

# Italian situational context

## Is it still possible to prevent pathological gambling?

**So close, so different**



A comparison between the swiss way and the italian approach to gambling

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*Losanna, June 2008*

# Some questions...

- *Is it possible increasing gambling offer and still keeping prevalence and incidence rates stable?*
- *Are these indicators enough to evaluate the social impact of gambling within a community?*
- *Or other indicators should be assessed?*

# Some questions...

- *Symptoms severity expressed by pathological gamblers should be eventually taken into account to evaluate if gambling in a certain Country is being actually held and handled according social responsibility principles?*



# Observing the italian and swiss situation...

*In both States:*

*It dramatically changed in the last 10 years*

*Generally, offer of legal gambling increased*

- *In Switzerland since 1998 a federal law allowed the opening of 22 Casinos (19 of them actually opened and 3 of them very close to the italian border).*
- *In Tessin*
  - *3+1 Casinos are available for about 230.000 residents*
  - *Slot machines in bars were taken away.*
  - *No betting on sports or internet gambling is allowed.*
  - *Lotto and lotteries are held.*

# Observing the italian and swiss situation...



*In Italy since 2003 AAMS (the State Administration of Monopoly) re-organized all legal gambling, promoting and spreading such leisure opportunities almost all over, at a very low access threshold, promoting it as a harmless product:*

- more than 240.000 slot machines in bar,*
- about 700 Bingo were opened,*
- Lotto drawings passed from one to three per week,*
- scartch cards were introduced,*
- as well as new betting on sports stores and corners were opened,*
- more than 500 internet gambling sites were closed; but about 39 were legalized, trend is increasing, etc.*
- Casinos' number remained stable (4, all in Northern Italy)*

# Observing the italian and swiss situation...

**Tessin:**

*“The Swiss Las Vegas”?*



**Italy:**

*“The land of the Diffused Casino”?*

*Thanks to Marilisa Bombi for this definition*



# A framework of shared responsibility

The Reno Model

- Gambling industry
  - Enforce and improve early detection and prevention of critical and pathological gambling
- Client
  - Seek for treatment and follow protective measures
- State
  - Give laws and verify if they are enforced and respected

Thanks to dr Carlevaro for this slide

# Prevention: basic concepts

- Basic concepts
  - Gambling is a leisure activity
  - Gamblers must not bet money they can't afford to lose
- All interventions must focus on
  - Promoting responsible and controlled gambling
  - And, when this is not possible, promoting the gambling stop



**All must go in this direction!**

**Gambling industry, Client and State**

# Clinical observation:

*Since 2000, strict contacts were held between italian and tissinoise health practionners in the addiction field (AND/GAT).*

*Severe differences in the outcome of handling the matter in the two Countries appeared*

*At least according to the patients' severity met into the italian and tissinoise help facilities, swiss clients showed less and less severe problems gambling related than italians.*

# Some suggestions

*Hypotesis about these differences:*

**Different approaches in ....**

- *structural and educational prevention?*
- *harm reduction, gamblers' protection measures and early detection policies?*

**= Different outcomes?**



# Prevention: the 2 typologies

M. Graf (ISPA – *Institut Suisse Prevention des Additions*) defined 2 preventive typologies:

- **Educative prevention**, ment to modify individual behaviors (giving skills and promoting healthy life-styles)
- **Structural prevention**, ment to modify the context (through laws, rules, etc.)

# The swiss way

*The “social concept”*

- *Promote the concentration of gambling in a defined number of specific settings (Casinos) with precise access rules, and an both internal and external control over pathological gambling.*
- *Controller is different from controlled*
- *Clearly identified tasks and responsibilities (Reno model)*

# A framework of shared responsibility

The Reno Model

- Gambling industry
  - Enforce and improve early detection and prevention of critical and pathological gambling
- Client
  - Seek for treatment (available) and follow protective measures (e.g. self-exclusion, banning, controlled re-admissions, etc.)
- State
  - Give laws and verify if they are enforced and respected (n.b. the State's primary focus in ruling is to guarantee welfare and health for his population, as well as social security)

# The italian way

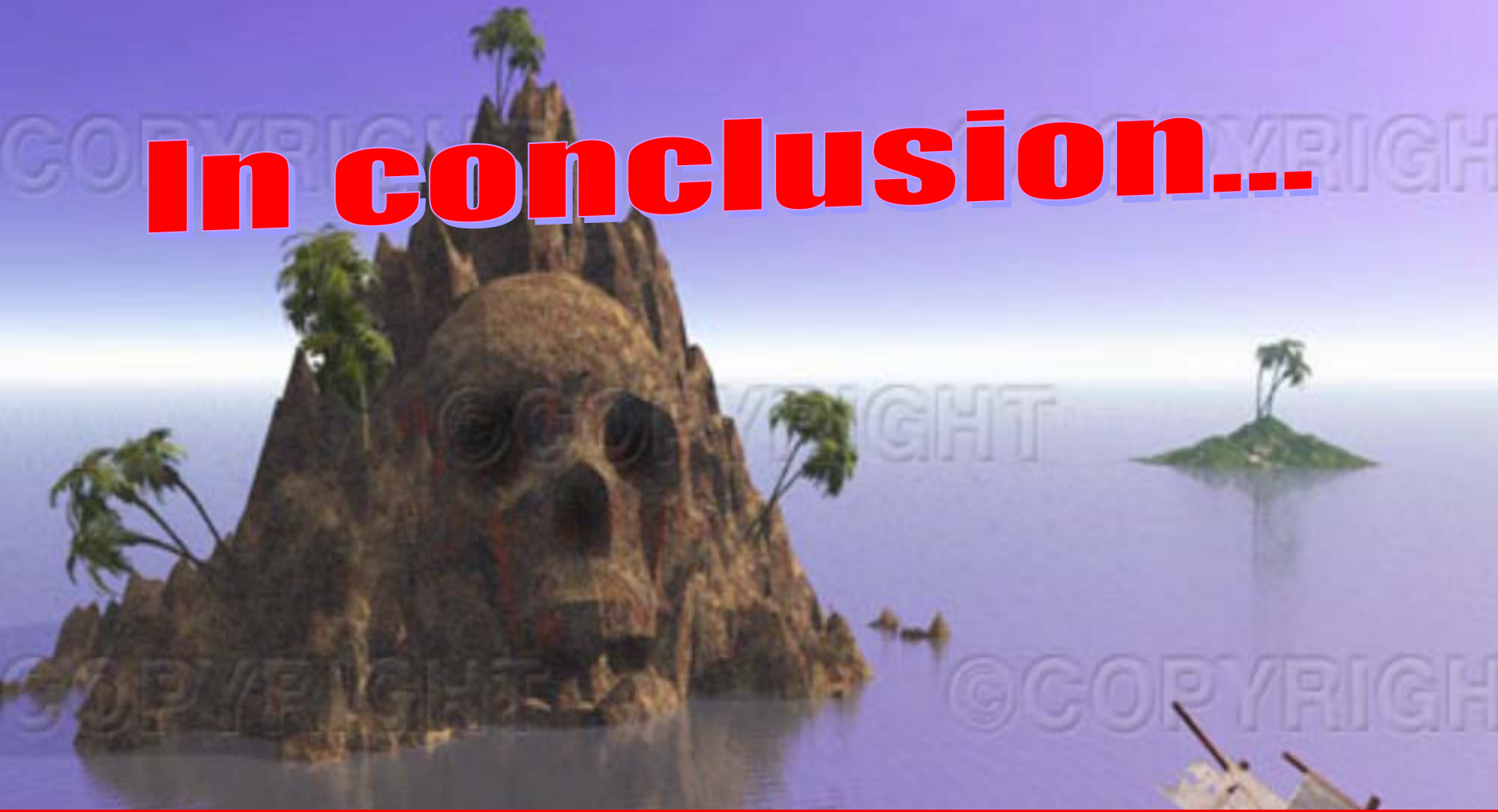
*A weak “social concept” ....*

- *Promote the de-localisation of gambling in a defined number of un-specific settings (Casinos, bars, betting shops and “corners”, internet, tv, bingo hall,...) with precise access rules, but without both internal and external control over pathological gambling.*
- *Controlled are controller of themselves (except for fiscal and legal matters, when double check is insured)*
- *Confused tasks and responsibilities (Reno model)*

# A framework of shared responsibility?

- Gambling industry
  - Fragmented into many operating subjects. Frequently do not enforce and improve early detection and prevention of critical and pathological gambling (not required to do it). Funds for advertisement. Funds for treatment and prevention.
- Client
  - Maybe seek for treatment (which is not always and all over available, free and guaranteed by the State Health service); can't follow protective measures (because they simply do not exist).
- State
  - Give laws and verify if they are enforced and respected only around fiscal and legal matters (n.b. the State's primary focus in ruling is to guarantee itself extra income through gambling fiscal revenues). No funds for treatment and prevention.

**In conclusion...**



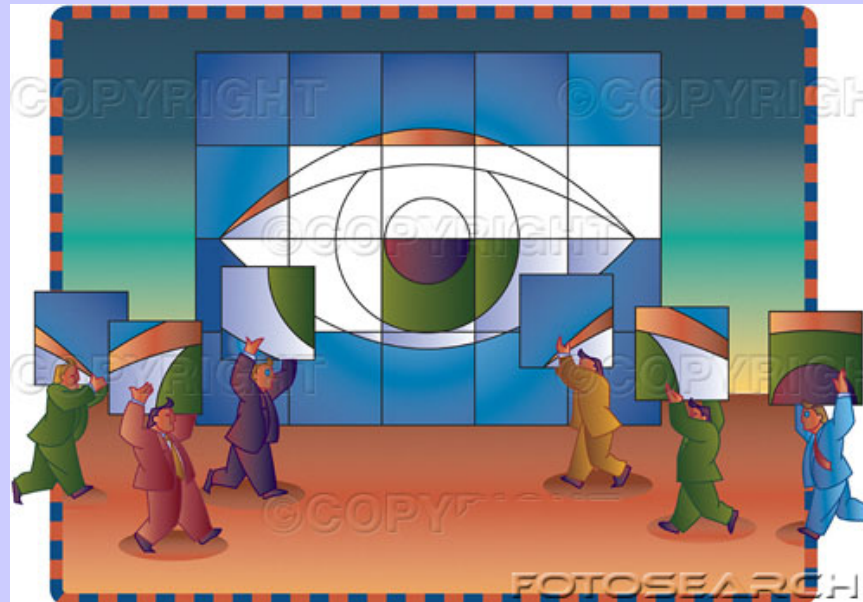
**Gambling  
is not an island!**



**It's part of a  
complex social  
system!**



**Only a composit and comprehensive balance,  
in which benefits and costs are adequately  
evaluated,  
is the long term paying strategy to handle  
such a articulated and complex system.**





**It's very difficult  
to do  
any  
preventive work  
or even  
treatment  
activity  
in such a context!**



**But... prevent  
wasn't it better than treating?**

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# Thanks and see you in Varese!



**9° Convegno Nazionale  
Auto-aiuto e Terapia per i Giocatori d'Azzardo e  
le loro Famiglie, 13.12.2008**

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