

# Non-Stigmatizing & Inclusive Messaging Discussion & Guidelines

## Why Are Doing This Work?

**Treatment Referral/Advertising & Marketing (PG):** Develop and implement non-stigmatizing inclusive marketing promoting help seeking and treatment resources utilization. Identify and test messaging and content designed to reach a range of player segments, from those contemplating change to those actively seeking treatment.

**Player Education/Advertising & Marketing (RG):** Identify and test messaging, content and outreach designed to reframe RG as “safer play” and position RG tools and information as resources to help players make informed choices and enjoy lottery games as fun and entertainment.

The FY24 RG/PG strategic plans calls for us to refine our approach to marketing outreach to advance the promotion of safer play and increase help resource utilization. The first step to this iterative improvement is to approach these topics inclusively, to reduce stigma and resistance to treatment messaging, as well as stigma related resistance to using RG tools and information.

The following document was developed by an industry expert to help us create marketing strategies, develop assets, and create messages to accomplish these goals. The document is loosely divided into Problem Gambling and Responsible Gambling discussions, while understanding that these are a continuum with overlapping considerations.

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## **PROBLEM GAMBLING**

### **Refining Our Problem Gambling Outreach: Focus for FY24**

Currently, Lottery implements sophisticated, data driven media outreach designed primarily to direct players to treatment services. This program has been highly effective in creating general awareness of treatment and targeting players who are farther along the help seeking journey and already experiencing significant harms. That said, we have a significant opportunity to ***reach more people***, earlier and to create more ***relevant messages*** for people at all stages awareness and help seeking. To do this we will focus on:

- **Differentiation in how we message players who are just beginning to experience harm and people who have clinical gambling issues.** In addition to our focus on driving to players to treatment, we have a significant opportunity to message strategies (talking with peers, limit/reduce gambling, tracking app usage) that help players seek appropriate help early and address harms when they begin. Clinically this is called *secondary prevention targeting people who are pre-contemplation or contemplating change*. We are colloquially calling it Sober Curious
- **Move away from our focus on recovery and shift emphasis to “change.”** Research tells us that even people who may meet clinical diagnostic criteria for “disordered gambling” will not relate to “recovery” language. In fact, many simply wish to make changes to what is happening to them related to gambling harms, including stopping or changing how they play. Recovery language is best reserved for people who are in a self-defined process of “recovery,” as opposed to people seeking information to strategies or support to change their gambling risks or harms. The concept of change resonates across all stages of the help seeking journey. It is worth noting that some RG concepts, like limits may be included in our PG outreach.
- **Cascading and contextually relevant messaging:** Addressing stigma and increasing resonances requires more than one message. We will plan to cascade from concepts related to information, to change, to treatment, to recovery. Additionally, we will ensure that these messages occur in the right context – for example we would not promote recovery on a billboard but might in a brochure in a doctor’s office.
- **Focus on Positive Behaviors:** for both PG and RG outreach we will look to focus not on the person but on including a call to action and positive behaviors we are trying to cultivate.

## **How We Talk About People**

**Instead of gamblers:** People who gamble, You, Your family, Guests/Customers/patrons, Players.

**Instead of “problem gamblers”:**

- People who experience gambling harms.
- People affected by gambling.
- People with concerns.
- People who want to change their gambling/what happens when they gamble.
- People with mental health concerns.
- Those impacted by gambling.

**Note:** This language is human focused and not clinical. It is not stigmatizing, and normalizes impacts related to gambling.

### **Words and phrases to avoid**

The Lottery should continue to avoid clinical, colloquial, or other expressions that emphasize or suggest a trait specific to the people who play Lottery games as somehow being deficient. Also, very formal language should be avoided, to humanize and ground non-stigmatizing concepts in every day. Words and expressions not to use include (this is not an exhaustive list):

- Gambler, problem gambler
- Compulsive, pathological
- Gambling addict
- Disordered gambler
- *Individuals* who .... (This is how the police speak, and sometimes clinicians)

### **Avoid labelling groups of people as homogeneous**

- Gen Z, Gen X, Boomer – use specifics instead: e.g., males aged 18-25 who bet on sports.

### **Specific language related to gambling harms and risk**

- Avoid clinical language, e.g., pathological, compulsive, disordered (unless you specifically mean “disordered”); impulsive, addict, addicted.
- Use instead: risk, high risk, harms, experiencing harms, negative impacts, affected by gambling harms; effects of gambling.

## **How We Talk About Seeking Help**

### **Specific language for help resources**

- Avoid clinical language, unless you are speaking to clinical practitioners or in settings where people are receiving interventions related to gambling harms.
- E.g., practitioner, provider, treatment, treatment provider, assessment, treatment planning, recovery, rehabilitation etc.
- Instead use tools, strategies, techniques, seeking change, want to do things differently, change what happens when you gamble.
- For treatment pathways, use:
  - counsellors, trained gambling help professionals, specialists, professionals, qualified gambling counsellors, etc.

## From RG to PG and in-between

### Cultivating Positive Behaviors: Talk About Behaviors Not People



Knowing gambling involves risk



Knowing how to use harm reduction play strategies: one lottery ticket has same mathematical chance of winning as ten do, for example



Setting limits that work for you – limits are good, they help keep the activity enjoyable



Keeping gambling in balance with other important life activities – gambling adding to pleasure, social life etc.



Maintaining the relationships that are important to me - reducing or eliminating negative impacts of my gambling on others



Recognizing signs that change is needed and knowing where and how to access it, ideally *before extreme harms are experienced*



Knowing professional services are available for every Oregonian who is concerned about their own or another's gambling



Knowing how to access these services and developing a sense of what happens when you seek them out

## Cascading & Contextually Relevant Messaging

### The Right Message at the Right Time

Addressing stigma and increasing resonances requires more than one message. Cascade from concepts related to information, to change, to treatment, to recovery. Reach people where they are in their help seeking journey.

#### Information

- Qualified professionals to answer your questions: e.g. how do I know if my son's gambling is normal; e.g. what can someone do if they think they are gambling too much; e.g. self-tests to assess my gambling (Problem Gambling Severity Index).

#### Change

- Gamble less, gamble differently, make different decisions, communicate more effectively with someone you are concerned about, set your own limits, choose to play differently, quite or cut down.

#### Treatment

- Call it more than one thing and emphasize individual choice: "counseling", talking with a professional about changing how you gamble, getting information and advice to support someone I care about, the choice is yours – call and see if it's right for you.

#### Recovery Messages

- Focuses on breaking stigma, isolation and typically extreme harms: e.g. there is hope, you are not alone, recovery starts here. **It is vital to note that these messages should not be the only ones connected to treatment.**

## Cascading & Contextually Relevant Messaging (continued)

### **In the Right Place**

In addition to reaching people with the right message, it is important to align the message with the environment in which it appears.

- **Broad based- for all people: websites, pamphlets, general information, PSA's, posters, billboards**

The objective is to raise awareness: e.g., generate an appetite for more information. This aligns with broad-based messaging about gambling risk, harms, and strategies. People with extreme harms, or who meet the clinical criteria for Disordered Gambling can be in this audience, as can people who gamble recreationally without any serious harms. For broad-based messaging, it is important not to emphasize extreme harms when discussing treatment. Instead, the goal is **to raise awareness that** there is a network available for people who are concerned about gambling: that treatment is free and qualified, and it helps people at various stages of gambling.

Inclusive broad-based treatment messages along these concepts:

- Want to change or have a question about gambling: contact OPRG.
- Counseling is free and available for anyone concerned about gambling.
- Professional treatment is fully available, at no cost to Oregonians.
- Did you know, in Oregon, support for gambling concerns is free and readily available?
- OPRG- You don't have to be at the end of your rope to talk with someone about gambling.
- People affected by another's gambling can call for information and support.

**Change talk** should be emphasized. Do not use "Recovery" language for broad based campaigns. Recovery language should be titrated in advertising specifically to people who are experiencing extreme harms. And even with that population, many people will not find "recovery" a relatable goal; therefore, it is important to stage messaging to enable people who meet clinical and sub-clinical thresholds of gambling harm to choose what resonates best with their goals.

Inclusive broad-based treatment messages along these concepts:

- Did you know you can talk with someone about changing what happens when you gamble?
- In Oregon, anyone can access professional support to discuss changing gambling behaviors.
- Gambling doesn't have to become a problem. Free support is available for anyone.



## **Cascading & Contextually Relevant Messaging (continued)**

- **In-venue and in-game messaging; in communities and settings where people who are higher risk for gambling harms are located (GP Offices, Credit/Debt Counseling); Lottery website, treatment websites.**

This is a stage when someone is actively engaged in and wondering about gambling risk/harms. Messaging at this stage could include:

- “How much is too much” kind of questions.
- “Should I be concerned about my husband’s gambling?”
- Information to support movement toward change: e.g., did you know that counsellors can help you learn how to talk about gambling with your partner/children in ways that are successful.

- **OPGR website and treatment messaging review: treatment settings, including community-based settings where clinical or gambling-specific interventions are housed – GP Offices, Credit Counseling**

This is for people who are actively seeking change, and while gambling treatment is the number one option, there are other professional services that can support people affected by gambling harms, e.g., financial/credit/debt advisors, mental health practitioners, legal counsel, etc. These should be promoted as appropriate.

## Considerations/Modifications for Concerned Others

This is a group of people who constitute a large percentage of help-seekers for gambling harms. Typically, they are unaware or under aware of the options for support, the confidentiality and specificity of services available to them, and the impact a counsellor can support them to have in interacting with someone who is gambling.

- Do not **solely** use “there is help, there is hope” messaging. (People seriously affected by another’s gambling feel very, very isolated, and this message is hard to absorb). Instead, be specific: there is free counseling.....
- Always stress confidentiality and that you can access these services without the person who gambles being involved: they are there for YOU.
- Instead, use tangible examples and strategies that professionals can help with
- Understand how gambling can affect someone, i.e., why they do what they do.
- Learn how to approach the subject with the person who gambles.
- Get help to understand the difference between healthy and harmful gambling.
- For treatment seeking people.
- Practical support to manage day to day challenges, then specific examples.
- e.g., your finances.
- Parenting and family concerns.
- Legal and other questions.

## **OPGR Refinement – Considerations & Examples**

### **Thoughts and examples for OPGR refresh/update**

Below are some samples from other public health-oriented systems that could be emulated as the OPGR website is refined, stigmatizing language removed, and clearer calls to action that are inclusive and developed.

The themes that these examples embody are reframing “treatment” to positive change talk.

- Adding non-treatment options (information to make healthier play decisions, other change supports)
- Testimonials about what happens in gambling counseling – human examples to help demystify and de-stigmatize counseling.
- Reposition “Treatment” AKA counseling, as a human interaction. It is a form of self care.
- With a professional, where their sole purpose is to provide you qualified support to make decisions about your gambling and the consequences in the context of your own life.
- Emphasize personal choice, autonomy, and control.
- Normalize the choice to engage in counseling – treatment is available widely in Oregon because it serves a very practical function: emphasize the practical aspects that are tangible: e.g. how to decide how much you want to play; changing what happens when you play; settling limits you control and enjoy; stopping negative consequences/rebuilding family relationships etc.
- Ensure there is content for people meeting sub-clinical thresholds of gambling harms, e.g., you don’t have to lose your shirt to benefit from a chat with a counsellor – they can help you decide whether or how to cut down, for example.

<https://responsiblegambling.vic.gov.au/reducing-harm/awareness-campaigns/>

<https://www.pgf.nz/>

<https://www.camh.ca/en/your-care/programs-and-services/problem-gambling-- technology-use-treatment>

<https://responsiblegambling.vic.gov.au/reducing-harm/awareness-campaigns/call-someone-who-gets-it/#counsellor-videos>

<https://youtu.be/VGcVTC67T9g>

## **RESPONSIBLE GAMBLING**

### **Refining Our Responsible Gambling Outreach: Focus for FY24**

Currently, Lottery's RG outreach is embedded in our games and services marketing, designed primarily to normalize safer play behaviors as for all players all the time. For FY24 we will continue with this strategy while make some modifications in how we position and talk about RG, how we include RG at every stage of the customer journey. Additionally, we will enhance RG specific messaging and outreach. We will do this by:

**Begin at the beginning:** Appearing at beginning of their experience with the Lottery, and throughout their play journey, people who gamble will be exposed to multiple, consistent, and positive messaging. They will be less likely to feel ambushed, defensive, or surprised should they at some point in their play encounter more help-oriented messaging, delivered sensitively and at the right time.

**Reframe "RG" to reduce stigma and resonate with more with all customers:** on its face the term responsible gambling is stigmatizing and judgmental. We will explore more resonant, positive language and messaging in our marketing outreach.

**Focus on positive behaviors and calls to action:** when developing RG messaging, we will ensure there is a call to action. What, specifically and concretely, do we want people to do with the message? What actions would indicate that they have internalized and utilized these safer play strategies?

## **Reframing Responsible Gambling**

Today, the research, prevention and treatment nomenclature globally has shifted move away from Responsible Gambling. Below are some of the current alternatives. They are arguably less stigmatizing, and there may be more terms that have not yet been invented, that are worthy of testing with Oregonians.

- Safe/Safer gambling/play.
- Lower risk gambling/low risk play.
- Healthy play/gambling health.
- Changing how you play.
- Changing what happens when you play.
- Cutting down/choosing to play differently.
- Being in control- Play your way.

**From RG to PG and in-between -**  
**Cultivating Positive Behaviors: Talk About Behaviors Not People**



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Setting limits that work for you – limits are good, they help keep the activity enjoyable



Keeping gambling in balance with other important life activities – gambling adding to pleasure, social life etc.



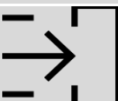
Maintaining the relationships that are important to me - reducing or eliminating negative impacts of my gambling on others



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## Language Considerations

- Limit setting language- there is general agreement in this scoping activity that this using “limits” versus “budgets” may be more effective, less stigmatizing, and in scope for operators to suggest to customers.
- In the Positive Play Research commissioned by the Lottery, less than 15% of customers knew about the existing RG tools. All limit-setting tools should be introduced at the beginning of customer journey and should emphasize customer care and customer experience (positive outcomes).
- Also in the Positive Play research, gambling literacy was the lowest domain in the Positive Play scale variables, suggesting that safer gambling strategies may benefit from accessible gambling literacy information: i.e., what do we want people to KNOW and what do we want them to DO with the safer gambling strategy?
  - *Gambling is not a good way to make money.*
  - *92% of people set a budget: do you?*

## **Sample RG Messaging & Taglines**

**These taglines tested well in the most extensive RG messaging study conducted to date.**

1. Chances are you're about to lose.
2. The odds are stacked against you.
3. Think. Is this a bet you really want to place?
4. If in doubt opt out.
5. Tired of that losing feeling?
6. Betting's better with boundaries. (Set a deposit limit.)
7. 92% of people set limits. Do you?
8. You win some. You lose more.
9. What are you prepared to lose today? (Set a deposit limit)
10. Imagine what you could be buying instead.