clearly understand the impact of gambling on Nova Scotia Seniors.
 - Researching strategies used in other jurisdictions to treat and prevent gambling problems among seniors.
 - Recommend appropriate ways seniors can be reached by overcoming barriers identified in the focus groups (Mid-term - requiring partnerships between appropriate research teams and community based partners).
3. Pilot approaches identified in the research with seniors in Nova Scotia. (Long term – appropriate partners to be identified).
4. Research the impact (both positive and negative) of revenues from gambling on senior serving organizations and community groups as a whole. Issues to be looked at would be:
 - Is there a growing dependence on gambling revenues in supporting seniors' organizations and programs?
 - What are the implications of the dependence on gambling revenues of community based senior groups?
 - Are there alternative sources of revenues which can be identified which would reduce the dependence of organizations on gambling?*
5. Research the impact of gambling problems of family members on seniors. Although this issue was not explored in the focus groups, it was identified by some of the respondents to the survey and participants in the focus groups as of potential importance.

The issue of gambling and its affects on seniors, families and community organizations should be of concern to the not for profit sector as a whole and not just to seniors and their organizations. In rapidly aging rural Nova Scotia, it is natural that it will be a seniors' issue in as far as many of the organizations are largely dependent on older adults and serve their needs in many ways. This issue should be of interest to a number of organizations that are addressing issues for the voluntary sector and volunteers and to Health Promotion and Protection – Volunteerism.

Appendix A: Seniors and Gambling Survey Questions

1. Which of the following gambling activities have you noticed seniors taking part in (check all that apply):

- Scratch tickets
- Lottery tickets
- Sports betting
- Charity raffles/draws
- VLTs
- Bingo
- Slot machines (casino)
- Table games (casino)
- General casino gambling (unsure of specifics)
- Card games
- Other

2. List some of the reasons you think seniors might gamble (check all that apply):

- Socialization
- Entertainment
- Relief from boredom
- Hope of financial gain
- Support a good cause such as a charity or church
- Forget problems
- Other

3. Do you think people gamble more or less after retiring?

- More
- Less
- Same
- Additional comments

4. What would be a sign that a senior might be struggling with Gambling?

5. Approximately how many seniors in your club or who receive service from your organization do you think might have financial issues due to gambling?

- Very few
- Some
- Several
- Additional Comments:

6. Are you aware of any situations where immediate family members of seniors, such as children, gamble?

- Yes
- No
- Unsure/Don't know

7. If yes, do you know if this person or persons ever borrowed money from seniors to gamble?

- Yes
- No
- Unsure/Don't know

8. Are you aware of promotions aimed at getting seniors to gamble, such as a bus trip to a casino along with free meals?

- Yes
- No

9. If yes, please briefly describe.

- TV commercials
- In-store promotions
- Mail promotions
- Local bus trips
- Entertainment at casinos (singer, performer, etc.)
- Other

10. Regarding the above question, have any seniors in your club or who receive service from your organization participated in a promotion?

- Yes
- No
- Unsure/Don't know

11. Do you consider a form of gambling to be the main leisure activity for seniors?

- Yes
- No
- Unsure/Don't know

12. Do you feel seniors would gamble less if there were more leisure activities made available for them?

- Yes
- No
- Unsure/Don't know

13. Are you aware of the Problem Gambling Help Line, administered by Nova Scotia Health Promotion and Protection?

- Yes
- No

14. Do you think seniors are aware of the Problem Gambling Help Line?

- Yes
- No
- Unsure/Don't know

15. Focus groups will be held in the fall to help better understand the gambling habits of Nova Scotia seniors. Would you or your organization be potentially interested in hosting a focus group?

- Yes
- No
- Unsure/Don't know

Appendix B: Focus Group Questions

After some questions there are 'probes' describing issues or topics to cover in the question.

1. Could you tell us a little about yourselves? For example, your first name and where you live.
2. Would you describe the leisure activities that you enjoy?
(Probe: Do seniors describe games of chance such as bingo, buying lottery tickets, going to the casino as part of their leisure activities, if not go to next question)
3. If not described in answer to previous question ask: As part of your leisure activities, do you participate in games in which it is possible to win something, such as bingo, buying lottery or scratch tickets, card games, VLTs (video lottery terminal) or going to the casino? If you do, could you describe these games, where you play them, when and how often?
4. Are the games in which you participate ones that you do alone or with other seniors or a combination of both?
(Probe: Do seniors see the games in which they participate as primarily a social interaction and if so, ask them to describe the experience. If they are alone when they participate, do they still think this is a social activity, if so how. If, for example they play 'slots' at the casino, do they also describe a social component, such as going on a bus to the casino, sharing meals or drinks or talking while playing)
5. Do you think all games of chance are alike or could there a difference between these games?
(Probe: Do seniors see playing bingo, buying lottery tickets or playing cards the same as going to the casino? Do seniors see going to the casino the same as playing VLTs? Do they see some as 'gambling' and others social activities?)
6. Do you play games of chance more or less often since you retired?
(Probe: With more time, do they participate more in games of chance, take the opportunity to go to the casino, play bingo more, etc.)
7. As a proportion of your income, do you spend more or less or the same now on games of chance since you retired?
(Probe: With a 'fixed income' do seniors limit the amount they spend or do they or others they know sometimes go beyond the amount they mean to spend)

8. Have you ever gone to a casino? If you do:
 - a. **How do you get there?**
 - b. **How often do you go?**
 - c. **Do you go during the day or night and when do you think most seniors go to the casino?**
 - d. **How many of those at the casino are seniors?**
 - e. **Are there more women than men or visa versa?**
 - f. **What games do you play?**
 - g. **In what ways are they encouraged to go to the casino, such as bus trips, free or inexpensive meals, 'free' chits or coins?)**

9. Can you tell us why you enjoy games of chance?
(Probe: For those going to the casino ask why they like to go to the casino. In general, in what ways do the seniors describe games of chance as a positive or beneficial leisure activity?)

10. In what ways could these games have a negative impact on seniors' lives?
(Probe: What problems do games could have for seniors?)

11. What would you say are the signs that a person has a problem as a result playing these games?

12. What is the best way to help seniors who have problems with games of chance?

13. Do you know where a senior would go if they experienced problems with playing these games?
(Note: are participants aware of the Problem Gambling Help Line administered by Nova Scotia Health Promotion and Protection. If they do not cite it as a source of help, ask if they are aware of this service or other services.)

14. What leisure activities for seniors are needed in your community?
(Probe: Identify the leisure activities that would attract seniors.)

15. If these activities were available do you think it would change the amount of involvement in games of chance?
(Probe: Do seniors think involvement in games of chance would remain the same or decrease and why?)

16. Do you have any final comments or questions?