

November 8, 2004

Honourable Joe Cordiano  
Minister of Economic Development and Trade  
Hearst Block, 8th Floor, 900 Bay St  
Toronto Ontario M7A 2E1

Dear Minister Cordiano:

We understand that you will be conducting a five-month operational review of the gaming industry in Ontario and the role of the Ontario Lottery and Gaming Corporation (OLGC). We are pleased that you will be undertaking this review and that you have included problem gambling as part of it. Gaming in Ontario has expanded considerably over the last number of years bringing with it significant economic benefits but also social implications that are of grave concern to the Centre for Addiction and Mental Health (CAMH).

Recent media reports have highlighted the fact that less than 5% of people who gamble generate the bulk of revenue in Ontario's casinos. These individuals have moderate to severe gambling problems underscoring the seriousness of problem gambling and the need for comprehensive and proactive responses to this public health issue.

CAMH is the largest addiction and mental health facility in Canada and we have particular expertise in the area of problem gambling research, prevention and treatment. In addition to the research cited above, our research evidence also tell us that:

- An increase in the absolute number of people gambling will increase the absolute number of people who experience problems due to gambling activity.
- Over 449,000 Ontarians have a moderate to serious problem with gambling - the availability and proximity of gambling venues and products has a direct and immediate impact on these numbers.
- Lower income households spend proportionately more on gambling than higher income households.
- The social costs of problem gambling include: dysfunction within family relationships, economic hardship, violence and abuse, disruption of growth and development of children.
- Current literature indicates that there is a greater prevalence of mood disorders including major depressive and bipolar disorders amongst pathological gamblers<sup>1</sup>.

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<sup>1</sup> The Mood Disorders Society of Canada (2004). *Mood Disorders and Problem Gambling: Cause, Effect or Cause for Concern? A Review of Literature.*

- One in five pathological gamblers has contemplated suicide<sup>2</sup>.
- Approximately one-in-eight (13%) of students surveyed reported a gambling problem, while 6% reported indicators of pathological gambling<sup>3</sup>.
- Only a small percentage of people experiencing problems related to gambling seek help from specialized treatment programs.

The government's review of the gaming industry is an important opportunity to ensure that interventions to reduce these social harms are in place. We urge you to make prevention, early intervention and harm reduction strategies key components of an effective approach to problem gambling. To this end, we recommend that you consult with public health organizations with expertise in research, prevention and treatment of problem gambling.

In addition, gambling problems are present at higher rates among people who use correctional, health and social services, as well as mental health and substance use services. In addition to developing the network of specialized gambling services across Ontario, we think it is important to assist a broad set of non-specialist service providers to do a better job of identifying and referring people with gambling problems to the help that they require.

CAMH would like to work with your government and participate in the review process to talk about some specific strategies to appropriately manage the social reality of gambling in Ontario.

Our suggestions include:

- Introducing a public education program about gambling in communities where casinos or other legal, illegal and informal types of gambling initiatives are being introduced;
- Encouraging social responsibility from the management of casinos including proper training of staff to teach them how to identify someone with a potential gambling problem, the placement of ATMs outside the casinos, the prohibition of 'air miles' and other incentives that encourage gambling;
- Developing socially responsible practices that extend to lottery terminal operators, bingo halls as well as casinos and that include practices about how they advertise/market their products, train their staff, respond to customers who are "in trouble", and manage their operations;
- Funding for broad-based public education/prevention programs and accessible problem gambling services to ensure people who need help for their gambling problem can find help. We need to destigmatize this public health issue, ensure we have a variety of treatment options and ensure allied professional systems are able to identify and respond well to people affected by problem gambling;
- Collaboration between problem gambling service providers and gambling venues around such issues as self-exclusion and support for distressed gamblers;
- Developing evidence-based approaches to the way we prevent and respond to problem gambling. CAMH is eager to partner with the government to pilot and evaluate measures designed to prevent and respond to this public health concern;

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<sup>2</sup> Statistics Canada (2002). *Canadian Community Health Survey 1.2 Mental Health and Well-Being*.

<sup>3</sup> Centre for Addiction and Mental Health (May 2001). *The Mental Health and Well-Being of Ontario Students Report*.

In addition to these recommendations, CAMH believes that a Centre for Problem Gambling that is a hub resource for problem gamblers, their families and service providers should be established. CAMH has made this a key priority and has developed a proposal to set up such a Centre. We have had discussions with staff in the Ministry of Health and Long Term Care about our goals in this area.

Minister, the rapid expansion of gambling represents a significant public health concern that challenges our values, quality of life and public priorities. It must be understood that as the variety of forms of gambling in Ontario increases, it will be increasingly important to have effective evidence-based prevention, early intervention and treatment strategies. Adoption of a harm reduction approach that addresses the underlying risk factors for problem gambling (social, behavioural, economic, political) and that utilizes coordinated health promotion strategies involving policy, individual and community based interventions is essential.

We would like to request a meeting with you to discuss these issues further and will follow up with your staff to find a suitable time. We look forward to working with you and your government in the coming months to ensure a comprehensive approach to responsible and problem gambling.

Yours Sincerely,

Paul E. Garfinkel, MD, FRCP(C)  
President and CEO