

A Path Forward

Reducing Gambling Harm in WA: Scoping Study



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1. Introduction and Overview

The main goal of *A Path forward for reducing gambling harm in Western Australia* project was to explore strategic advocacy approaches for reducing gambling harm in WA. Central to this work was identifying key leverage points for reform across policy, practice, and legislation. Rather than prescribing a fixed plan, the project sought to outline potential approaches and priorities for more effective coordination among stakeholders, and to map out priority areas for advocacy and action that could drive meaningful change across the state.

This project sought to understand:

1. What is the current state of harm reduction and prevention policy in WA?
2. Who is involved in gambling harm reduction and prevention in WA?
3. What are the opportunities for change to reduce gambling harm in WA?
4. What is an appropriate Advocacy Strategy to support implementation of change and ensure a coordinated approach to gambling advocacy in WA?

The project had five objectives:

1. Use currently available literature (including policy documents) to capture current policy understandings of the current state of gambling harm in WA, including the scope of gambling harm, impacts on specific demographics, and key challenges specific to the WA context.
2. Understand the current policy and regulatory approach to gambling harm reduction and prevention in WA, including current advocacy efforts.
3. Understand which stakeholders are actively involved in gambling harm reduction and prevention in WA, including stakeholders involved in current advocacy efforts.
4. Identify opportunities for improving gambling harm reduction and prevention in WA, including priority areas for action and reform. Priority areas should balance what is achievable in the WA context with the need for change.
5. Develop an Advocacy Strategy that facilitates a coordinated and collaborative approach to gambling advocacy in WA, including improvements against the priority areas.

The project was funded under a Heathway grant.

2. Executive Summary

Gambling represents a growing public health concern in WA, with millions of dollars lost each year and profound impacts on individuals, families, and communities. Despite mounting evidence of financial hardship, mental health challenges, and social dislocation linked to gambling. There is a common misconception that gambling harm is minimal in WA because, unlike other states, electronic gaming machines have not been allowed to proliferate beyond the casino. In reality, frontline community service providers are seeing a very different picture - one in which financial hardship, mental health issues and family violence are being intensified by the gambling products that are available in WA.

Gambling-related harms pose significant costs to the WA community and require further examination. Currently there is no coordinated community effort directed at having the issues related to gambling harm addressed. This gap in coordinated action has left many Western Australians exposed to harm without adequate prevention or support services.

The WA Government's current reform agenda has centred largely on implementing the recommendations of the Perth Casino Royal Commission. While this work is essential, it risks overlooking the significant gambling-related harms occurring across the broader WA community. A separate review of gambling regulation is underway within the Department of Local Government, Industry Regulation and Safety (DLGIRS); however, it is concerning that this process does not appear to be adopting a comprehensive public health approach.

Government agencies acknowledge that gambling causes significant health, mental health and social harms including family stress, links to family and domestic violence and forms of coercive control, yet the Department of Health, Department of Communities or the Mental Health Commission systematically record gambling in their administrative data. As a result, impacts remain anecdotal or buried in unaggregated case notes. Current responses focus on regulation and counselling for "problem gamblers," reinforcing an individualised lens rather than a system-level public health approach.

Recently released research commissioned by the DLGIRS highlights a concerning and growing pattern of gambling-related harm in WA. [The Prevalence of Gambling Participation and Harm in WA](#) study demonstrates that gambling is widespread across the State and that a significant proportion of people who gamble are experiencing social, financial and psychological harms as a result. Importantly, the study clearly shows that gambling harm in WA is neither isolated nor confined to the casino environment.

Building a coordinated approach across the community services and health sectors is essential to responding to gambling-related harm in WA. Although many organisations encounter gambling impacts in their day-to-day work, the issue often remains peripheral to their core mission, leading to limited strategic focus and resourcing. A more connected sector that is resourced to share knowledge, align priorities and advocate collectively would help elevate gambling harm as a public health and social issue requiring sustained attention and action.

Full implementation of the Inquiry into online gambling and its impacts on those experiencing gambling harm (Murphy report) is essential in addressing the harm caused by online gambling platforms.

A key priority is establishing a coordinated advocacy mechanism for WA. This would provide a platform for sector-wide engagement, enabling organisations to develop policy, guide service development and ensure gambling harm is addressed alongside other interconnected social issues. Such coordination is central to embedding gambling harm within broader public health and social policy agendas.

Independent, community-centred decision-making is also important. The gambling industry should not have influence over decisions in policy or governance processes related to gambling harm reduction. Rather, advisory and governance bodies should include public health experts, service providers, researchers, young people and people with lived experience. The establishment of an independent advisory body as recommended by the Perth Casino Royal Commission is critical. This body could lead ongoing research, monitor emerging risks such as online gambling and advertising, and provide evidence-based advice to the WA Government. Without it, WA will continue to lack the transparent, expert insight required to understand and reduce gambling harm across the community.

Without adequate resources the community and health sectors are limited in the action they can take to either bring the issues to the attention of governments or develop the solutions and advocate for their implementation. A stronger public health approach is needed, one that moves beyond incremental reforms to comprehensive, evidence-based strategies. Much remains to be done to ensure that the voices of those most affected by gambling harm are heard and the difficulties in which they find themselves are adequately addressed.

This report provides an overview of the current gambling landscape in WA, highlighting both initiatives underway to address gambling-related harms and existing gaps where further action is needed.

3. Project Findings

Gambling Harm in WA: What's Happening and Who's at Risk

- Gambling-related harm can include:
 - Financial harm
 - Relationship harm
 - Health harm
 - Emotional/psychological harm
 - Cultural harm
 - Work/study harm
 - Criminal activity.
- WA has a high prevalence of gambling.
- Gambling-related harm in WA is arising from activities at casinos, racecourses, TAB outlets, via online platforms and lottery participation.
- Online gambling is a major concern, driven by its increasing popularity and widespread availability.
- Key at-risk groups for gambling harm in WA include FIFO workers, who may experience isolation and irregular routines; Aboriginal and Torres Strait Islander peoples, who face complex social and cultural factors; and young people, who are increasingly exposed to gambling through digital platforms and social environments.

Gambling Harm Regulation in WA: What's Being Done and What's Missing

- The regulation of online gambling falls primarily under federal jurisdiction.
- The Australian Government received a report (28 June 2023)¹ on online gambling, You win some, you lose more colloquially known as the Murphy report, with a comprehensive set of recommendations to which the government has not responded.
- State governments have responsibility for a range of aspects of gambling regulation.
- The WA Government's current review and reform of gambling in WA has not been guided by a public health perspective and key proposed legislative changes are unlikely to be implemented before 2030 at the earliest.
- The WA Government has prioritised some aspects of the implementation of the recommendations of the Perth Casino Royal Commission's PCRC. However, while the government has voiced support for the PCRC recommendation that the Problem Gambling Support Services Committee (PGSSC) be replaced with an independent advisory body, this recommendation has yet to be implemented.
- The Department of Local Government, Industry Regulation and Safety (DLGIRS) oversees the PGSSC, which currently has responsibility to consider issues relating to gambling harm.
- Despite the recommendation of the PCRC, the gambling industry appears still to be represented on the PGSSC.

¹ Parliament of Australia, House of Representatives Standing Committee on Social Policy and Legal Affairs. (2023) You win some, you lose more.

- Under its legislation the Gaming and Wagering Commission (GWC) has the responsibility for addressing gambling harm.
- The GWC appears to be primarily focused on reform to the casino and on prosecuting illegal gambling.
- The community sector plays a key role in mitigating the effects of gambling-related harm through its services and programs.
- The PCRC report addresses gambling harm in the casino (Chapter 12) – there has been no similar examination of gambling harm associated with lotteries, sports betting or racing.
- DLGIRS provides support for some initiatives, including the Gambling Harm Awareness Week, a 24-hour gambling telephone help service and gambling harm counselling service. The funding for some of these activities largely comes from the gambling industry.
- WA has in the past contributed to Gambling Research Australia (GRA), however there is no publicly available data detailing how much, if any of GRA's funding is specifically spent within WA or on WA-targeted projects.

Absence of Strategic Direction and Coordination in Gambling Harm Response in WA

- The Departments of Health and Communities, and the Mental Health Commission, have all acknowledged the presence and impact of gambling harm. However, they have advised that addressing gambling harm does not currently fall within their formal responsibilities. To date no specific directive or mandate has been issued by the government to guide their involvement in this area.
- Currently there is no coordinated approach to addressing gambling-related harm by the community services sector.
- Currently no organisation within the community services or public health sectors that addresses gambling harm as a core service. This has led to a lack of coordination and collaboration across the system, resulting in fragmented responses and limited integration of gambling harm into broader health and social support frameworks.
- Insufficient dedicated resources are allocated to gambling harm, limiting the ability of services to deliver effective responses. Although many services and organisations support individuals affected by gambling harm, they typically do so in the context of other presenting issues, such as mental health, housing, or financial stress.
- The absence of a gambling harm reduction policy in WA contrasts with the more advanced measures implemented in other parts of the country.

Advancing Gambling Harm Prevention and Response in Western Australia: Building a More Coordinated, Inclusive, and Evidence-Informed Approach

- Implementation of the Murphy Report recommendations, in particularly phasing out advertising, a comprehensive national strategy, establishing a national regulator and delivering research based public education.
- Strengthen gambling harm prevention and response in WA through coordinated action both within and between state and federal governments, focusing on improved regulation, policy reform, and strategic investment in support services.
- Gambling activities beyond the casino, including online platforms, sports betting, racing and lotteries require a comprehensive approach to reducing and addressing gambling-related harm across all gambling platforms.
- Resource community services and public health sectors to be able to address gambling-related harm through;
 - Advocating for policy change
 - Delivery of programs including prevention, early intervention, treatment services, and ongoing support for affected individuals and families and public and targeted education.
- Establishment of an independent advisory body to provide oversight of gambling regulation and harm minimisation.
- The Inclusion of community services, health sector representatives, and people with lived experience on advisory and decision-making bodies to improve gambling harm prevention and responses.
- The exclusion of the gambling industry from decision-making roles and committees related to the prevention and reduction of gambling-related harm.
- Strengthen responses and commitment to gambling-related harm in community services and public health sectors by integrating it into organisational policies and strategies.
- Comprehensive research into the direct and indirect costs of gambling harm to individuals, families and communities.
- Implementation of stronger legislative options to regulate advertising and promotion of gambling and gambling related products.
- Establish a mechanism to coordinate advocacy on gambling-related harm in WA.
- Community service and health organisations should be encouraged and supported to include policy and strategy on gambling harm reduction in their areas of operation.
- Funding for service coordination and targeted workforce training to address gambling related harm.

4. Summary of Recommendations

Fostering sector collaboration and capacity by establishing a coordinated advocacy mechanism in WA

This mechanism could take several forms including:

- Commission an existing WA organisation.
- Establish a new organisation within the WA community services and public health sectors.
- Explore collaborative national partnership models.

Priority areas in reducing and addressing gambling-related harm in WA

1. Increasing public and government awareness of gambling-related harm in Western Australia.
2. Explore legislative options to regulate gambling advertising and promotion in Western Australia.
3. Cross-sector commitment to address gambling-related harm
4. Funding for service coordination and targeted workforce training to address gambling-related harm.
5. Independent decision-making and inclusive representation in gambling harm policy and governance.

National advocacy efforts to reduce gambling-related harm

1. Support the full implementation of the Murphy report recommendations
2. Support the development and implementation of research-informed warning messages across all forms of gambling product promotion.
3. Support strengthened and more transparent regulation of online wagering services based in the Northern Territory.

5. Gambling Harm Reduction and Prevention in WA

This section examines the current landscape of gambling harm prevention and reduction policy in WA. Drawing on key documents and local insights, it outlines the extent and nature of gambling-related harm across the state, including its impact on specific population groups and the unique challenges faced within the WA context.

What is Gambling Harm?

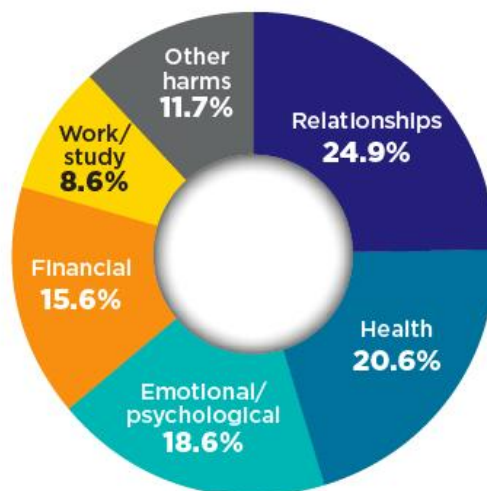
Gambling harm refers to the negative consequences that can arise when people have trouble limiting the amount of time and money they spend on gambling. This harm can affect not only the individual gambling but also those around them who are not directly participating². Gambling harm can be experienced on a spectrum, ranging from minor negative experiences to crises, and is not always proportionate to the amount of gambling participation.

Gambling harm can include:

- **relationship harm** (e.g. conflict within relationships, neglect of responsibilities)
- **health harm** (e.g. stress, depression, reduced sleep)
- **emotional/psychological harm** (e.g. feelings of regret, worthlessness, failure)
- **financial harm** (e.g. credit card debt, reduced spending on essentials)
- **work/study harm** (e.g. reduced performance due to tiredness, absenteeism).³

Gambling harm extends to family members including partners, children and parents of gamblers and can also impact friends and associates.

Figure 1: Types of gambling harms and an estimate of their prevalence in Australia⁴



³ Australian Institute of Family Studies. (2021) Understanding Gambling Harm and Ways to Identify Those at Risk.

⁴ Australian Institute of Family Studies. (2021) Understanding Gambling Harm and Ways to Identify Those at Risk.

Marionneau, Egerer and Raisamo put it this way:

“Gambling-related harms span health, psychological, relationship, financial, cultural, work, and crime-related issues. Harms accrue to individuals (heavy gamblers, non-problem gamblers and nongamblers), but also to families, communities, and societies. Harms form a spectrum in terms of severity and temporality. Risk factors or determinants of gambling are often similar to the harmful consequences of gambling.”⁵

The personal toll of gambling harm on people’s lives cannot be overstated. Gambling Harm Support SA shares real stories that illustrate both the profound impacts of gambling and the possibility of recovery with the right support. Bob, for example, describes how a single early win at the races sparked an addictive adrenaline rush that shaped the course of his life. After decades of struggling with addiction and now having finally found meaningful support he reflects:

"I lost a small fortune while gambling. I lost my freedom for a while, I lost my pride and I lost a lot of material possessions...However I have not lost the most important things in life. The love of my wife and family, my life or my sanity. I am also lucky because right now I am in the best place of my life. I have employment where I may be able to make a difference, my faith has returned, I now enjoy going to bed without feeling sick and plotting inside where I can get the stake for my next punt from. I have an amazing wife, beautiful son and daughter-in-law and beautiful grand-daughters. I am very lucky.”⁶

Gambling in WA

Australia remains the world’s highest per-capita gambling loser, with losses estimated to be approximately 31.5 billion dollars a year. This represents about \$1527 per adult annually. Losses have increased significantly over the last decade ⁷

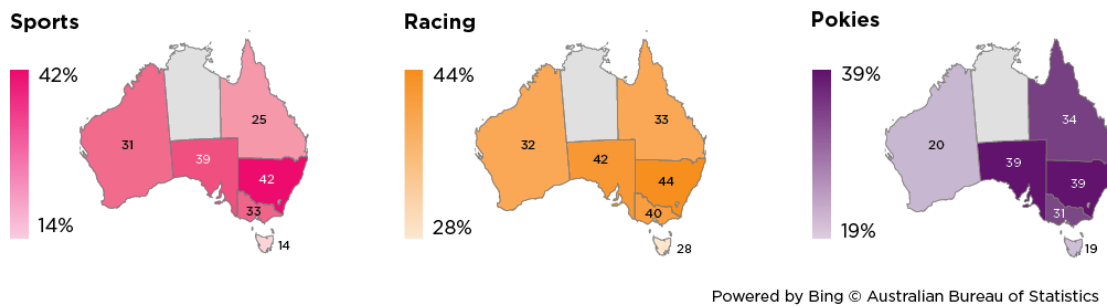
Data from the National Gambling Prevalence Study Pilot 2024 suggests a general increase in national gambling participation (65% of Australian adults in 2024), with Queensland having the highest current prevalence (70.2%) followed closely by WA (69.6%).

⁵ Virve Marionneau, Michael Egerer & Susanna Raisamo (2022) Frameworks of gambling harms: a comparative review and synthesis in *Addiction Research & Theory* Volume 31, 2023 - Issue 1 Pages 69-76

⁶ Gambling Harm Support SA, [Bob's Story](#)

⁷ Annual gambling losses have gone from \$21 billion in 2024 to over 31.5 billion. Francis, (2026) [A billion-dollar empire of harm: how gambling took over Australia](#). The Conversation.

Figure 2 Percentage of population who gambled at least once in past 12 months on sports betting, race betting and pokies, by state⁸⁹



A recent study on gambling prevalence and harm in Western Australia represents an important first step in understanding the scale and nature of the issue locally. The research found that 37% of the 2,512 survey respondents were at some level of risk of gambling-related harm.¹⁰ It also sheds light on which gambling activities are driving this risk: sports betting and race betting emerged as the most significant contributors.

Participants described sports betting in particular as “a normalised part of life in WA,”¹¹ often viewing it as a natural extension of sporting culture. This normalisation, combined with the accessibility and aggressive promotion of these products, appears to be a key driver of harm in the community.

One of the study’s key findings was that:

Broader impacts of gambling harm need to be recognised: One in ten survey respondents reported experiencing harm from someone else’s gambling, and nearly one third reported direct personal harm. These findings reinforce the need to view gambling harm not solely as an issue for individuals, but as a public health concern with social, emotional and financial consequences for families and communities.¹²

This is despite the early decisions of authorities to ban pokies from the State and limit electronic gaming machines (EGMs) to the State’s only casino, which has been credited with lessening the losses Western Australians incurred from gambling on gaming machines compared to other Australians. The effect of limiting the machines to one venue has created a false impression that gambling harm is not as significant in Western Australia as in other states where the machines have proliferated.

⁸ Rebecca Jenkinson, Cailem Murray Boyle, Kei Sakata, Nancy Greer, Uma Jatkar, Brian Vandenberg. (2023) [Gambling Participation and Experience Harm in Australia](#)

⁹ Notes: Territories (the ACT and NT) were excluded due to low sample size (n = 48). State only sample included (n = 1,717). Australian Bureau of Statistics (ABS) weights (age/gender) used for estimation.

¹⁰ Department of Local Government, Sport and Cultural Industries. (2025) [Prevalence of Gambling Participation and Harm in Western Australia](#). Prepared by the Behavioral Insights Team.

¹¹ Department of Local Government, Sport and Cultural Industries. (2025) [Prevalence of Gambling Participation and Harm in Western Australia](#). Prepared by the Behavioral Insights Team. P6

¹² Department of Local Government, Sport and Cultural Industries. (2025) [Prevalence of Gambling Participation and Harm in Western Australia](#). Prepared by the Behavioral Insights Team. P8

The reality is that even with the limited availability of EGMs, gambling is now creating significant levels of concern throughout the community services and public health sectors, as demand for sectors' services increases, potentially in part due to the impact of gambling on either the individuals seeking services, or the network of people around the gambler seeking support from the consequences of an individual's gambling.

Online Gambling

Online gambling is an increasingly significant driver of harm, with its constant accessibility, rapid play styles and targeted digital advertising making it particularly risky. The ease of betting via smartphones blurs boundaries between leisure and gambling, while features such as in-play betting and personalised promotions heighten the potential for addiction. As a result, online gambling is emerging as one of the fastest-growing sources of gambling-related harm, especially among young people.¹³

The ABC published an article on the 13 Feb 2025 about a woman named Ella who lost \$20,000 after downloading a solitaire gambling app when she was 19. Ella shares in the article:

I felt really ashamed of it because there was nothing showing me that it's something that happens to women..."On TV and in the media you see [gambling harm] happen to a lot of men, but you don't see it in young women. I felt like I was abnormal."¹⁴

In June 2023 the House of Representatives Standing Committee on Social Policy and Legal Affairs published its report "You win some, you lose more", also known as the Murphy report after Peta Murphy the Chair of the Committee. The report considered whether the current regulatory framework for online gambling and gambling advertising in Australia was fit for purpose and meeting community expectations.

The Committee found that the extent of gambling harm caused by online gambling was excessive and resulted from a weak and fragmented regulatory framework due to inconsistencies across the states and territories. The inconsistencies have resulted in the Northern Territory taking on the mantle of de facto online gambling regulator. The Committee "made 31 recommendations that apply a public health lens to online gambling to reduce harm across the whole Australian population."¹⁵ The Australian Government has yet to respond to the recommendations. Many issues confronted in the report apply to gambling in general and are relevant to WA and represent a sound policy framework within which to tackle reducing and preventing gambling harm.

The National Consumer Protection Framework for Online Wagering in Australia is a body that aims to reduce the harm of online wagering to Australian consumers,¹⁶ the WA

¹³ Wardle H, Degenhardt L, Marionneau V, Reith G, Livingstone C, Sparrow M, et al. [The Lancet Public Health Commission on gambling](#). *Lancet Public Health*. 2024;9(11):e950–e994

¹⁴ Walters A. (2025) [Advocates say stigma around gambling harm leaves some young women reaching "crisis point" before seeking support](#). ABC News.

¹⁵ House of Representatives Standing Committee on Social Policy and Legal Affairs "You win some, you lose more" (the Murphy Report) page iv:

¹⁶ Department of Local Government, Sport and Cultural Industries. (2025) [Consistent Gambling Messaging Notice 2025](#).

Government is a signatory. There are a range of committees established by the public sector agencies responsible for gambling administration across the states that serve to coordinate action on gambling nationally. They are typically have few resources and confronted by a highly resourced industry lobby their impact on national policy is limited.

For the WA Government focusing on putting pressure on the Commonwealth Government to implement the Murphy report recommendations remains a vital mechanism to reduce and address harm.

At risk Groups

Aboriginal and Torres Strait Islander people

In Australia Aboriginal and Torres Strait Islander people are at a significantly higher risk of gambling-related harm than non-indigenous population. National evidence shows that gambling participation and harm are elevated, with recent survey data indicating that 27% of Indigenous adults reported gambling harm almost double the rate of non-Indigenous Australians.¹⁷

Help-seeking rates are low, mirroring patterns seen in the general population but compounded by additional cultural and historical factors. Many Aboriginal and Torres Strait Islander people initially attempt to resolve problems themselves, later turning to family, friends, and community members for support. This pattern is influenced by shame, stigma, cultural norms around gambling, and historical mistrust of mainstream services. Because of strong kinship structures, gambling harm often extends well beyond the individual. Sharing obligations, collective resource pressures and shame mean that gambling losses can ripple through entire families and communities, even when the gambling itself is understood as a normal social or cultural activity.¹⁸

While card-based gambling has longstanding cultural and social meaning in many Aboriginal and Torres Strait Islander communities, newer commercial forms of gambling, particularly online wagering, operate very differently. These products extract money from communities and lack the social oversight and restraints present in communal card-playing contexts. The growth of online gambling is further fuelled by high mobile-phone use, which increases exposure and accessibility of online betting platforms. National peak bodies have expressed concern that the individualised, isolated nature of online gambling undermines traditional social controls and heightens risk.¹⁹

The Aboriginal community-controlled sector, including Aboriginal Community Controlled Health Organisations (ACCHOs) and social and emotional wellbeing programs, is consistently identified as best placed to respond to these harms. Their holistic, culturally

¹⁷ Australian Institute of Family Studies (2024) [National Gambling Prevalence Study Pilot Snapshot](#)

¹⁸ Hing, N and Breen H. (2014) [Indigenous Australians and Gambling](#), AGRC Discussion Paper No.2.

¹⁹ NACCHO (2022) [Submission to the Inquiry into online gambling and its impacts on those experience gambling harm](#) p4.

secure models provide the trust, relationships and cultural grounding required to effectively address both gambling behaviour and its underlying causes. National organisations such as NACCHO have emphasised that culturally safe, community-led approaches are essential, especially in the context of emerging harms from online gambling.²⁰

A significant challenge is the lack of comprehensive, WA-specific data on gambling participation and harm among Aboriginal communities. Although the 2025 WA prevalence study provides important statewide insights, it does not offer detailed breakdowns for Aboriginal and Torres Strait Islander groups, nor does it capture the distinct patterns of online gambling use across WA regions. National reviews highlight that evidence for many culturally specific groups remains limited and uneven, and these gaps are particularly pronounced in WA's unique regulatory environment, where EGMs are confined to the casino and gambling behaviours may differ substantially from those in eastern states. This lack of disaggregated data constrains the development of targeted, effective interventions and underscores the need for community-designed WA research aligned with Closing the Gap priorities.

To effectively reduce gambling harm among Aboriginal and Torres Strait Islander people, there must be a shift from predominantly individual treatment models toward community-level, culturally grounded approaches. Addressing gambling harm requires action on the structural determinants that contribute to disproportionately high harm, including poverty, trauma, digital exposure to gambling, service inaccessibility, and systemic inequities. Only through Aboriginal-led, culturally safe prevention, early intervention and research can responses meaningfully reflect community priorities and begin to reduce the burden of gambling harm.

Young People

Gambling among young people in WA is a growing concern, with research indicating that gambling behaviors often begin well before the legal age of 18. National data shows that nearly one in three (30%) Australians aged 12–17 engage in gambling activities, increasing to almost half (46%) among 18–19-year-olds.²¹ These early experiences with gambling can establish patterns that persist into adulthood, contributing to long-term financial and psychological harm.

There is also evidence of causal pathways from simulated gambling in games to later gambling. In 2022 the Australian Gambling Research Centre analysed data from the Longitudinal Study of Australian Children and found that Adolescents who played simulated gambling games were far more likely to engage in real-money gambling as adults - increasing the probability by around 40 percentage points.²² This is supported by evidence found from the Lancet Child and Adolescent Health Medical Journal that found that adolescents who engage in gamblified digital games, this includes loot boxes, social casino games, and chance-based mini-games, show elevated rates of problematic gambling. It

²⁰ NACCHO (2022) [Submission to the Inquiry into online gambling and its impacts on those experience gambling harm](#) p4.

²¹ Saunders, M and Harrington, M. (2025) (2025) [Teenage Gambling in Australia](#). The Australia Institute.

²² Australian Institute of Family Studies (2022) [What is the link between video gaming and gambling](#).

concludes that these gambling-like mechanics in games expose young people to heightened risks of harm.²³

In WA, the rise of online gambling platforms, coupled with the normalisation of betting in sports and popular culture, has made gambling more accessible and appealing to young people. This exposure is further amplified by targeted advertising and the integration of gambling-like features in video games, such as loot boxes and virtual currency purchases.

Given this emerging evidence, it is essential that WA's strategies to reduce gambling-related harm explicitly recognise the changing nature of gambling exposure among children and young people. Contemporary gambling risks no longer stem solely from traditional betting environments, but increasingly from new platforms, digital products, and gaming technologies that blur the line between play and wagering. To be effective, prevention efforts must therefore include early, developmentally appropriate interventions that address both online and offline forms of gambling, alongside the simulated gambling features embedded in video games and social media platforms.

This requires ensuring that youth voices, child development experts, and public health practitioners are included in the design of policy, education campaigns, and regulatory responses. By expanding our focus beyond conventional gambling and incorporating early prevention and digital-era harm-minimisation approaches, WA can better protect young people, families and communities from the long-term harms associated with early gambling engagement.

Fly in Fly Out Workers

Fly-in, fly-out (FIFO) workers in WA may face a substantially higher risk of gambling harm compared to the general population. Research from a study by Australian National University researcher Dr Bruce Doran found that problem gambling rates among FIFO and mobile construction workers may be up to 15 times higher than in the general population, with 11% of surveyed workers meeting the criteria for problem gambling compared with 0.8–2% in the broader adult population.²⁴ This sharp disparity signals a significant pattern of vulnerability within the FIFO workforce.

A range of factors may contribute to this elevated risk. FIFO work arrangements typically involve long periods away from home, social isolation, limited recreational options on site, and high levels of occupational stress, all of which are well-established risk factors for gambling harm. A comprehensive study commissioned by the WA Mental Health Commission, involving more than 3,000 FIFO workers, found that FIFO workers and their partners constitute an at-risk group for mental ill health, with one-third experiencing high or very high psychological distress.²⁵ The report highlights the roles of loneliness, stress, stigma, bullying, and limited autonomy as contributors to poor mental health outcomes.

²³ King, N., Browne, M., Rockloff, M., Lole, L., Thomas, A. M., & Russell, A. M. T. (2022). Gamblification: risks of digital gambling games to adolescents. *The Lancet Child & Adolescent Health*, 6(6), 357–359

²⁴ Wild, K. (2015) [Problem Gambling up to 15 Times Higher among FIFO Workers: Research shows](#). ABC News.

²⁵ Centre for Transformative Work Design, [Impact of FIFO work arrangements on the mental health and wellbeing of FIFO workers](#)

These mental health strains can increase vulnerability to coping-related behaviours such as gambling.

On-the-ground evidence from support services adds further weight to these findings. A financial counselling service in WA has reported an increase in FIFO workers seeking support for gambling-related financial difficulties,²⁶ suggesting that gambling harm is becoming more visible among this workforce. In addition to gambling-related harm, FIFO workers are also more likely to engage in other risky behaviours, including smoking and risky alcohol use, both of which were identified as elevated in the Mental Health Commission's research and are recognised co-risk factors for gambling harm.

Taken together, this growing body of evidence indicates that FIFO workers in WA face compounding and mutually reinforcing risks including poorer mental health, isolation, substance use, and limited access to support that heighten their vulnerability to gambling harm. This underscores the importance of targeted prevention, workplace-based support strategies, and tailored harm-minimisation initiatives for the FIFO workforce.

²⁶ Parliament of Australia. (2023) [Inquiry into Online Gambling and Its Impacts on Those Experiencing Gambling Harm](#).

6. Governance and Oversight of Addressing Gambling-Related Harm in WA

In WA gambling harm is occurring due to gambling:

- At the casino
- At horse and greyhound racing events
- In TABS
- Online, including on sporting events
- Lottery participation.

Both state and federal governments require policies that address the reduction and prevention of gambling harm. As well, ameliorating the effects of gambling harm requires the provision of services usually provided by the community services and public health sectors. The state of policy development relating to gambling harm needs to be considered in all areas where gambling occurs.

Responsibility for regulating online gambling rests predominantly with the federal government. The continued expansion of online gambling platforms and the increasing evidence of associated harms make this an area requiring immediate and coordinated government action.

The state governments have responsibility for regulating most forms of gambling in Australia. At the WA level, current gambling harm prevention and reduction policy appears to be limited primarily to addressing the issues raised by the Perth Casino Royal Commission (PCRC) with the agencies responsible for providing advice to the government on gambling working on implementing the recommendations in its report. Beyond the casino, there is little evidence of anything significant being considered at legislative or bureaucratic levels to address the impact of gambling harm.

During sector consultations and discussion, it was clear many community service and public health organisations in WA are witnessing the significant impact of gambling-related harm on the communities they support. However, as gambling is not typically a core focus of their work, these organisations often lack the capacity and resources to actively address it. As a result, few have developed formal policies or strategic frameworks to respond to gambling harm, and the issue remains underrepresented in sector-wide planning and service delivery.

Current Oversight: Laws, Agencies, and Commissions Related to Gambling Harm in WA

The WA Government is responsible for most forms of gambling regulation other than online. As mentioned previously the current policy focus of the WA Government and its agencies is on the implementation of some of the recommendations of the PCRC.

The Gaming and Wagering Commission (GWC) and the Department of Local Government Industry Regulation and Safety (DLGIRS) (previously the Department of Local Government Sport and Cultural Industries) are the two overarching bodies responsible for providing

advice to government on the implementation of the recommendations. They are also responsible for providing advice on addressing gambling harm in WA.

There are a number of other committees and bodies that are relevant and also discussed.

Legislation Governing Gambling in Western Australia

The legislation relating to gambling in WA includes:

- Betting Control Act 1954
- Bookmakers Betting Levy Act 1954
- Casino (Burswood Island) Agreement Act 1985
- Casino Control Act 1984
- Gaming and Wagering Commission Act 1987
- Racing and Wagering Western Australia Act 2003

Of these Acts only one, the GWC Act, specifically mentions gambling harm (see the subsection on the GWC). There have been two amendment Acts amending gambling legislation resulting from recommendations of the PCRC.

The first, the Casino Legislation Amendment (Burswood Casino) Act 2022 made changes just to the casino legislation. The Gambling Legislation Amendment Act 2024 introduced a number of changes to broader legislation than just that relating to the casino but the bulk of the changes will be made in the third tranche of legislation that will likely not come before Parliament until at least 2027. Some of these changes may result in impacts on gambling harm prevention and reduction but detailed information on the proposals are not yet in the public domain.

The Minister for Racing and Gaming has responsibility for the legislation controlling gambling.

Department of Local Government, Industry Regulation and Safety (DLGIRS)

The DLGIRS is "...responsible for regulating and maintaining the integrity of lawful racing, gaming and liquor activities for Western Australians to participate in."²⁷ The DLGIRS has a service level agreement with the GWC whereby it provides staffing to enable the GWC to perform its functions.

The DLGIRS has around 120 staff engaged on racing and gaming issues in the Racing Gaming and Liquor section. The DLGIRS has negotiated significant levels of funding from the industry to cover the costs of its operations including that of the GWC. The yearly casino gaming licence fee for 2024 was \$12 million, a substantial increase from the \$5 million paid the previous year²⁸.

²⁷ Department of Local Government, Sport and Cultural Industries. *Racing, Gaming and Liquor*.

²⁸ Western Australia. Legislative Council. *Parliamentary Debates (Hansard)*, February 27, 2024.

We understand the DLGIRS is currently seeking to separate racing and gaming from the liquor activities in order to ensure that the funding from the industry is being used predominately to fund the racing and gaming regulatory activities of the WA Government. The publicly available information²⁹ extends only to the naming of the Executive Director of Racing Gaming and Liquor so it is not possible to identify the extent to which the DLGIRS allocates resources to gambling harm issues within its structure.

The DLGIRS's Annual Report also indicated that the Department attended the "Senior Official's (sic) Working Group for Online Wagering and Harm Minimisation" that was "...a forum to collaborate and progress nationally consistent policy and legislative approaches which prevent and minimise harm from online wagering and to support those experiencing gambling harm.

The DLGIRS is currently reviewing Western Australia's gambling laws, with a consultation paper released and public submissions closing in late 2025. However, the framing of the consultation paper suggests the review is not yet adopting a comprehensive public health approach to gambling reform. It remains critical that reducing and preventing gambling-related harm sits at the centre of any legislative changes proposed through this process.

The Gaming and Wagering Commission (GWC)

The GWC was established in 1987 to administer the law relating to gaming and wagering in Western Australia by the Gaming and Wagering Commission Act 1987. It is specifically tasked in Section 7 (1) (ba):

"to formulate and implement policies for the scrutiny, control and regulation of gaming and wagering, taking into account the requirements and interests of the community as a whole and the need to minimise harm caused by gambling:..."

Section 8 (2) of the Act states: "Without derogating from the generality of subsection (1), the Commission may —

- (da) take steps to minimise harm to the community, or any part of the community, caused by gambling; and
- (e) seek, receive, disseminate or publish information relevant to gambling and the incidence of gambling and its effect in the community; ..."

The GWC is required by the Act to ensure the revenues derived from activities covered by the Act are sufficient to cover its operating, administrative and other costs. In 2022 the GWC adopted a strategic plan with gambling harm minimization as one of its strategic focus areas. The GWC was keen to proactively address the issues of gambling harm.

²⁹ Predominantly from Annual Reports

Until recently the GWC consisted of the Chair and five appointed members. Under the Act the Minister can appoint the Chair and from five to seven members.

The terms of five members ceased on 30 June 2025 and four of the five were reappointed for a further term to 30 June 2026. An additional appointment has been made from 1 July 2025 to 30 June 2026 and a second additional appointment from 4 August 2025 to 30 June 2026, that being the previous Independent Monitor of the Perth Casino. This appointee has been given a fulltime appointment co-existing with the role on the Commission. The Government announced the addition of another member to the Commission on 29 August 2025.³⁰

The position of Independent Monitor was a full-time position supported by a small secretariat, created by the government on the recommendation of the PCRC to monitor the progress of the casino in implementing the changes recommended by the PCRC. Its term expired in April 2025.

Advocating for community representation in the make-up of the membership of the GWC will be an important component of any advocacy strategy that is developed to support the development of policy on gambling harm prevention and reduction. The GWC Annual Report³¹ sets out the activities undertaken by it, and by the Department on behalf of the Commission. The 2023/24 Report includes a section on harm minimisation activities that are performed by the PGSSC and as indicated earlier the discussion of its activities is contained in the next section.

Perth Casino Royal Commission

The Perth Casino Royal Commission was established in 2021 to investigate two areas, the suitability of the current owners of the casino licence to hold it and to assess the adequacy of the framework regulating the casino in Western Australia.³² The Commissioners made the observation that the Commission was the first time since the grant of the casino licence in 1985, save for a 1996 review of the Gaming Commission Act 1987 (WA), that there had been an inquiry into casino regulation. There has been no inquiry into the effects of gambling in general in the State.

The Commissioners detailed the changes required in order for the casino licence holder to be rendered suitable. It stated that there were many changes that require attention, one of which was Perth Casino's gambling related harm program.

In addressing gambling harm, the PCRC devoted one chapter of its report (Chapter 12 Harm Minimisation pages 640 - 731) to the issue and the discussion in that chapter, the recommendations arising from it, the government's response to the recommendations and

³⁰ Hon. Paul Papilia (August 2025), Media Release: [Extra resources bolster the Gaming and Wagering Commission](#)

³¹ Department of Local Government, Sport and Cultural Industries. (2024) [Annual Report 2023–24.](#), p50.

³² Government of Western Australia, (2022) [Perth Casino Royal Commission. Final Report.](#) p8.

the ongoing implementation of the recommendations by the government, the Gaming and Wagering Commission and the Department of Local Government, Industry Regulation and Safety largely constitute the current state of gambling harm reduction policy in Western Australia.

The PCRC made 59 recommendations, including recommendations that recommendations from other reports should also be implemented, resulting in over 300 recommendations in total. The recommendations relate to the operations of the casino, but some would impact on the broader issue of gambling harm. A detailed investigation of the recommendations would reveal that the impact of their implementation would reduce excessive gambling on the part of individuals and would thus have an impact on prevention of gambling harm.

A recommendation is that relating to the creation of an independent body to conduct research into gambling related issues. The PCRC recommends the current body that has the responsibility of investigating gambling harm should be abolished and replaced by an independent body³³. Though the Government supported the recommendation, the Independent Advisory Body is yet to be established. In creating the body, the government should ensure that representation from the gambling industry are not included in its governing mechanism.

The most substantial information available in regards to the formation of an independent advisory body is from the GWC annual report “In response to the findings of the PCRC, it is planned that the PGSSC will remain in place until the establishment of an Independent Advisory Board to be responsible for implementing programs to mitigate gambling-related harm in Western Australia.”³⁴

The Government responded to the recommendations in March 2023 accepting all recommendations, with 49 supported, 11 supported in principle and 1 not requiring a response because the Government continued the ban on poker machines in the state³⁵.

While the acceptance by the Government of the recommendations was a critical first step the lack of detail provided publicly about their implementation is concerning.

The Problem Gambling Support Committee (PGSSC)

The Problem Gambling Support Services Committee was established in 1995 under Section 15 of The GWC Act to address issues associated with gambling-related harm in Western Australia. The PGSSC’s mission statement is: To educate the community of Western Australia

³³ PCRC Recommendation 14 proposes new Acts and Regulations that are then expanded in detail in Recommendation 15, which contains 28 subclauses. Within the subclauses are actions relating to the establishment of an independent body to conduct research that is pertinent to the issue of gambling harm.

³⁴ Gaming and Wagering Commission of Western Australia. (2024) [Annual Report 2023–24](#), p 38.

³⁵ Government of Western Australia. (2023) [Government Response to the Perth Casino Royal Commission](#).

on the impact and consequences of problem gambling and to facilitate and promote health services available for those people affected by gambling related harm.

The DGGSC's website states PGSSC functions to advise the GWC on issues associated with gambling-related harm through:

- Support services — facilitating and promoting the free support services available for people affected by gambling related harm. These services include a 24-hour confidential telephone helpline, a face-to-face counselling service and contributions to a national on-line counselling service and a national self-exclusion register.
- Education and awareness — raising awareness and educating the WA community on the impact and consequences of problem gambling, including Gambling Harm Awareness Week.
- Research — undertake state-based research to assist in guiding gambling related policy, education and research.
- Additional contributions are made to Gambling Research Australia. While WA has contributed to Gambling Research Australia in the past and presumably benefits from its national research outputs, there is no publicly available data detailing how much of GRA's funding is specifically spent within WA or on WA-targeted projects. This lack of transparency represents an opportunity for advocacy, calling for clearer reporting and more WA-specific investment in future GRA initiatives.
- The various support services and activities are funded by the PGSSC to address gambling related harm in Western Australia.

The DLGIRS provides administrative support for the PGSSC. The Committee expends funds from the Problem Gambling Support Fund, which receives funds through voluntary contributions from the industry. In 2024 the Fund received \$1,651,661 in contributions and spent \$966,698, ending the financial year with a balance of \$2,739,185.

The DLGIRS (PREVIOUSLY DLGSC)'s 2023/24 Annual Report states "The PGSSC supports research, education and awareness, and free counselling support for people affected by gambling harm. This includes a 24/7 Problem Gambling Helpline, Gambling Help WA, Gambling Help Online and an annual Gambling Harm Awareness week."

The current PGSSC membership is:

Chair: Uncertain. DLGIRS originally requested a GWC member to chair the Committee but the member subsequently resigned from the PGSSC and the current status of the position isn't known.

Member organisations: Crown Perth, Racing and Gaming WA, Lotterywest, WA Bookmakers Association, DLGIRS, Department of Communities, Mental Health Commission³⁶. Although stated as members, the GWC formally withdrew from the PGSSC during 2024/25.

³⁶ Gaming and Wagering Commission of Western Australia. (2024) [Annual Report 2023–24](#).

The PGSSC provides funding for the following services to gamblers and for research:

- The state's contribution to funding of the 24/7 online Gambling Help Line, operated by Medibank Health Solutions Telehealth, a national service operated under a Memorandum of Understanding by the States and Territories that is free to users.
- A free face-to-face counselling service operated by Centrecare. This service includes therapeutic counselling and social support as well as community awareness programs.
- Gambling Harm Awareness Week – also called the Responsible Gambling Awareness Week in the GWC Annual Report - that aims to raise awareness of gambling harm impacts.
- The [GambleAware website](#)

The Sports Wagering Account

The Account was created by Section 110A of the GWC Act. The DLGRIS provides the Minister of Sport and Recreation with advice on the grants to be funded, and following approval by the Minister, issues and manages the grants.

The Sports Wagering Account receives an annual appropriation from Treasury. Dividends, fixed odds winnings and refunds paid by RWWA in respect of wagers made on sporting events, which remain unpaid, are paid into the Account.

The grants support sport and recreation activities. In 2023-24 125 individual grants funded from the Account amounted to \$4,962,675.³⁷ At the end of 2024 the GWC Act was amended to remove the GWC from having responsibility for these Accounts³⁸. Responsibility now lies with the DLGIRS, which also administers the Sports Lottery Account.

Racing and Wagering Western Australia (RWWA)

RWWA is the controlling authority established under the Racing and Wagering Western Australia Act (2003) for thoroughbred, harness and greyhound racing in Western Australia.

The Act provides for the Authority to regulate the totaliser agencies through which betting on horse and greyhound racing is conducted. It owns and operates the Totaliser Agency Board that manages the operations of the totaliser agencies.

The RWWA webpage under the heading Wagering Harm Minimisation states:

“We are committed to supporting the communities in which we operate and acknowledge our moral and social responsibilities to promote and encourage responsible behaviour in the community and to our customers.

³⁷ Gaming and Wagering Commission of Western Australia. (2024) [Annual Report 2023-24](#).

³⁸ Racing and Wagering Western Australia. [Wagering Harm Minimisation](#).

Our Responsible Wagering Program takes a holistic approach to harm minimisation by:

- Actively promoting a view of shared responsibility.
- Empowering our customers to self-regulate and exclude.
- Operating in real time, enabling us to act swiftly, make informed decisions and cater to the individual needs of each customer.”³⁹

It also refers to its participation in the PGGSC, the contributions it makes to the Problem Gambling Support Fund operated by the Committee and the activities supported through the Fund. In December 2025 The WA Government announced that there would be a review into governance and sustainability of WA racing. The emphasis of this review appears to be to “ensure that Western Australian racing industry has a framework for long-term financial sustainability.”⁴⁰

³⁹ Racing and Wagering Western Australia. [Wagering Harm Minimisation](#).

⁴⁰ Western Australian Government (2025) [Review into the governance and sustainability of WA racing](#)

7. Opportunities for Change in Gambling Harm Prevention and Responses in WA

Western Australia is at a critical juncture in its approach to gambling harm prevention and response. While other jurisdictions have made significant progress in developing coordinated policies and strategies, WA continues to face gaps in regulation, service integration, and sector-wide collaboration. This section explores a range of actionable opportunities to enhance the state's response to gambling-related harm. These include improving coordination between state and federal governments, expanding the scope of regulation beyond casinos to include online gambling, lotteries, and sports betting, and embedding gambling harm into the strategic priorities of community and public health services.

It also highlights the need for inclusive governance structures, including an independent advisory body with representation from affected communities and calls for investment in research to better understand the true costs of gambling harm. Drawing on both local context and international experience, this section outlines practical pathways for reform and innovation in WA's gambling harm reduction efforts.

Consultation with the Departments of Health and Communities and the Mental Health Commission

A consultation session with the representatives of the Departments of Health and Communities and the Mental Health Commission was conducted on 2 April 2025.

Following the session, statements were received by email summarising the position of the Departments and the Commission. The Department of Health comments were received first and were endorsed by the Mental Health Commission and the Department of Communities (who also endorsed the Mental Health Commission points). The points made in the statement are summarised as⁴¹.

Department of Health

- Data on gambling is not collected through the Department of Health administrative data sets (deaths and hospitalisations, population surveys).
- The Department is not aware of any other data systems administered by it that would provide some indication of demand and costs to the health system of gambling related harm.
- Capture of data on gambling through health administrative data systems is not recommended and unlikely to be supported.

⁴¹ A consultation session with the representatives of the Departments of Health and Communities and the Mental Health Commission was conducted on 2 April 2025.

- The welfare and health harms of gambling however are well documented, albeit through independent studies and not necessarily specific to WA.
- Traditionally gambling harm has been regarded as an individual and social issue. Public policy and programs have been predominantly focused on regulation and provision of counselling support for 'problem gamblers'.
- The Department of Health is not indifferent to the health harms associated with gambling.
- Department of Health is aware of the PCRC report and potential benefits of a public health approach to minimising gambling harm that was explored in the report, although the concept and its application to gambling is not well-defined in the report.
- The Department of Health's remit currently does not extend to gambling harm, which would be a matter for the government and minister of the day.

Mental Health Commission

- Gambling is not a metric that Mental Health Commission commissioned services look for when collecting and reporting on data, though gambling as a contributing factor to an individual reason for presenting to a mental health or Alcohol or Other Drug (AOD) service in the community is not dismissed.
- Occasionally a service mentions problem gambling as a reason someone has presented to a mental health or AOD service but its anecdotal and infrequent.
- Individual notes may contain more detail but accessing the notes would not be feasible.
- A public health approach to messaging around gambling harm would be valuable, based on the experience in reducing alcohol availability and related harms but would be a longer-term action.

Department of Communities

- The Department of Communities acknowledges problem gambling as a potential contributing factor to many of the issues impacting the people to which Communities provides supports.
- In 2024, the Commonwealth Government's Rapid Review of Prevention Approaches Panel identified AOD and problem gambling as factors contributing to Family and Domestic Violence (FDV).
- The Department concurs gambling is relevant to the extent it creates additional stress and strain on families (which can impact frequency and severity of FDV if this is a pre-existing issue).
- Coercive control can lead to victim-survivors having their money taken to enable problem gambling.
- Problem gambling is considered alongside other contributing factors in the development of policy and programs to support Western Australians.
- No specific data is collected regarding problem gambling as a standalone issue, however it may be included in case file notes if relevant or appropriate. The

- Department of Communities cannot aggregate that data other than a manual search of every individual case file.

In summary, agencies recognise that gambling causes significant health, mental health and social harms, including added family stress, links to FDV, and elements of coercive control, but none routinely capture gambling in their administrative data, leaving impacts largely anecdotal or embedded in unaggregated case notes. Current responses remain centred on regulation and counselling for “problem gamblers,” reflecting an individualised framing rather than a system-level, public health approach. While there is openness to such an approach, its scope is under-defined, sits largely outside existing remits and data systems, and would require longer-term policy direction, clearer definitions and resourcing to implement.

The Community Services and Public Health Sectors

The community services and public health sectors in Western Australia include a large number of predominately not-for-profit organisations established to provide a range of services that support the Western Australian community, many of whom find their services are required as an outcome of gambling. There are no organisations established primarily to address gambling harm⁴².

Consequently, the issue of gambling-related harm is not addressed in any coordinated mechanism, policies or strategy documents produced by the organisations. This means that though many organisations are seeing the effects of gambling harm on the community there is currently no coordinated response to advocate for more resources to address the underlying issues. The organisations working in the areas impacted by gambling harm – health including mental health, financial counselling, employment, community legal system, housing and homelessness, mental health, domestic and family violence, – are all cognisant of the impact gambling has on the clientele that seek their services. All are wanting the issue to be addressed and are sounding the alarm.

However as gambling support is not their core service they don’t have policies, strategies or funding that directly relate to reducing gambling nor are they taking action that addresses the issue. Most are prepared to be involved in action to prevent and reduce gambling harm, but all are constrained by a lack of resources to devote to the issue. Many are not able to attribute the cause of the problems their clients are experiencing to gambling, due to a third party being the gambler and thus not the one who is presenting as the client. All organisations noted they were unable to collect statistics that would identify gambling as the cause of the problems.

There are some exceptions to this, including Centrecare, which has a contract with the Department to provide gambling support services to gamblers in Western Australia so is also obtaining data on gambling harm. The experience of Centrecare could be used to

⁴² This section is based on a number of consultations with the community services sector, carried out in 2025.

develop the case for more action to be taken on gambling harm in the state. Centrecare acknowledges the impact that gambling is having on the users of the other services it provides in its role within the community services sector and is supportive of action being taken to address issues relating to gambling harm.

The Financial Councillors Australia representatives have made a strong case for the training of front-line staff in gambling harm related issues to assist them recognise when a client is presenting due to gambling issues, and how to respond appropriately to the situation so that not just the primary issue of the presentation is dealt with but also the underlying issue of gambling harm is addressed.

To enable the sectors to properly identify and respond to the harm gambling is causing there needs to be recognition by funding agencies, and funds allocated to enable the issues to be addressed. Community service organisations need a mechanism for coordinated approach to advocating for reducing gambling harm in order to tackle the issue effectively.

Comments made in consultations suggest the training of frontline staff is an area of change that could be addressed. While front line staff may suspect gambling is behind the reason a client or an acquaintance of Client is representing to obtain help, the staff are neither trained in recognition nor in how to deal with gambling where it is evident it is the cause of the problem. Funding agencies providing funds for training staff in this area would be a significant step forward in having gambling harm addressed.

The sector organisations could also assist by recognising in their own policies and strategies that gambling is a significant factor in the presentations of their clients. As well, collecting anecdotal evidence and recording information about gambling effects would contribute to building the case for gambling harm to be addressed.

The community services and health sectors should be represented on the GWC and any independent advisory body that is formed to ensure they are across and influence the decision-making affecting the Government's approach to regulating gambling. The resources the Government devotes to gambling issues are directed through these bodies and that is where influence can be exerted.

Research on Gambling-Related Harm in WA

The independent research on gambling related issues in Western Australia focuses on the techniques the gambling industry uses to increase gambling activity and involvement. There is almost no research being conducted on the harm gambling causes in the community or the extent of gambling that is occurring.

The exception to this is late 2024 the PGSSC contracted the Behavioural Insights Team (BIT) to undertake research into gambling in Western Australia. This report was completed in May 2025 and was provided to the GWC and to all members of the PGSSC, as well as the Australian Institute of Family Studies (AIFS). The DLGIRS released the report publicly in early 2026. The GWC Annual Report claims: "This research is the first time that a focus has been made on gambling harm within Western Australia."

While we welcome the BIT research, it is clear that more statistics and evidence are required on the extent of gambling, the amounts being wagered and lost and the numbers of Western Australians presenting for assistance, the type of assistance, and the cost of the services required.

Healthway has funded Curtin University to investigate how WA young people's exposure to gambling marketing influences their intention to gamble, with the aim of guiding policy interventions to reduce health and social harms⁴³ For instance, the August newsletter of the Alliance for Gambling Reform quotes recently released figures compiled by the Victorian Government on the social cost of gambling – the only state to routinely measure the impact on the community.

"It showed Victorians lost over \$7 billion to gambling every year and the State Government reaped \$2.2 billion a year in revenue, but the social cost (bankruptcy, marriage break up, domestic violence etc.) totalled a whopping \$14 billion"⁴⁴. Western Australia needs to undertake this type of analysis.

The research needs to reveal at a minimum the:

- Cost of domestic violence caused by gambling
- Cost of the mental health effects of gambling
- Cost of homelessness and housing related issues
- Legal and incarceration costs for gambling related crimes
- Legal costs for issues arising from gambling
- Number of people taking their lives as a result of gambling (or words to that effect)
- Financial costs to individuals arising from gambling

The research also needs to identify where the costs fall, to individuals, the governments and the community services and public health sectors.

WA Government

As discussed earlier the areas of gambling for which the WA Government has responsibility are primarily the casino, the TAB and oncourse betting and the lotteries.

Reducing harm arising from gambling at the casino is currently the subject of a substantial legislative program resulting from the WA Government's acceptance of the recommendations of the PCRC. As part of implementing these reforms, there is an immediate and essential priority that the WA Government must address: the establishment of an independent gambling advisory body. This body must include lived-experience voices, community and public health expertise, and be entirely free from industry influence or representation to ensure credibility and integrity in its work.

Establishing this independent advisory body is critical to Western Australia's ability to identify, monitor and respond to gambling harm across the community. Its role would

⁴³ Curtin University. (2022) [New Curtin Research to Address Damaging Marketing to WA Children.](#)

⁴⁴ Alliance for Gambling Reform. (2025) "[August 2025 Newsletter.](#)"

include leading ongoing research, assessing emerging risks (including online gambling and advertising), and advising Government on evidence-based harm-prevention and regulatory measures. Without such a body, WA will continue to lack the coordinated insights needed to understand the true scale and cost of gambling harm.

In short, without an independent advisory body, Western Australians will not have access to the transparent, expert, and community-centred analysis required to safeguard public health and reduce gambling harm over time.

As identified early in the report, emerging area of concern is online gaming involving children and young people. Although not directly related to gambling harm there is some evidence that participating in online gaming is a precursor to participation in online gambling, and in some cases the games actually involve gambling-like components and rewards. Further investigation of this area to identify potential harms is warranted.

Fiona Stanley was the first public hospital in Australia to open a Gaming Disorder Clinic, as part of its Addiction Prevention Treatment Service Outpatient Clinic. The clinic provides consultation, assessment and care for patients with emerging or dependent alcohol and other drug (AOD), behavioural harm and/or addiction. Further investment in these types of programs and supports are needed.

The WA Government is primarily responsible for funding services addressing the harms caused by gambling, however it should increase the funding available to community and health sectors to enable it to fully address the service level requirements that gambling is creating.

The conducting of a public health campaign on the effects of gambling harm would be beneficial in reducing the impact of gambling, and the WA Government implementing such a campaign is one possible policy approach as part of an integrated approach to addressing gambling harm, similar to its road safety campaign, that should be considered.

Federal government

Online gambling regulation is primarily responsibility of the federal government and it is currently from this area where the most damaging harm is occurring. Widespread advertising and the association of gambling with sport are creating significant concern within the community and little seems to be being done to combat it.

The Murphy report provides the government with the blueprint for action to reduce the harm. To this point, the industry lobby appears to have persuaded the government not to address the recommendations in the report. Politically, this is the most difficult area in which to attempt reform and it cannot be done by the State alone.

It will take considerable campaigning and the development of significant community pressure to bring about change but this is where the effort should be directed, and all governments needs to participate in addressing the issue.

8. Recommendations

Advancing Gambling Harm Prevention and Response in Western Australia: Building a More Coordinated, Inclusive, and Evidence-Informed Approach

Fostering Sector Collaboration and Capacity to Support Engagement in Gambling Harm Reduction

Building a coordinated approach within the community services and health sectors is essential to developing a coordinated and sustained response to gambling-related harm in Western Australia.

Establishing formal networks or working groups can help facilitate this collaboration, enabling organisations to co-design approaches, pool resources, and amplify their collective voice. Such efforts can also support the development of shared tools, training, and evidence-gathering practices that build sector-wide capacity. Importantly, this collaborative momentum can lay the groundwork for more effective engagement with government and other stakeholders.

Establish a coordinated advocacy mechanism in WA. This mechanism could take a number of forms including:

Commission an existing WA organisation

Engage an established Western Australian organisation to assume responsibility for coordinating advocacy on gambling-related harm. Under this model, the organisation would be commissioned to integrate this role into its existing portfolio of activities, supported by dedicated funding and clear governance arrangements to ensure strategic leadership, stakeholder coordination and sustained sector-wide engagement.

Establish a new organisation within WA

Facilitate the creation of a new Western Australian entity, led by the community services and public health sectors, specifically tasked with coordinating advocacy on gambling-related harm. This organisation would be purpose-built to provide independent leadership, drive strategic advocacy priorities, build sector capacity and strengthen collaboration across government, service providers and affected communities.

Explore collaborative national partnership models

Investigate alternative mechanisms for coordinating advocacy on gambling-related harm by partnering with organisations operating across Australia. This could include forming a national or multi-state consortium, establishing a shared advocacy platform, or entering into formal partnership agreements with relevant organisations in other jurisdictions. Such models may provide access to broader expertise, national research capability, established advocacy networks, and opportunities to align Western Australia's efforts with national initiatives while retaining a tailored approach to meet local needs.

Priority areas in addressing gambling related harm in WA

Increasing Public and Government Awareness of Gambling-Related Harm in Western Australia.

Promote broader public understanding of the personal, social and community impacts of gambling harm in WA, while encouraging increased recognition and responsiveness from government stakeholders. This includes highlighting the systemic nature of gambling-related harm and the need for policy and funding initiatives that reflect its significance as a public health and social issue.

Explore Legislative Options to Regulate Gambling Advertising and Promotion in Western Australia

Undertake a review of potential state-level legislative measures to address the regulation of gambling advertising and promotional activities. This should include consideration of jurisdictional challenges and assess opportunities to strengthen consumer protections and reduce exposure to gambling-related harm and support implementation of the Murphy reports recommendations to phase out gambling advertising.

Cross-Sector Commitment to Address Gambling-Related Harm

Encourage coordinated action across key social policy sectors, including Mental Health, Alcohol and Other Drugs, Housing and Homelessness, Financial Counselling, Aboriginal Health, and Family and Domestic Violence, to recognise and respond to gambling-related harm. This includes integrating gambling harm into relevant strategies, frameworks, and action plans to ensure a holistic and inclusive approach to prevention and support.

Funding for Service Coordination and Targeted Workforce Training to Address Gambling-Related Harm

Dedicated funding is needed to support the coordination of health and community services and the delivery of targeted training across sectors. This will strengthen the capacity of frontline workers and organisations to identify, respond to, and prevent gambling-related harm through integrated and informed approaches.

Independent Decision-Making and Inclusive Representation in Gambling Harm Policy and Governance

The gambling industry should not be involved in any decision-making related to the prevention and reduction of gambling-related harm. Relevant governance and advisory bodies should include diverse community representation such as public health experts, service providers, researchers, young people and individuals with lived experience to ensure policy and decisions are transparent, evidence-informed, and aligned with community needs.

National advocacy efforts and focus recommendations

Support the full implementation of the Murphy report recommendations

Support the full implementation of the inquiry's recommendations by state, territory, and Commonwealth governments, with a particular focus on those measures that will have the greatest national impact on reducing gambling-related harm. These include phasing out advertising, development of a comprehensive national strategy, establishing a national regulator, and delivering research-based public education.

Support the development and implementation of research-informed warning messages across all forms of gambling product promotion.

Support the development and implementation of research-informed warning messages across all forms of gambling product promotion. These messages should be grounded in behavioural science and public health evidence, designed to counteract the misleading nature of gambling advertising and raise awareness of the risks associated with gambling. Consistent, prominent, and well-tested warnings, similar to those used in tobacco and alcohol regulation, can play a critical role in shifting public perceptions, reducing stigma, and encouraging help-seeking behaviour.

Support strengthened and more transparent regulation of online wagering services based in the Northern Territory

Advocate for strengthened and more transparent regulation of online wagering services based in the Northern Territory, given their national reach and impact on gambling harm in WA. The Northern Territory's relatively permissive regulatory environment and low taxation have attracted the majority of Australia's online gambling operators, limiting the effectiveness of harm reduction efforts across jurisdictions. WA should engage with national policy forums and regulatory bodies to support reforms that ensure consistent consumer protections and targeted harm minimisation strategies for online gambling, regardless of the operator's licensing location.

9. Concluding Comments

The A Path Forward for Reducing Gambling Harm in Western Australia report provides a step toward building a more coordinated, inclusive, and evidence-informed approach to gambling harm prevention and advocacy WA.

These findings of the scoping study highlight the urgent need for WA to adopt a comprehensive, coordinated and well-resourced public health response to gambling-related harm. Despite growing and unequivocal evidence of widespread impacts of gambling, ranging from financial hardship and mental health issues to social disruption, current responses remain limited, with a narrow focus on casino regulation and insufficient attention to emerging risks such as online gambling. Without strategic direction, adequate resources, or a clear mandate, the health and community services sectors are left to address gambling harm incidentally rather than through coordinated, planned, or evidence-informed interventions.

The recommendations set out a pathway for meaningful change. They call for WA to support overdue national action, including the full implementation of the Murphy Report's reforms, strengthened restrictions on gambling advertising, and more consistent national regulation - particularly of online wagering operators headquartered in the Northern Territory's permissive regulatory environment. At the state level, the establishment of a dedicated organisational mechanism to lead gambling harm reduction in WA is essential to drive coordination, accountability, and strategic planning.

Equally critical are cross-sector collaboration, the inclusion of public health experts and people with lived experience in decision-making, and investment in sector coordination and workforce development. These measures recognise that gambling harm intersects with mental health, alcohol and other drugs, housing, financial stress, family and domestic violence, and broader social determinants of health. Only a whole-of-system response can effectively address this complexity.

Advancing these priorities will position Western Australia to reduce gambling-related harm in a meaningful, equitable, and sustainable way. By strengthening regulation, investing in prevention and support, and ensuring that community voices guide policy and governance, we will reduce gambling-related harm and protect individuals, families and the community.