

Applying Public Health Learnings to Safer Gambling Communications

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Executive Summary

Ipsos UK have been commissioned by GambleAware to undertake a review of evidence to inform what works in safer gambling communications.

As part of this review, Ipsos analysed evidence from a number of formative evaluations and critical appraisals, as well as academic publications of both existing gambling communication campaigns and those from relevant adjacent public health sectors. The following executive summary outlines the key findings from the review.

Overview

The overall aim of this review was to conduct a synthesis of the available evidence to inform the general principles of best practice primarily within public health media communications and messaging, particularly in adjacent health sectors, as well as safer gambling and gambling harm prevention.

This review primarily focusses on the specifics of audience targeting and appropriate framing of language for public health messages. The findings will help inform GambleAware's own public health messaging, and make wider recommendations across the gambling sector.

The term safer gambling messaging here relates to communications campaigns and wider marketing activity that seek to address gambling-related harms through promoting actions both individuals and society can take to achieve safety from gambling harms. This forms part of the remit of GambleAware as the leading commissioner of prevention and treatment services for gambling harms in Great Britain. Safer gambling promotes access to advice, tools, support and treatment as required to prevent or minimise gambling related harm (e.g., by setting limits to ensure individuals keep track of the time and money they spend gambling, and to signpost to support).¹ Gambling related harms are defined as the adverse impacts from gambling behaviours on the health and wellbeing of individuals, families, communities and society. These harms impact on people's resources, relationships and health.²

Two key themes of exploration were identified as in scope for this review, reflecting the key decisions facing commissioners and architects of public health messaging and social marketing. These are:

- 1) Audience targeting: Individual vs. Society.** An exploration of public health campaigns that have focussed on placing the onus on individuals to change their behaviour, vs. campaigns that target societal change or systems-based issues.
- 2) Messaging & Framing: Hopeful vs. Harmful.** A consideration of campaigns that communicate hopeful or positive message framing vs. harmful or negative message framing. We consider the evidence on what works for different audiences and in what context.

¹ GambleAware: Keeping people safe from gambling harms: A briefing note, 2021.

² Gambling Commission: Problem gambling vs gambling-related harms: An explanation of the difference between problem gambling and gambling-related harms. <https://www.gamblingcommission.gov.uk/statistics-and-research/publication/problem-gambling-vs-gambling-related-harms>

It is worth noting that these two themes form the scope of this paper, and as such this review primarily focusses on the specifics of audience targeting and appropriate framing of language for public health messages. We recognise there are other frameworks that such analysis could be taken within, and messaging is not the only consideration when implementing best practice (e.g. media buying, marketing tactics, customer journeys). It should also be noted that communications campaigns are not the only way to promote safer gambling initiatives and reduce gambling-related harms, and should only form part of a much broader programme across support organisations and the gambling industry. Without effective support structures in place for campaigns to signpost to, there are limitations on the impact of any communications intending to change behaviour.

Further information as to why these themes were explored can be found in the Methodology section of the full report (see appendix).

Key findings & recommendations

Audience targeting: Individual vs. Society

Public health campaigns should consider the amount of agency held by an individual, and avoid the risk of placing too much onus on individuals at the expense of action from wider society.

This is particularly important when for communication campaigns that seek to address behaviours or circumstances that may be out of the control of the individual as a decision-making agent.

There is some evidence that taboo subjects are better framed as a societal issue, to avoid instances of othering. Targeting individuals' behaviours (e.g. excessive smoking, alcohol use, gambling) by contrasting with an ideal 'healthy' individual risks shaming people. This is particularly important with contentious issues or behaviours that may be associated with mental health disorders.

Within the safer gambling sector, it is important to distinguish between messaging that is targeted at individuals at risk, and non-targeted messaging that is aimed at the general population. There should be no 'one size fits all' approach to audience targeting in gambling communications with a national focus. Different personality types and personal circumstances should also be considered when designing campaigns, as there are a multitude of factors that lead to gambling harms.

Messages that encourage self-appraisal can be effective in gambling behaviour change, but questions remain on the impact of this at the highest risk of harm. Evidence suggests those who gamble respond well to setting their own self-determined boundaries; however, it is important to consider wider external factors such as the influence of different gambling environments (e.g. betting shops and online betting sites) that may impact the audience's ability to do so, particularly amongst those at the highest risk of harms.

'Nudge' interventions are most effective when linked to a clear benefit and rationale. Evidence suggests that the effects on behaviour change might be short-term unless recipients understand the longer-term value of changing their behaviour.

Promoting smaller steps of change appears to be effective in health communications. Evidence suggests that messages that spur immediate action (e.g. information seeking behaviours) are more likely to elicit positive behaviour change; setting a suitable and realistic timeframe in order to successfully implement change will further help measure the appropriateness of achieving outcomes.

There is some evidence that calls to action should focus on specific behaviours or tools for those at risk of harms to access, and this should be front and centre of the messaging.

Specifically, findings show that gambling communications should focus awareness raising on explicit harm-reduction tools or strategies that are accessible and easy to find.

Messaging and framing: Hopeful vs. harmful

A review of adjacent sectors in social marketing suggests that fundamentally, messages need to be audience-appropriate and evidence based. It is important to build an evidence base among the campaign target audience to decide how to frame messages, either positively or negatively. It should also be noted that campaigns tend not to be explicitly one or the other, and there are often more nuanced messages within individual campaigns. This review looks at learnings to inform best practice in the tone and framing of messaging.

Gambling messaging should also be explicit and avoid the use of ambiguous, neutral language or industry jargon. It is important to use language that target audiences recognise and will be motivated by.

Adopting a distinctive and consistent branding of assets and call to action will improve salience and future impact. Repeated exposure to standardised messaging will improve resonance, cut through and engagement. However, any consistent or long-running messages across different campaigns should be periodically reviewed and evaluated to reflect current thinking on effective ways to communicate harm-reduction, and ensure they do not lose impact over time.

Positive framing should be focussed on the benefits of changing/quitting negative behaviours, and avoid promoting the behaviour itself. Some campaigns have been criticised for placing too much focus on resonating with the audience through positive tone or imagery, and inadvertently promoting the product or behaviour that the campaign is designed to warn against.

Positive framing can be motivational in safer gambling messages, but this should also be sincere (i.e. not too jovial given public health messaging can cover sensitive issues). Examples of this include communicating collective benefits of behaviour change as a motivational lever for individuals to take action.

Campaigns must consider the use of a jovial tone when communicating gambling safety messaging. Humour and positive framing can be effective and motivating but should not act as a standalone message – it should tie back to a definitive call to action and/or behavioural ask focussed on reducing harms.

Similarly, use of positive imagery can be impactful in delivering harms messaging, but images must be audience appropriate. Positive imagery and text may resonate with those at the highest risk of harm and help reduce stigmatisation of those who are experiencing gambling harm as they are often portrayed negatively within the media as well as amongst wider society.

Message framing should be explicit and address potential harms, and avoid promoting risky behaviours. Some health campaigns have been criticised in their evaluation for using language that does not specifically address harms that could result from certain behaviours.

Across all sectors, negative framing / focus on harms needs to avoid “shaming” or “stigmatising”. Communications should consider the different domains of stigma, including external stigma of particular individuals or groups, as well as internalised stigma. There is limited evidence on whether hard-hitting messages have a positive impact by disrupting those at-risk or have an adverse effect by stigmatising the audience.

Avoiding stigmatising messaging is also highlighted as a problem in gambling specific messaging, particularly with how language used influences perceptions of those who gamble. Communications should be careful not to imply blame on those who gamble for their actions.

Messages should avoid being overly simplistic in their framing of ‘safer’ gambling. Messages that look to present avoiding gambling harm as a simple solution may risk the perception that the campaign is not aimed at more experienced gamblers or those at the highest risk of harms.

Warning messages should challenge erroneous beliefs of those who show signs of at-risk behaviour, particularly considering that some who gamble may be ‘in the zone’ or ‘chasing losses’ while exposed to the communications and therefore messages may need to be more disruptive.



01

Introduction



1 Introduction

In recent years, there have been several national campaigns in the U.K. that seek to address gambling-related harms through mass media communications. While formative evaluations of campaigns such as “When The Fun Stops Stop” (Senet/Betting and Gaming Council), and “Bet Regret” (GambleAware) provide evidence of the impact of specific communications, little work has been done to assess the landscape of gambling communications holistically, in order to draw learnings on the effectiveness of safer gambling messaging and apply best practice from adjacent sectors to the area of gambling harms.

The term safer gambling messaging here relates to communications campaigns and wider marketing activity that seek to address gambling-related harms through promoting actions both individuals and society can take to achieve safety from gambling harms. This forms part of the remit of GambleAware as the leading commissioner of prevention and treatment services for gambling harms in Great Britain. Safer gambling promotes access to advice, tools, support and treatment as required to prevent or minimise gambling related harm (e.g., by setting limits to ensure individuals keep track of the time and money they spend gambling, and to signpost to support),³ Gambling related harms are defined as the adverse impacts from gambling behaviours on the health and wellbeing of individuals, families, communities and society. These harms impact on people’s resources, relationships and health.⁴

GambleAware commissioned Ipsos UK to conduct a synthesis of the available evidence to inform the general principles of best practice of effective messaging within media communications and social marketing, particularly in adjacent health sectors (see methodology for further details), as well as safer gambling and gambling harm prevention.

The secondary aim of the project was to identify what we know, and importantly what we don’t know, on the impact of safer gambling messaging on actual behaviours, allowing GambleAware to commission further research/activities on the topic. This work sets out some important considerations for future campaigns as the starting point for a longer-term programme of work.

To inform the primary objective, the review considered two broad thematic approaches (‘individual vs. society’ and ‘hopeful vs. harmful’), identified as areas where there are unknowns, or significant academic debate in adjacent sectors.

Below we summarise the rationale behind each chapter of the main body of this report. Further detail of the approach and source appraisal can be found in chapter 6 (appendix).

Chapter 2: Individual vs. Society: learnings on identifying appropriate audiences for public health campaigns

This thematic approach analyses the merits of different ways of targeting audiences in both adjacent sectors and safer gambling communications. Many campaigns have focused on **individual** action, for

³ GambleAware: Keeping people safe from gambling harms: A briefing note, 2021.

⁴ Gambling Commission: Problem gambling vs gambling-related harms: An explanation of the difference between problem gambling and gambling-related harms. <https://www.gamblingcommission.gov.uk/statistics-and-research/publication/problem-gambling-vs-gambling-related-harms>

example, by presenting a behaviour as something that requires an individual to take charge of their own outcomes. Conversely, there have been some non-targeted campaigns that have aimed to increase awareness of harmful behaviour amongst wider **society**. While there are ultimately pros and cons of both, it has been argued that campaigns should not focus solely on one or the other, and instead consider both target populations and society as a whole as salient audiences in social change processes.⁵ Therefore this chapter explores learnings on best practice when communicating with different audiences and considers the balance of encouraging individual level behaviour change vs. focussing on societal or system-based changes.

Chapter 3: Hopeful vs. Harmful: reflections on messaging & framing in public health communications

In chapter three we explore different types of messaging and framing deployed by adjacent health and gambling sector communications campaigns. This chapter has a particular focus on comparing **hopeful** or 'positive gain' framing, compared to **harmful** or 'negative/loss framing' and how evidence points to where each is best used (or where it shouldn't be used, and why). Existing literature highlights the importance of getting such framing right, and there is little consensus in existing evidence on what works. For example, different studies have shown gain-framed (positive) and loss-framed (negative) messages can both have desired effects when it comes to smoking, but do agree that understanding the target audience and tailored messaging are key.^{6 7} This chapter seeks to use the evidence across other public health sectors and as far as possible apply this to gambling harm prevention.

Chapter 4: Strategic insights for safer gambling communications: recommendations to inform future gambling harm prevention campaigns

This chapter looks to bring together the evidence on best practice within the area of safer gambling and adjacent public health campaigns, and provides strategic recommendations for future campaigns.

⁵ Rice, Ronald & Atkin, Charles K, Public Communications Campaigns: Theoretical Principles and Practical Applications, 2009.

⁶ Zexin Ma & Xiaoli Nan, Positive Facts, Negative Stories: Message Framing as a Moderator of Narrative Persuasion in Antismoking Communication, Health Communication, 2018.

⁷ Toll, Benjamin et al. Comparing Gain- and Loss-Framed Messages for Smoking Cessation With Sustained-Release Bupropion: A Randomized Controlled Trial, 2007

2 Individual vs. society

This section considers the identification of target audiences and associated framing of public health communications and behaviour change campaigns. It seeks to assess the merits of targeting messaging at individuals and specific groups, or at societies and wider populations – or in other words, asking whether individuals or broader society are perceived to be responsible for changing a behaviour.

The findings suggest that there is no universally successful approach – both approaches are capable of being successful, and both can be problematic if not evidence based or carefully considered. It must also be considered that the policy area and type of behaviour often shape which is the better approach. However, the literature raises several key considerations for future public health campaigns.

Key findings

- The early formation of campaigns should consider the amount of agency held by an individual, and avoid the risk of placing too much onus on individuals at the expense of action from wider society
- There is some evidence that taboo subjects are better framed as a societal issue, to avoid instances of othering
- However, within the safer gambling sector, it is important to distinguish between messaging targeted at individuals at risk, and non-targeted messaging aimed at the general population
- Some evidence that encouraging self-appraisal can result in safer gambling, although potentially less so on those at highest risk of harms
- Nudge interventions can be effective when linked to a clear, immediate, and attainable benefit, although may not deliver sustained long-term behaviour change
- Behavioural call-to-actions that ask for small step and incremental changes appear to be effective



2.1 The early formation of campaigns should consider the amount of agency held by an individual, and avoid the risk of placing too much onus on individuals at the expense of action from wider society

Findings from this review suggest that the amount of **agency** individuals are suggested to use in a campaign is a fundamental determinant of how, and for whom, the campaign works.

Many public health campaigns focus on encouraging simple and easy to follow self-regulatory messages to encourage positive behaviour change. However, encouraging self-regulatory measures is sometimes seen as **ineffective in messaging**, particularly those that focus on harms from negative behaviours such as drinking disorders. This is because often self-defined concepts such as ‘moderate consumption’ are subjective and the implication is that consumption ought to be guided by self-defined limits, rather than explicitly requiring people to consume less or quit, and giving them the means in which to do so. Therefore, some campaign messaging has been criticised for putting too much onus on the individual to take agency over their own actions purposefully.

For example, the “[THINK! Cycling Safety](#)” campaign was criticised by commentators for placing too much emphasis on the role of the individual cyclist, by asking them to hang back from traffic to avoid being physically harmed. The campaign was accused by organisations such as *Cycling UK* for “victim blaming”, as the messaging places emphasis on the prospective victim to change their behaviour as opposed to focussing on the perpetrator, in this case potentially dangerous drivers⁸. This suggests an important factor to consider when thinking about promoting individual based action is how far the individual has actual agency or control over an action, and which factors may externally influence this. It also reiterates the assertion that many campaigns do not use behaviour change models such as “**COM-B**” (i.e. **C**apability, **O**pportunity, and **M**otivation - **B**ehaviour) to underpin their behavioural messages.

Several sources of analysis of public health messaging have suggested that the motivations of industry-funded campaigns have led to a misguided focus on encouraging individual action. Both *Drinkaware* (UK) and *Drinkwise* (Australia) campaigns have been criticised for their use of “SAPROS” (social aspects public relations organisations) to develop messaging that diverts attention away from population level messaging to encouraging individual action⁹.

Petticrew et al. conducted an analysis of Diageo’s “*Stop Out of Control Drinking*”¹⁰ campaign in Ireland and criticises the framing of the campaign messaging as an individual behavioural issue, as opposed to a public health one, (suggested by Petticrew et al. as “industry tactics”). The criticism here is that it takes away the accountability of the industry and public bodies to address the mass consumption of alcohol, and places accusations on the individual behaviour for their choice. Petticrew et al. claim the campaign fails to support individuals to make positive behaviour changes because it does not carry a legitimate or genuine health warning; it does not ask the individual to drink less, nor does it serve as an educational campaign (i.e. point individuals to ways in which they can cut out drinking). Instead, it focusses on the need to address the resulting anti-social behaviour from drinking, so the behaviour is framed as the problem, not the amount consumed. This ignores other external influences such as vast availability of alcohol and relatively cheap prices¹¹.

⁸ Dollimore, D. No turning back for THINK campaign which just keeps digging. 2016: <https://www.cyclinguk.org/news/20161004-turning-back-think-campaign-just-keeps-digging>.

⁹ JMcCambridge, J. et al. Be aware of Drinkaware, 2013: <https://onlinelibrary.wiley.com/doi/10.1111/add.12356>.

¹⁰ Diageo: Stop Out of Control Drinking in Ireland, 2016’ *Campaign is no longer in public domain.

¹¹ Petticrew, M. et al. Diageo’s ‘Stop Out of Control Drinking in Ireland, an analysis’. 2016.

The motivations of these campaigns have been questioned because their messaging ignores the fact that disorderly drinking culture can be a result of other socio-economic factors, broader societal issues, and places emphasis on individuals. Similar conclusions are drawn from the van Schalkwyk et al. evaluation of the “When The Fun Stops, Stop” campaign. It criticises the vague and ambiguous framing of the problem and subsequent messaging which implies that gambling is typically undertaken safely (inferred from the use of the word “fun”) by most people who gamble. This further suggests that those that experience gambling-related harm are a minority that lack control and are unable to take individual responsibility for stopping when they are no longer having fun¹². Therefore, these campaigns take an individual behavioural approach as opposed to a collective public health approach to tackling the problem.



Implications for safer gambling communication^{13,14}

A key thing to consider is how “safer gambling” is now defined, and the amount of agency held by those who gamble. It is argued that the gambling industry implies that harm emerges from the lack of control / irresponsibility from the individual gambling. Academic experts acknowledge that while those who gamble are decision making agents when it comes to their own behaviour, they argue that safer gambling is an outcome rather than an activity, and is only achieved through a combination of individual action, industry responsibility, and legislation.

Future safer gambling communications should therefore explore the extent to which it is appropriate and feasible to acknowledge the wider gambling context and avoid risk of presenting safer gambling as only the responsibility of individuals, and not the wider gambling industry or the Government.

2.2 There is some evidence that taboo subjects are better framed as a societal issue, to avoid effects of othering

When assessing whether messages should be targeted at individuals, there may be a need to make a clear distinction between public health issues that are “lifestyle choices” (e.g. alcohol and smoking) and those that aren’t, and under which circumstances. By categorising certain health issues as lifestyle choices, campaigns run the risk of reinforcing deeply held beliefs that health issues are entirely within the individual’s control. This shifts the brunt of responsibility onto them and away from society wide problems, the conduct of industries, and the impact of marketing that promotes unhealthy behaviours.

There is some evidence that **typically taboo subjects** may be more successful in framing campaigns **as a societal problem** to avoid “othering” (i.e. shaming those following a certain behaviour as “them” and labelling everyone else as “us”). “Othering” has been identified as problematic in health promotion, due to the idea that there is an ideal healthy citizen and those following unhealthy behaviours are not normal. This ignores several external environmental factors that may be the root cause of certain behaviours, and can further exacerbate stigma of certain individuals or groups (explored further later in

¹² van Schalkwyk, M. et al. “When The Fun Stops, Stop”: An analysis of the provenance, framing and evidence of a ‘responsible gambling’ campaign. 2021.

¹³ Blaszczynski, A. et al. Clarifying Responsible Gambling and its Concept of Responsibility, 2021.

¹⁴ van Schalkwyk, M. et al. The politics and fantasy of the gambling education discourse: An analysis of gambling-industry funded youth education programmes in the UK. 2022.

this chapter)¹⁵. Similarly, perceptions of gambling activities as being socially unacceptable may also prevent those who do gamble from accessing support because of the particular stigma associated with “losing control”¹⁶.

One possible successful example of avoiding othering is the “[New Mindset](#)” campaign on mental health. Narrated by mental health ambassador Stephen Fry, the campaign sets out how good mental health can be achieved across the world based on the latest ideas and innovations. Key to this messaging is how mental health is a global issue that affects everyone, the campaign aims to elicit a wider re-thinking and re-framing of health issues as something that should not always be experienced and dealt with by individuals¹⁷. Furthermore, the use of celebrities to communicate public health messaging when applied appropriately is considered widely effective. Broader research shows that people often react more positively towards celebrity-endorsed messaging because they are perceived to be a respected and trusted source of information. Celebrities can also serve as agents of change because of their social standing, and help encourage positive behavioural outcomes through their influence¹⁸.



Implications for safer gambling communication

Those tasked with delivering safer gambling communications should consider how best to build a sense of wider societal responsibility to support safer gambling.

The use of celebrities to deliver safer gambling messaging must also be carefully considered and only appropriate individuals used. There is an increasing number of pro-gambling adverts which feature well-known celebrities and therefore highlights the importance of ensuring that the same celebrities are not then used to advocate safer gambling messaging elsewhere. Recent changes to advertising standards may make this easier for those charities raising awareness of gambling harms looking to use celebrities¹⁹.

2.3 Within safer gambling, it is important to distinguish between messaging targeted at individuals at risk and non-targeted messaging aimed at the general population

There have been parallel issues raised at the appropriateness of communicating messages at an individual level when it comes to safer or responsible gambling messages and adjacent public health sectors.

In their analysis of the impact of the “[When The Fun Stops Stop](#)” campaign, van Schalkwyk et al. draw comparisons with other industry funded campaigns that we have referenced in this chapter. Specifically, they detail how the Senet Group (replaced in 2020 by the Betting and Gambling Council as the new industry association and standards body for the gambling industry) frame gambling-related problems as an individual issue, and one that only impacts the minority. The campaign objectives are said to be to strike a balance between the promotion of education and awareness campaigns to support population-level responsible use and self-control, and promotion of specific interventions that are confined to the

¹⁵ Thompson, L. and Kumar, A. Responses to health promotion campaigns: resistance, denial & othering. 2011.

¹⁶ IIF Research. Building Knowledge of Women’s Lived Experience of Gambling and Gambling Harms across Great Britain: Phase 1. 2022.

¹⁷ Richards, T. and Lynx, M. Review of New Mindset Campaign. 2018.

¹⁸ Hoffmann, S. J. et al. Celebrities’ impact on health-related knowledge, attitudes, behaviors, and status outcomes: protocol for a systematic review, meta-analysis, and meta-regression analysis. 2017.

¹⁹ ASA and CAP News. New content restrictions on gambling and lotteries ads. 2022.

minority who are harmed by their consumption²⁰. In this assertion, van Schalkwyk et al. identify a contradiction in the national campaign developing specific self-control measures that only benefit individuals at risk, pitched at a population level²¹.

However, putting factors relating to industry-led campaigns and their motivations to one side, there are some arguments that targeting **specific targeted audiences** with safer gambling messages can be effective. Gainsbury et al. undertook a qualitative research project in Australia which involved a series of online focus groups attended by a total of 39 participants. Each participant was placed in one of four distinct player cohorts (“*Young Adults*”, “*Seniors*”, “*Skill Game Gamblers*” and “*Frequent Gamblers*”) which tested different customised safer gambling messages. The evidence they collected indicates that personalised messages to specific population subgroups can be effective in leading to greater individual responsiveness and compliance. However, they outline the importance of **understanding the characteristics of these sub-groups**, and this chimes with the importance of evidence-based targeting²². It is important to draw the distinction between this kind of framing and messaging which calls individuals to take action with non-targeted generic messaging (as is argued in the case with ‘When The Fun Stops, Stop’). That said, this finding suggests that safer gambling communication would be more effective if it directed individuals to specific sources of advice and support to help with their needs, rather than including blanket statements in its messaging which offer minimal guidance.

In their study on influencing gambling behaviour, Chataway et al. suggests targeting media campaigns should be based on **personality type** to initiate behaviour change rather than a generalised attempt to capture an entire population. They assert this because research shows there are links between personality traits and harmful gambling, including higher neuroticism, lower conscientiousness and agreeableness. They suggest that therefore those at risk of harm from gambling have fundamentally differentiating personality types to those who aren’t and therefore tailored messages need to be developed in safer gambling communications²³. However, it should be noted that this is contested by others who argue there are a multitude of differing personality types that constitute those who gamble²⁴.



Implications for safer gambling communication

Various psychographic and demographic factors ought to be considered when determining the most appropriate media communications strategy for those who gamble and who are likely to be most exposed to gambling marketing. Conducting segmentations of potential target audiences could be a useful tool for prioritising media buying.

²⁰ van Schalkwyk, M. et al. “When The Fun Stops, Stop”: An analysis of the provenance, framing and evidence of a ‘responsible gambling’ campaign. 2021.

²¹ van Schalkwyk, M. et al. “When The Fun Stops, Stop”: An analysis of the provenance, framing and evidence of a ‘responsible gambling’ campaign. 2021.

²² Gainsbury, S. M. et al. Strategies to customize responsible gambling messages: a review and focus group study. 2018.

²³ Chataway, R. et al. Expert View on Influencing Gambling Behaviour from a Behavioural Science Perspective. 2018.

²⁴ Gambling commission. Why do we gamble. <https://www.gamblingcommission.org/why-do-we-gamble/>. 2017.

2.4 Messages encouraging self-appraisal have been deemed to be successful in gambling behaviour change, but questions remain on the impact of this at highest risk of harm

Research highlights the need for safer gambling messages to encourage those who gamble to evaluate their behaviours via cognitive and emotional processes²⁵.

Revealing Reality's 'An Integrated Approach to Safer Gambling' report argues that gambling behavioural messaging should focus on encouraging individuals to set their own self-determined limits and boundaries. The report concludes that this should be achieved through normalising the idea of planning the length of time or money spent ahead of engaging in gambling, or encourage reflecting on behaviour afterwards and whether they played in the way they intended to²⁶.

However, in a critical review of harm-minimisation in safer gambling, Harris et al. argue there is mixed evidence on the effectiveness of such messaging, particularly amongst those already at risk of gambling harms, because of the danger of a perceived lack of rational self-control²⁷. It should also be considered that other external environmental factors may determine how easily an individual can set their own boundaries, and whether they may benefit from a toolkit of more formal support to reduce gambling (i.e. self-exclusion, treatment services).

Studies into what works in gambling messaging on behaviour change suggest messages that support **individual autonomy or self-appraisal** could be successful. It is argued that messages should include those that derive through engagement with the individuals' own thoughts, reflections, and motivations, and therefore efforts have been directed towards gambling safety messages that pop-up while gambling which encourage such self-appraisal²⁸.



²⁵ Lole, L. et al. How sport betting inducements impact different gambling groups. 2019.

²⁶ Revealing Reality: An Integrated Approach to Safer Gambling. 2020.

²⁷ Harris, A. et al. The Case for Using Personally Relevant and Emotionally Stimulating Gambling Messages as a Gambling Harm-Minimisation Strategy. 2016.

²⁸ Monaghan, S. and Blaszczynski, A. Impact of mode of display and message content of responsible gambling signs for electronic gaming machines on regular gamblers, *Journal of Gambling Studies* Vol 26.1. 2010.

Harris et al. explains that a reappraisal approach also helps those who gamble to feel more emotionally in-control of the game which reduces negative cognitive responses to these feelings²⁹. Therefore, this may reduce the likelihood of this person continuing to gamble impulsively.



Implications for safer gambling communication

Self-appraisal messages are generally considered to be most successful when displayed within-session. This type of messaging is useful for creating moments of self-reflection and are found to have more impact on an individual's thoughts and behaviours when shown during gameplay.

It is important to encourage individuals to set pre-determined limits on their gameplay as well as prompt them to self-reflect on their behaviours following a session.

While self-determined strategies appear to be successful and motivational for those who gamble, there is limited evidence on the impact of such strategies on overall reduction of gambling-related harms. There may be a need to consider how such behavioural-led campaigns can link with further awareness raising of support systems to deliver a multi-faceted approach, and how real-world data can be used to support campaign impact.

2.5 Some evidence that calls-to-action need to focus on specific behaviours or tools to access, rather than buried within broader educational / awareness raising campaign messaging

Research from campaign development in the safer gambling area suggests that behavioural messaging **needs to be upfront and present** in the call-to-action to be successful and have a focused message that is easy to understand will help with remembering the call to action. For example, the "[Stoptober](#)" campaign was found to be successful in yielding behaviour change due to having a clear behavioural target (a "quit attempt")³⁰.

In safer gambling messaging, research from The Nursery found that that GambleAware's development of the "[Think Twice](#)" message as part of the [Bet Regret](#) campaign was effective in getting the call-to-action to resonate amongst bettors as it was considered to be good advice and not didactic (i.e. not excessively instructive)³¹. The "When The Fun Stops, Stop" campaign was conversely criticised for its lack of direct behavioural instruction (such as a practical tip or tool), and when tested among those who gamble by Newall et al., was found to provide no evidence that gambling messages based on the phrase "When The Fun Stops, Stop" slogan prompts safer concurrent gambling or positively impacts on gambling-decisions³². Rather, 'experiment 2' of their study in which 1,003 participants took part found that the slogan had increased the likelihood of gambling among those who saw the message vs. those who did not. Newall et al. also claim that evidence from their randomised control experiment indicates "When The Fun Stops, Stop" may have actually backfired for some participants, leading them to be more likely to place a bet. They hypothesise that the word 'fun' in "When The Fun Stops, Stop" messaging

²⁹ Harris, A. et al. The Case for Using Personally Relevant and Emotionally Stimulating Gambling Messages as a Gambling Harm-Minimisation Strategy. 2016.

³⁰ Brown J, Kotz D, Michie S, Stapleton J, Walmsley M, West R. How effective and cost-effective was the national mass media smoking cessation campaign 'Stoptober'? Drug Alcohol Depend. 2014.

³¹ Revealing Reality: An Integrated Approach to Safer Gambling. 2020.

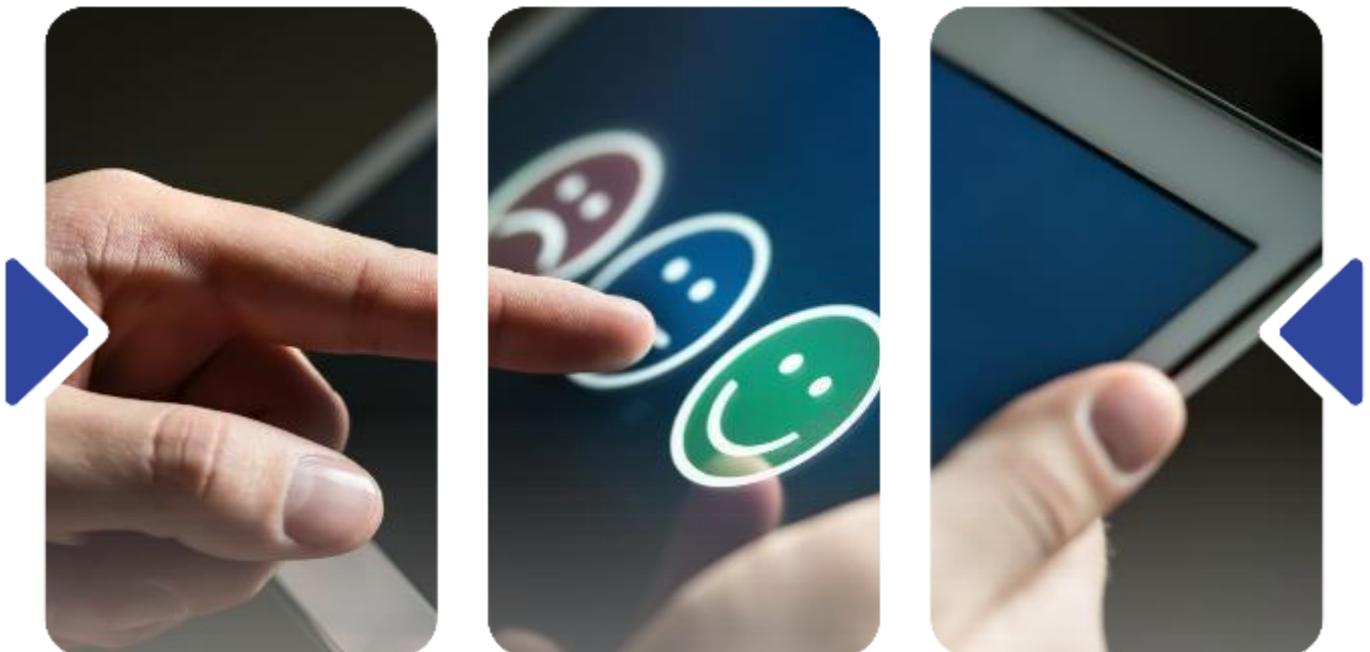
³² Newall, P. et al. No credible evidence that UK safer gambling messages reduce gambling. 2021.

may motivate customers to place a bet, rather than bet more safely, which is arguably a form of ‘dark nudging’. The Revealing Reality report further explores the need to increase self-awareness of gambling behaviours, particularly the issue that it can be distracting and all-consuming for those at risk of harms. The report argues that communications should encourage use of behavioural tools such as practical tips/strategies to help players stay in control whilst gambling (helping players to notice messages, think about them and do something as a result), or to provide positive distractions from gambling (e.g. reasons to take a break, rewarding breaks and offering fun non-gambling alternatives).

2.6 ‘Nudge’ interventions are most effective when linked to a clear benefit and rationale

There are some examples where evidence points towards the success of campaigns encouraging individual-based calls to action. For example, individual level campaign targeting is considered more equitable and effective for certain public health issues when it requires individuals to use little or no agency to benefit from behavioural change (known as “nudge interventions”).

Nudging is a type of intervention used to help those who are following ‘negative’ behaviours at the detriment to their physical or mental health outcomes into making more positive decisions. Nudges are generally categorised into two ways of thinking known as ‘System 1’ (automatic), and ‘System 2’ (effortful)³³. Most nudging techniques are ‘Type 1 nudges’ which requires limited cognitive intervention, resulting in fast and automatic decision-making which is highly effective when wanting to immediately influence behaviour in a specific moment. Whereas ‘Type 2 nudges’ require more deliberative processing of one’s choices, and demands greater cognitive investment in order to create positive behavioural change^{34,35}. Any behavioural change which arises from ‘Type 1 nudges’ is unlikely to be sustained unless people are encouraged to adopt Type 2 processing, or are used in combination with ‘Type 2 nudges’.



³³ van Gestel, L. C. et al. Do nudges make use of automatic processing? Unravelling the effects of a default nudge under type 1 and type 2 processing. 2019.

³⁴ van Gestel, L. C. et al. Do nudges make use of automatic processing? Unravelling the effects of a default nudge under type 1 and type 2 processing. 2019.

³⁵ Schmidt, A. T. and Engelen, B. The ethics of nudging: An overview. 2020.

Nudging has been found to be relatively successful in areas such as dietary change, for example by positioning a healthier product framed positively as an alternative to a less healthy product, as opposed to focussing on the negative effect of eating the unhealthy product (as illustrated by the “[Change4Life](#)” campaign which advocates sugar swaps to reduce consumption). Thaler and Sunstein argue that tapping into the “**non-rational**” **element of human psychology** is why nudging can be successful³⁶. Non-rational can include “following the herd” and being tempted into behaviours that are rationally bad for health outcomes (e.g. smoking socially). By positioning healthy choices within this “non-rational” space, this can effectively encourage individuals to move away from the negative choice at least temporarily. They give the example of a retailer making their healthier food products more accessible and visible than non-healthy ones and argue this could be applied to public health messaging.

A review by Ledderer et al. finds that generally nudge messaging is broadly successful at promoting healthier choices, although the focus on the short-term choice means that it is limited in its ability to promote long-term behaviour change³⁷. This is perhaps because it is not aimed at addressing the societal level root cause of the issue (i.e. addiction, or coping mechanisms) and rather aims to “trick” the person into making a more positive choice through the same non-rational pathway.

Whereas nudging as a technique used in public health messaging has been criticised by Thaler and Sunstein, who argue that, policy often uses nudging behavioural messaging when it is designed to be carried out using a full Randomised Control Trial setting and is focussed solely on influencing individual choice. Thaler and Sunstein concedes this might produce the desired outcomes but ignores potential negative ethical implications, such as the complexities of social determinants of health choices and how this might impact someone in the short term if they are being nudged without rational reasoning. It is therefore important to consider the state of mind of certain affected individuals before targeting them with nudge interventions³⁸. Similarly, Osman finds organisations which use nudging as a standard method for behavioural change will often not account for the intricacies of human behaviour nor completely consider the unlikelihood of one single approach being wholly responsible for shifts in these behaviours³⁹.



Implications for safer gambling communication

It is worth exploring how the principles of nudging may work in promoting a safer gambling strategy for the individual. For example, encouraging individuals to bet smaller amounts and / or less frequently to reduce their risk of experiencing harm from gambling.

However, the effectiveness may be limited as evidence suggests that nudging does not necessarily lead to long-term behavioural change.

It is worth considering whether nudges are best utilised within gambling policy, or via communications (or both). Assessing the practicalities of different nudging techniques for different organisation types in the industry may be useful in determining what is within their remit.

³⁶ Thaler, R. H. and Sunstein, C. R. *Nudge: Improving Decisions about Health, Wealth and Happiness*. 2008.

³⁷ Ledderer, L. et al. *Nudging in Public Health Lifestyle Interventions: A Systematic Literature Review and Metasynthesis*. 2022.

³⁸ Thaler, R. H. and Sunstein, C. R. *Nudge: Improving Decisions about Health, Wealth and Happiness*. 2008.

³⁹ Osman, M. *Nudge theory doesn't work after all, says new evidence review – but it could still have a future*: <https://theconversation.com/nudge-theory-doesnt-work-after-all-says-new-evidence-review-but-it-could-still-have-a-future-187635>. 2022.

2.7 Seeking smaller steps of change appears to be effective

As aforementioned, there is a clear lack of robust evaluation in the campaigns we have reviewed, which therefore presents a challenge in providing an accurate assessment in how far health communications inspire desired behaviour change. However, there remains academic discussion around this, and there are several factors that key voices have identified to be successful in delivering some reasonable element of behaviour change, that can be applied to the safer gambling messages.

Evidence shows that major behaviour change at the population level is unlikely to be as a result of a mass media campaign alone, due to external influences outside the control of the campaign (e.g. a law change or longer-term cultural shifts), and limitations of what mass media communications can do through messaging. Instead, campaigns should be part of a much wider and sustained public relations effort, in cooperation with key enablers (i.e. organisations set up to help people with information or treatment for their health issues). Without this in place it is argued campaigns cannot be fully effective⁴⁰. Therefore, it could be said that behaviour change campaigns ought to be more modest when it comes to desired outcomes, and instead seek to play a small part in a collaborative effort to inspire population-based changes, rather than attempt to shift public behaviours at scale.

A **small changes approach** (i.e. breaking desired behaviour down into small manageable steps) is considered by some as more successful than asking people to aim for a major behavioural change at the outset. Adams et al. argue that changes which operate at a smaller scale are often most effective as they are both personal and self-defined, and therefore more manageable⁴¹.

Linked to the concept of nudging, it has been argued that messages that spur **immediate action** (e.g. “information seeking behaviours”) such as accessing webpages and hotlines for further support in increasing knowledge of health issues are more likely to elicit positive behavioural change because of the reduced perceived time and convenience costs associated with this action (as opposed to relying on high individual agency to change their behaviour).



⁴⁰ Bayer, E. and Thompson, D. Communicating to Advance the Public's Health: Workshop Summary. 2015.

⁴¹ Adams, J. et al. Why Are Some Population Interventions for Diet and Obesity More Equitable and Effective Than Others? The Role of Individual Agency. 2016.

The “[Take Charge, Take the Test](#)” campaign is one possible example of this. The campaign promoted HIV testing amongst single, young African American women from low socio-economic status through a localised multi-media strategy. At the same time hotlines, webpages and other supporting materials were launched by community organisations alongside the communications, as a bridge for the target audience to enact behaviour change. An evaluation of this campaign by Davis et al. showed this to be effective in demonstrating positive uptake in engagement with HIV tests amongst the target audience due to the clearly defined and targeted objective⁴².

Davis et al. also argue that for campaigns to be effective, they must be conscious of their “**expected time horizon for change**”⁴³. Communication efforts need to be sustained and maintain the salience of supportive behavioural measures in order to encourage significant change. These positive behavioural changes are more likely to be achieved when a campaign uses a comprehensive and cohesive social marketing effort (facilitating individual and community level change alongside wider environmental/ societal change).



Implications for safer gambling communication

It is important for gambling communications to be realistic with the **expected time horizon for change**, and ideally messages from communications should be linked to those communicated by relevant help organisations in a sustained and consistent way.

Taking a holistic communications and policy approach can be successful in public health approaches, as shown by the HIV campaign. It is important to ensure communications efforts are aligned with sufficient help and support structures.

If considering “small step” change approaches, the importance of the customer journey and placement of messages is important.

Others have delivered campaigns that encourage **incremental behavioural change** (e.g., swapping out bad habits for good behavioural practice). A review of the “[Swap it, Don't Stop it](#)” campaign is one example of this. This national campaign in Australia sought to encourage people to make small, achievable healthy choices through swapping unhealthy behaviours with healthy ones rather than eliminating unhealthy behaviours completely. However, the evaluation found that the campaign achieved fairly modest results in terms of reach and intended behaviour change, also concluding this was due to the limitations of mass media campaigns operating alone without a bigger social marketing effort attained through cross-sector collaboration⁴⁴.

Similar conclusions are drawn from the Victorian Responsible Gambling Foundation’s “[Love the Game, Not the Odds](#)” social media campaign which continues to reduce gambling intentions through communicating the dangers of gambling. However, it has faced difficulty in cutting through the pro-

⁴² Davis, K. et al. Effectiveness of a Mass Media Campaign in Promoting HIV Testing Information Seeking Among African American Women: Journal of Health Communication: Vol 16, No 9 (tandfonline.com). 2011.

⁴³ Davis, K. et al. Effectiveness of a Mass Media Campaign in Promoting HIV Testing Information Seeking Among African American Women: Journal of Health Communication: Vol 16, No 9 (tandfonline.com). 2011.

⁴⁴ O'Hara, B. J. et al. Impact of the Swap It, Don't Stop It Australian National Mass Media Campaign on Promoting Small Changes to Lifestyle Behaviours: Journal of Health Communication: Vol 21, No 12 (tandfonline.com). 2016.

gambling media campaigns due to the limited regulations in Australia on restricting pro-gambling advertising on online platforms⁴⁵.

Whereas the national “[Stoptober](#)” campaign in the UK has been praised for achieving its stated aim of encouraging those who smoke to be smoke-free for 28 days from 1st October, and potentially leading to permanent cessation thereafter. The campaign applied the SMART (**S**pecific, **M**easurable, **A**chievable, **R**ealistic and **T**ime-sensitive) action plan to drive behaviour change. It addressed the difficulties of affecting change by encouraging those who smoke to begin by setting a realistic intermediary goal (i.e. an expected time horizon for change) bound to a particular target date of 28 days which was reinforced using positive messaging such smokers seeing immediate benefits to their health and finances by quitting. The evaluation concluded that this style of messaging was unlike other national tobacco cessation campaigns which tended to focus on the negative harms associated with smoking. It found the campaign to be effective in its broadcasting of a positive message combined with a reasonable timeframe for a specific activity which feels more obtainable than an unstated target date⁴⁶.



Implications for safer gambling communication

Safer gambling campaigns should strike the right balance between being aspirational and modest in the amount of change sought, and provide small, immediate steps that can make a significant difference. Safer gambling communications should also work alongside wider marketing efforts to support sustained behaviour change. Without this collaboration, the impact of any behavioural campaign is likely to be constrained if acting alone.

⁴⁵ Guilloi-Landreat, M. et al. Gambling Marketing Strategies and the Internet: What Do We Know? A Systematic Review. 2021.

⁴⁶ Brown J, Kotz D, Michie S, Stapleton J, Walmsley M, West R. How effective and cost-effective was the national mass media smoking cessation campaign 'Stoptober'? Drug Alcohol Depend. 2014.

03

Hopeful vs. harmful:

**Reflections on messaging
& framing in public health
communications**



3 Hopeful vs. harmful

This chapter explores how learnings from health communications on messaging and framing, with a particular focus on the balance between campaigns that deliver a positive (hopeful), or negative (harmful) approach attempts to achieve desired awareness or behaviour change objectives.

We look at different examples from both adjacent public campaigns and those within the safer gambling sector and seek to draw on evidence of what works in messaging and framing, and under which circumstances.

Key findings

- Positive framing should be focussed on the benefits of changing or quitting negative behaviours, and avoid promoting the behaviour itself
- Positive framing can be motivational in safer gambling messages, but should be sincere, and not overly jovial
- Message framing should be explicit and address potential harms, and avoid inadvertently promoting risky behaviours
- Negative framing or focus on harms needs to avoid “shaming” or “stigmatising”
- Some negative warning messages could help challenge erroneous beliefs of at-risk gamblers, and emotional language is more effective
- Campaigns should be evidence based and audience appropriate in framing messaging
- Campaigns should adopt consistent branding to achieve cut through



3.1 Merits of ‘hopeful’ or ‘positive’ messaging

The literature suggests that there is a challenging balance between messaging that encourages and motivates individuals to take action and engage with the campaign in a positive way vs. avoiding the risk of a positive tone that does not effectively address the harms of negative behaviours.

3.1.1 Positive framing should be focussed on the benefits of changing or quitting negative behaviours, and avoid promoting the behaviour itself

Some campaigns have been criticised for presenting the behaviours they are trying to warn against in an inadvertently positive way. This appears to be most prevalent when campaigns are seeking to reach their target audience in a way that is engaging but potentially risks having an opposite effect. One example of this is the “[How to Drink Properly](#)” campaign developed by *Drinkwise*. The campaign was criticised for showing adolescents drinking in a social situation as an intended health warning against excessive alcohol intake.

Reviews specifically into safer drinking campaigns have criticised the notion of **industry-funded campaigns** appearing to discourage underage **behaviours while simultaneously running the risk of encouraging uptake** amongst adolescents (i.e. the boomerang effect). This is also linked to misinterpretation of campaign messaging and concerns around the idea of discouraged behaviours being perceived as a ‘challenge’ to be met amongst at-risk groups (i.e. heavy drinkers, “problem gamblers”) or youth^{47,48}.

On the contrary, campaigns that use positive or hopeful framing in **demonstrating safer behaviours** have been deemed to be generally well-received. A relevant example here is *DrinkAware*’s “[Drink Free Days](#)” campaign in 2019. This campaign promoted the healthy benefits of cutting down the amount of alcohol consumed, without asking people to stop drinking entirely. An evaluation undertaken by YouGov found the campaign was effective in claimed motivation to drink less but **did not necessarily improve public awareness of the health harms of alcohol consumption**⁴⁹. A similar campaign approach was recently taken by the Victorian Responsible Gambling Foundation and its “[100 Day Challenge](#)”. This campaign seeks to reduce gambling harm by encouraging individuals to set goals as part of evaluating their gambling-related behaviours. The campaign claims that over 2,500 people who gamble have taken this on, and that this in turn inspired them to be more likely to consider support for their gambling, indicating that this audience may be receptive to framing safer gambling as a positive challenge⁵⁰.

A study conducted by Davies et al. found that tobacco control ads based on “**why to quit**” positive framing have been well received by target audiences in their engagement and motivations to quit, as opposed to “**how to quit**” messages. This approach involves focussing on positive outcomes of quitting smoking along with image or testimonials, as opposed to negative framing (i.e. attacking individuals or the tobacco industry)⁵¹. Findings indicate that campaigns ought to clearly frame the “**incentive**” for changing behaviour (i.e. what could this behavioural change lead to? How does making this change

⁴⁷ Brennan, E. et al. Comparing responses to public health and industry-funded alcohol harm reduction advertisements: an experimental study. 2020.

⁴⁸ Hessari, M. and Petticrew, M. What does the alcohol industry mean by ‘Responsible drinking’? A comparative analysis. 2018.

⁴⁹ Gunstone, B. and Newbold, P. Drink Free Days: Campaign Evaluation. 2019.

⁵⁰ Victorian Responsible Gambling Foundation. 2,500 people take on the 100 Day Challenge to tackle gambling problems.

<https://responsiblegambling.vic.gov.au/about-us/news-and-media/2500-people-take-100-day-challenge-tackle-gambling-problems/>

⁵¹ Davies, K. C. et al. Perceived Effectiveness of Antismoking ads and Association with Quit Attempts Among Smokers: Evidence from the Tips from Former Smokers Campaign. 2016.

benefit the individual beyond what is already known?). It is argued here that this is likely to lead to more sustained behaviour change outcomes.

Implications for safer gambling communication

To date, safer gambling communications have focused more on 'when to change' (e.g. signs such as losing control), and the 'how to change' rather than 'why change' or substitutional benefits.

Learnings for **how to quit** vs. **why to quit** smoking messages suggest safer gambling campaigns should have at least some focus on positive outcomes that can be achieved as a result of taking action to moderate gambling.

While there is a danger that positive framing can inadvertently promote gambling, positive challenges such as '100 days challenge' or 'drink free days' appear to be successful.

3.1.2 Positive framing can be motivational in safer gambling messages, but should be sincere

There is much debate within academic literature on whether positive or hopeful messages are more effective than harmful or warning messages in the sphere of safer gambling messages. For example, Hilbrecht argues that positive or gain-framing messages (focussing on the benefits of the action) as opposed to negative or loss-framed messages (focussing on harmful consequences of risky behaviour) are more persuasive⁵². Similarly, they argue that positively framed messaging is less likely to contradict the audiences belief and value systems, and offers autonomy in decision making (as it is less directive). They use the example of fostering this sort of messaging at young people, in order to build their capacity to make positive decisions in the future.



⁵² Hilbrecht, M. (Ed.) Prevention and Education Evidence Review: Gambling-Related Harm. Report prepared in support of the National Strategy to Reduce Gambling Harms in Great Britain. 2021.

Evidence suggests that messaging which **communicates that everyone will benefit** from an individual taking control of their gambling habits can be successful. The Revealing Reality report suggests using words such as ‘we’, ‘us’, or ‘everyone’ to lessen the onus on the individual to change their behaviour as well as convey the harms and risks associated with gambling on the individual as well as wider society⁵³.

That said, those who do not currently gamble are found to react negatively to messaging that uses patronising or condescending language when communicating safety messages and are more likely to react positively when the narrative is sincere⁵⁴. This is an important consideration when developing campaigns that also include an overheard audience (i.e. raising awareness amongst the general population, affected others, or peers).

3.1.3 Campaigns must take consideration of the use of a jovial tone when communicating gambling safety messaging

Those who have reviewed safer gambling messages have highlighted the need to strike a balance between the use of a humorous and fictitious tone and the delivery of harms-related safety messaging. For example, the use of jovial messaging in the ‘When The Fun Stops, Stop’ campaign was widely criticised for its inclusion of, and emphasis on, the word ‘fun’ when trying to communicate prevention messaging on gambling-related harm^{55,56}.

In direct parallel with the *Drinkwise* campaign that was seen to inadvertently encourage the behaviour it is ought to be discouraging, van Schalkwyk et al. comment on the role of industry funded safer gambling campaigns in delivering overtly positive campaigns. They comment on how the ‘When The Fun Stops, Stop’ campaign is promoting “fun” hopeful messaging (giving the example of the larger emphasis in imagery on the word “Fun”) and how this relates to criticism of ambiguous messaging and accusations of conflicts of interest, particularly around the idea that such messages implicitly promote gambling⁵⁷. This accusation stems from wider concerns around educational initiatives being financed by the gambling industry and provided by organisations who rely on industry-funding. Van Schalkwyk et al. contend that the industry’s engagement with different industry-funded bodies enables it to significantly influence gambling policy and impact safer gambling messaging. Its involvement in educational programmes is particularly critiqued as messaging places the burden of managing risk on the individual and deflects from industry practice and responsibility⁵⁸.

That said, evidence from other campaigns have been considered more successful in their positive framing and execution. The “[Tap Out. Take a moment. Avoid Bet Regret](#)” messaging for the *Bet Regret* campaign employed humorous tone to demonstrate risky betting behaviours. The campaign was considered relevant and memorable amongst its target audience, and the content was perceived as both credible and relatable. However, there is limited evidence on whether the campaign has significantly reduced risky gambling behaviours over a sustained period⁵⁹. This suggests that a jovial tone can be effective when framed positively, but the tone needs to fit appropriately with an appropriate core campaign message as well as a definitive call to action. The case study below outlines the evaluation of GambleAware’s “[Tap Out](#)” campaign⁶⁰.

⁵³ Revealing Reality: An Integrated Approach to Safer Gambling. 2020.

⁵⁴ Davies, S. et al. Exploring alternatives to ‘safer gambling’ messages. 2022.

⁵⁵ Newall, P. et al. No credible evidence that UK safer gambling messages reduce gambling. 2021.

⁵⁶ van Schalkwyk, M. et al. “When The Fun Stops, Stop”: An analysis of the provenance, framing and evidence of a ‘responsible gambling’ campaign. 2021.

⁵⁷ van Schalkwyk, M. et al. “When The Fun Stops, Stop”: An analysis of the provenance, framing and evidence of a ‘responsible gambling’ campaign. 2021.

⁵⁸ van Schalkwyk, M. et al. The politics and fantasy of the gambling education discourse: An analysis of gambling-industry funded youth education programmes in the UK. 2022.

⁵⁹ Ipsos. Synthesis Report: The use of research in the Bet Regret campaign. 2021.

⁶⁰ Ipsos. Synthesis Report: The use of research in the Bet Regret campaign. 2021

Case study: Evaluation of the GambleAware “Tap Out” campaign

The evaluation undertaken by Ipsos shows how GambleAware have delivered a successful campaign using the principles of “nudging” behaviours, and asking bettors to self-reflect by tapping out of their betting app.

Overview:

The ‘Tap Out’ iteration of the Bet Regret campaign launched in September 2020 and targeted young males aged 16 to 44 who regularly bet. The concept was part of a strategy to encourage adoption of a specific and easy to follow behaviour of pausing before placing a bet to get the much-needed time to think. Several creatives were used to convey this messaging including the use of comical scenarios and features from ambassadors such as David James and Josh Denzel to engage the target audience. These assets were advertised on TV, radio and digital media platforms to communicate the benefits of tapping out.



‘Tap Out’ messaging was tracked as part of the wider Bet Regret campaign tracking which first began in 2018. Engagement with and uptake in this behaviour was monitored from April 2020 (i.e. wave five) to October 2021 (i.e. wave nine) as the campaign increasingly focussed on this call to action following the launch of ‘Tap Out’ at wave seven.

Outcomes and Behavioural Impact:

The evaluation showed significant progress in the proportion actively tapping out or pausing before placing a bet as a means of reducing risky betting, and therefore indicating that the campaign had successfully raised awareness of this call to action through its motivational messaging. It also suggests that the campaign was effective in achieving its intended behavioural change amongst bettors through using the close the app nudge.

Evidence suggests that audience engagement with ‘Tap Out’ peaked at wave eight (the penultimate wave of campaign tracking). One possible reason for this is that a high proportion of key target groups had already demonstrated a strong understanding of ‘Tap Out’ and risky betting related concepts because of high campaign recognition scores as well as reports of specific tap out behaviour.

However, broader progress in reported self-recognition of the associated risks of betting and ability to cut down remained broadly flat across all waves. Similarly, the proportion of male bettors thinking about or actively cutting down their broader gambling habits (e.g. frequency of betting, risky betting behaviour) was inconsistent across all waves of tracking, with little growth over time. This inconsistency means it is difficult to determine the impact of the campaign on wider gambling behaviours, despite positive outcomes on the core call to action.

3.1.4 Evidence suggests use of positive imagery can be impactful in delivering harms messaging – but must be audience appropriate

Messaging which includes the use of both imagery and text is found to be **more persuasive in influencing behavioural change** than when used as a standalone method of conveying safety messaging⁶¹. Findings suggest that the use of images in campaigns can help to increase engagement and evoke an emotional response toward public health messaging compared with static text-based content⁶².

Specifically on gambling, Gainsbury et al. argues that imagery needs to be considered when communicating gambling harm at population level or when targeting individuals⁶³. In a small-scale study in Australia, they found that positive imagery was more effective amongst high frequency players, whereas negative images appear to resonate with those who did not gamble which may, in part, be due to the wider stigma that surrounds gambling harms.

Tabri et al. also finds that the use of negative imagery, including illustrations that portray those who gamble experiencing harms-related distress, is generally **more effective on those who do not currently gamble, in terms of motivation to limit future gambling behaviours**⁶⁴. Specifically, they argue this audience considers this type of imagery to be appropriate when communicating harms, and that it is inclusive by involving affected others. Whereas it was found that people who gamble are found more likely to limit their behaviours when presented with positive imagery that avoids focussing on the harmful consequences of risky behaviour.

Other studies argue that irrespective of the type of imagery used, the key importance when using images to communicate safety messaging is to ensure that the individual can relate to what they are shown as this is likely to increase their receptiveness to the messaging⁶⁵.



⁶¹ Chataway, R. et al. Expert View on Influencing Gambling Behaviour from a Behavioural Science Perspective. 2018.

⁶² Davies, S. et al. Exploring alternatives to 'safer gambling' messaging. 2022.

⁶³ Gainsbury, S. M. et al. Strategies to customize responsible gambling messages: a review and focus group study. 2018.

⁶⁴ Tabri, N., Wohl, M. and Xuereb, S. Population Based Safer Gambling / Responsible Gambling Efforts. 2021.

⁶⁵ Davies, S. et al. Exploring alternatives to 'safer gambling' messages. 2022.

3.2 Merits of ‘negative’ or ‘harmful’ messaging

3.2.1 Evidence that framing should be explicit and address potential harms, and avoid inadvertently promoting risky behaviours

There are clear challenges in striking the right balance between hopeful and harmful messaging, particularly with national campaigns that seek to address multiple audiences who may be receptive to different types of communication. This challenge has led to some criticism of national campaigns, particularly of industry-funded communications accused of launching national campaigns that speak to multiple audiences, and ultimately attempt to communicate multiple messages. The motivations of the framing are often questioned here, particularly if there is no clear health or harms warning attached to the campaign.

Some examples of where campaigns have failed to address the specific harms of behaviours have called into question the need for campaigns to include a more hard-hitting line of messaging, as explored in the Case Study below with industry-funded alcohol awareness campaigns⁶⁶.

The reviews of these campaigns argue that from an industry sponsor’s perspective, strategically ambiguous “drink responsibly” messages are advantageous, and that “responsible use” does not stray too far away from conventional advertising that glamourises consumption of the alcohol products. Therefore, these adverts are seen to be presented as discouraging misuse whilst simultaneously interwoven with positive portrayals of product consumption⁶⁷.

They also highlight the issue of asking people to “stay in control” in circumstances where they lack cognitive function or the ability to exercise self-control. There is an argument that **cognitive function** is impaired whilst harmful gambling which causes players to overestimate their chances of winning. Clark argues that these distorted beliefs create an ‘illusion of control’ in which some of those who gamble confuse a game of chance with a game of skill, and therefore justify continuing to gamble in order to gain the skills needed to win⁶⁸. Further research by Quintero shows that decisions made while gambling amongst “pathological gamblers” are negatively impacted by disruption of inhibition process, slower time evaluation, impaired or risky decisions, memory impairments, lack of cooperation and efficacy⁶⁹.

⁶⁶ Smith, W S. et al. Are “Drink Responsibly” Alcohol Campaigns Strategically Ambiguous? 2009.

⁶⁷ Smith, W. S., Atkin, C. K. and Roznowski, J. Are “Drink Responsibly” Alcohol Campaigns Strategically Ambiguous? 2009.

⁶⁸ Clark, L. Decision-making during gambling: an integration of cognitive and psychobiological approaches. 2010.

⁶⁹ Quintero, G. C. A biopsychological review of gambling disorder. 2016.

Case study: Analysis of ambiguous messaging in drink responsibly campaigns in the USA⁷⁰



A review undertaken by Smith et al. shows how some examples of ambiguous messages in drink responsibly campaigns in the USA fail to successfully help drinkers stay in control.

Anheuser-Busch “*Know When to Say When*” campaign:

The messages communicated in this campaign advise people to "be responsible", "always be in control", and "if you've been drinking, don't take your show on the road". Visually, most messages portray drinkers enjoying alcohol in a party setting, never depicting the harmful consequences of excessive or unsafe drinking. The ads do not clearly define when to stop drinking, either in terms of quantity consumed or degree of intoxication. Hence light or moderate drinkers may interpret that vague stopping point conservatively / heavy drinkers interpret it quite liberally, or even regard it as a challenge to be reached or exceeded. Ads do not suggest the option of nondrinking for certain situations or certain types of individuals (pregnant women, alcoholics, youth) and do not explain how a drinker can recognise that moment of knowledge.

The Coors “*Now, Not now*” campaign:

The campaign presents a set of ads featuring a basic format: brief visual depictions of a series of acceptable drinking settings (campfires, parties and sporting events). There is a manifest commercial element in each message ("definitely not now", "not now", "absolutely, positively not now") which is found to be in direct juxtaposition with the distinct warnings about unsafe drinking. The ads do not specify whether "not now" means zero consumption, no additional consumption, or a limited quantity of consumption. They conclude that there is no solid evidence of these "drink responsibly" campaigns encouraging responsible drinking behaviour; it is likely that unambiguous public services messages are more like to have an adverse effect by advertising alcohol consumption without an explicit and evidenced-based call to action or link to harm prevention.

Drinkaware “*Drink Responsibly*” campaign messaging:

Smith et al. also conducted a review of several responsible drinking campaigns in the USA, most of which are industry led. They analysed the messaging of the campaign in terms of its ambiguity. They argue that ambiguity in messaging can be strategically (and effectively) used in campaigns that are required to make a universal appeal (e.g., 'capture all') rather than using narrowly targeted messages. For example, “Drink Responsibly” (Drinkaware) messaging may attempt to differentially influence a) the general public who are concerned about societal drinking, b) younger and heavier drinkers who consume most of the product, and c) problem drinkers who drink excessively. However, they argue the ambiguity of the slogan and messaging can lead to misinterpretation, either being interpreted liberally or possibly regarded as a challenge to be reached or exceeded.

⁷⁰ Smith, W. S., Atkin, C. K. and Roznowski, J. Are “Drink Responsibly” Alcohol Campaigns Strategically Ambiguous? 2009.

3.2.2 Negative framing/focus on harms needs to avoid shaming or stigmatising

It is clear there are some benefits of focussing on harms in safety messaging. Similarly, messages which are hard hitting are evidenced to be an effective way of delivering behaviour change, as found in some tobacco public health campaigns.

The success of these is underpinned by framing the threat of the outcome to scare people away from the negative consequences of the behaviour, based on cognitive, emotional, and social processes such as perceived susceptibility to disease, for example in the case of smoking the extent of the risk of cancer.

Some studies have found that overly negative messaging such as fear appeals in public health messaging can have a negative effect on individuals motivation, and should be used sparingly to avoid having an adverse impact.⁷¹

However, Riley et al. claim that “**hard hitting**” messaging in itself is not harmful and can be more effective than humorous or hopeful positive ads in the particular sphere of smoking – due to the obvious and tangible health detriment⁷². They use the example of the “[Tips from Former Smokers](#)” campaign, in which real people suffering serious harm from smoking were used to convey messages, and led to positive intended behaviour change in the USA. However, they highlight that these messages may be problematic in leading to *internalised (self) stigma* – in other words individuals with poor harm outcomes blaming themselves because they are portrayed negatively.

Where messaging focuses on hard-hitting messages, there is some evidence that communications campaigns have the potential to **enact or reinforce stigmatisation of particular groups** or health outcomes⁷³. It is also important to consider all domains of stigma when structuring public health messaging, as it can come in many forms. Erving Goffman first identified the elements of stigma including stereotyping, labelling, social isolation, prejudice, marginalisation, and discrimination. Further research has identified multiple dimensions of health-related stigma, including self-stigma (internalised), public or social stigma (judgement from society)⁷⁴.



Implications for safer gambling communication

Hard-hitting messaging need to be carefully considered to prevent worsening stigma around gambling harms, and should avoid language that places the blame on individuals.

Recent evidence suggests that positive messages are more motivating to take action amongst those who gamble, and evidence from adjacent sectors indicates hard hitting messages are not generally successful. However messaging that is hard hitting has not generally been used in safer gambling messaging to date, so the effectiveness of it needs further research.

⁷¹ Ruiter, R. A. C., Abraham, C., & Kok, G. (2001). Scary warnings and rational precautions: A review of the psychology of fear appeals

⁷² Riley, K. R. et al. Decreasing Smoking but Increasing Stigma? Anti-tobacco Campaigns, Public Health, and Cancer Care. 2017.

⁷³ Smith, A. R. et al. Stigma and Health/Risk Communication. 2016.

⁷⁴ Subu, A. M. et al. Types of stigma experienced by patients with mental illness and mental health nurses in Indonesia. 2021.

The use of **stigma** appears as an established means of communicating health messages, typically used to motivate behavioural change either through reduced consumption or cessation of harms including smoking and drinking⁷⁵. However, evidence from critical analysis of some campaigns shows that it is not universally effective for all public health issues, particularly complex multi-faceted health conditions such as obesity. Much of this criticism is around increased calls to **avoid shaming people** into behaviour change as it is not deemed effective.

An example of this was a critical appraisal of Cancer Research "[Obesity](#)" campaign. The campaign framed its messaging and aesthetic as likening obesity to smoking in terms of the negative outcome, namely "obesity causes cancer too" written on a background resembling a packet of cigarettes. This was deemed controversial because smoking is considered a choice (despite being an addictive behaviour whereby the individual may lose "control" of their action), whereas obesity can be caused by a multitude of factors outside of the individual's eating and exercise habits such as hereditary factors or medical conditions.

The review highlights that this messaging encourages weight stigma, which is identified as an ineffective way of reducing obesity and can actually have the opposite effect as those stigmatised may turn to their typical coping mechanisms (which might be comfort eating, for example)⁷⁶.

However, it is important to consider the **balance of impact between highlighting harms of individual action on self and others vs. stigmatising**. For example, the review article highlights that "stigmatising" messages on a second-hand smoking campaign were actually justified because of the impact a person's behaviour can have on another without their consent. However, they claim it is best to avoid tapping into public opinion or contentious issues as a way of communicating a "shock factor" (instead of scientific evidence) on public health issues like alcohol consumption when shaping their message as this reduces credibility and is likely to generate further stigma.



⁷⁵ Subu, A. M. et al. Types of stigma experienced by patients with mental illness and mental health nurses in Indonesia. 2021.

⁷⁶ Applied Research Collaboration West. Five reasons why CR UK's obesity campaign is flawed. <https://arc-w.nihr.ac.uk/news/five-reasons-why-cr-uks-new-obesity-campaign-is-flawed/> 2019.

Public health campaigns should also avoid unintentionally stigmatising particularly vulnerable or marginalised audiences with targeted messaging. Revisiting the review of *Diageo's* “Stop Out of Control Drinking” campaign in Ireland (2015-2020), Petticrew et al. claim that the campaign purposefully depicts young people (especially young women) as out of control, with a view to typecasting certain sub-groups rather than presenting the problem as a societal issue. They claim this to be problematic and even part of industry tactics to implicitly avoid impacting wide scale purchasing of alcohol and excessive consumption amongst the broader general public⁷⁷.



Implications for safer gambling communication

There is already significant stigma around gambling, and gambling harm, it is therefore important to strike the right balance between raising awareness of potential harms, and the risk of ‘shaming’ those who are affected by them (both gamblers and affected others). Stigmatising individuals can compound harms if those experiencing harms already use gambling as a coping mechanism / form of escapism from negative feelings.

That said, it is also important not to remove or reduce individual agency and rather seek to empower behavioural change by framing said behaviour as the issue instead of the individual.

3.2.3 There is a need to consider how language to describe those harmed by gambling can be stigmatising

There is lots of existing discussions about the need to refrain from overtly harmful or negative messaging running the risk of having a negative effect on the intended target audience. Harris et al. argue that gambling messages that **overly stimulate negative emotions** may cause individuals to disengage (especially those most vulnerable) as a form of self-protection – possibly linked to internalised stigma. This suggests there is a need for shaping messages so that it is positively framed to help minimise negative emotions or defensiveness⁷⁸.

A scoping review undertaken by Pliakas et al. shows the idea of being labelled as a “**problem gambler**” in itself is stigmatising. This is because “problem gamblers” are typically characterised as addicts, financially stressed or highly vulnerable⁷⁹. In reality, there are a broad range of factors that lead people to gamble⁸⁰, or be at risk of gambling harms, therefore the term “problem gambler” is in itself arguably problematic in that it labels the individual as being the problem. Similarly, findings from Hing et al. suggest that messaging around “responsible gambling” or “gamble responsibly” is problematic. This terminology places all the responsibility on the individual, implying that those who experience gambling harms have done so due to being “irresponsible”, which furthers the stigma around gambling harms⁸¹.

Chataway et al. highlight that messaging that forces a negative or uncomfortable self-perception creates a sense of 'othering', where subjects convince themselves that this applies to others but not them, to

⁷⁷ Petticrew, M. et al. *Diageo's 'Stop Out of Control Drinking in Ireland, an analysis'*. 2016.

⁷⁸ Harris, A. et al. *The Case for Using Personally Relevant and Emotionally Stimulating Gambling Messages as a Gambling Harm-Minimisation Strategy*. 2016.

⁷⁹ Pliakas, T., Stangl, A., and Siapka, M. *Building Knowledge of Stigma Related to Gambling and Gambling Harms in Great Britain*. 2022.

⁸⁰ Gambling Commission Blog. *What motivates people to gamble?*: <https://www.gamblingcommission.gov.uk/blog/post/what-motivates-people-to-gamble>. 2021.

⁸¹ Hing, N. et al. *The stigma of problem gambling: Causes, characteristics and consequences*. 2015.

protect their own self-image⁸². There is a danger that many tend to disassociate themselves with this term despite campaigns targeting these individuals directly, and therefore risk being perceived as less personally relevant.



Implications for safer gambling communication

Further engagement across the gambling sector and wider public health is needed to prevent stigmatising narratives within campaign messaging. Campaigns should avoid labelling those portrayed in advertisements as "problem gamblers", as this can deepen stigmatising narratives. Using person-first language instead shows that a person with a gambling disorder 'has' a problem, rather than 'is' the problem.

Similarly, references to "responsible gambling" or encouraging individuals to "gamble responsibly" should be avoided to prevent labelling those experiencing harm as "irresponsible".

3.2.4 Warning messages should challenge erroneous beliefs of at-risk gamblers

There is evidence to suggest that some form of **negative warning messages** should be applied to those at the highest risk of harm, in order to engage this audience.

For example, Apollonio and Malone argue that negative messages in social marketing around public health messages on smoking can be more effective in challenging existing perceptions held by target audiences, for example demonstrating the real health threat of smoking.⁸³

And when it comes to safer gambling specifically, Harris et al. stress the need for safer gambling content to challenge individual's own perceptions of their gambling, in order to reach this audience. They put this down to increased **erroneous cognition of at-risk gamblers**, in other words those who are in the gambling 'zone' are more susceptible to irrational thought patterns and may ignore messages that are intended for them⁸⁴.

Wang et al. suggest that communications could consider combining messages that challenge individual's erroneous beliefs with ones that gently suggest behaviour change rather than simply promoting safer gambling behaviour and use of responsible gambling tools⁸⁵.

⁸² Chataway, R. et al. Expert View on Influencing Gambling Behaviour from a Behavioural Science Perspective. 2018.

⁸³ Apollonio DE, Malone RE. Turning negative into positive: public health mass media campaigns and negative advertising. Health Educ Res. 2009

⁸⁴ Harris, A. et al. The Case for Using Personally Relevant and Emotionally Stimulating Gambling Messages as a Gambling Harm-Minimisation Strategy. 2016.

⁸⁵ Wang, R. et al. Transparency in Responsible Gambling: A Systematic Review. 2021.

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Implications for safer gambling communication

There may be a role for negative or more serious messages amongst more at risk gamblers, in order to disrupt their own perceptions of their likelihood to be experiencing harms or the potentially consequences of their gambling behaviour. These messages could be layered in with other more positive messages about the help and support available to gamble safely.

3.2.5 In general, emotionally stimulating messaging is found to be more successful in reducing harm than more neutral messaging

Harris et al. also argues that the use of emotionally stimulating messaging can effectively reduce harm when shown in-game. They find that emotive messaging (especially messages that are deemed to be personally relevant) is more likely to grab the attention of the person that is gambling and therefore disrupt their gameplay compared with non-emotive messaging⁸⁶. A study by Munoz et al. finds that the combined use of text and graphic content which illustrated the negative consequences (e.g. negative financial and household impacts) associated with excessive gambling was an effective tool for changing attitudes and influencing positive behavioural outcomes as it can serve as a visual reminder to the player of what is at stake⁸⁷.

As with personal relevance, findings suggest that the way in which gambling cessation is framed is also likely to orientate attention and effect behaviour towards the activity. Harris et al. argue that emotionally stimulating messaging tends to be more effective within the gambling context when positively framed. An example of this is focusing on protecting money that is yet to be spent rather than on the money already lost due to gambling, which Wood and Griffiths describe as the “carrot versus stick approach”^{88,89}. “Carrot-based” (i.e. reward/benefit-framed) approaches can also be a way of promoting positive play amongst even those that most resistant to safer gambling messaging. Linked with this is the suggestion of avoiding negatively framed “stick-based” approaches that condescending or didactic which is often thought to be found in traditional messaging⁹⁰.

Similarly, Chataway et al. argue that emotionally driven messaging can be communicated in a rational manner without needing to induce fear. That said, research indicates that this approach can and does work in other adjacent sector public health messaging⁹¹. In the case of tobacco control media campaigns, Sims et al. concludes that both positively and negatively framed messages are found to have reduced smoking prevalence amongst adults in the UK compared with emotionally neutral messaging. They also found that negatively framed messages that focussed on the health risks

⁸⁶ Harris, A. et al. The Case for Using Personally Relevant and Emotionally Stimulating Gambling Messages as a Gambling Harm-Minimisation Strategy. 2016.

⁸⁷ Munoz, Y. et al. Using fear appeals in warning labels to promote responsible gambling among VLT players: the key role of depth of information processing. 2014.

⁸⁸ Harris, A. et al. The Case for Using Personally Relevant and Emotionally Stimulating Gambling Messages as a Gambling Harm-Minimisation Strategy. 2016.

⁸⁹ Wood, R. T. A. and Griffiths, M. D. Understanding Positive Play: An Exploration of Playing Experiences and Responsible Gambling Practices. 2015.

⁹⁰ Harris, A. et al. The Case for Using Personally Relevant and Emotionally Stimulating Gambling Messages as a Gambling Harm-Minimisation Strategy. 2016.

⁹¹ Chataway, R. et al. Expert View on Influencing Gambling Behaviour from a Behavioural Science Perspective. 2018.

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associated with smoking were particularly influential in reducing consumption amongst smokers⁹². However, the excessive use of fear tactics in negative messaging can also backfire as it may cause individuals to ignore or deny ads that they consider to be exaggerated, as well as encourage unintended behaviours amongst risk-taking individuals⁹³.

It may also be important to consider the relative physical harms of smoking to physical health compared with gambling, and how shock tactics may be more appropriate for smoking messages.



Implications for safer gambling communication

Emotionally stimulating messaging appears to be more impactful in reducing harm, with some indications that with gambling harms specifically positive emotional messaging tends to be more affective. Campaigns could explore different “carrot” led messages in trying to inspire positive behaviour change.

Safer gambling communications should also work alongside wider marketing efforts to support sustained behaviour change. Without this collaboration, the impact of any behavioural campaign is likely to be constrained if acting alone.

3.3 General principles within public health and safer gambling messaging

3.3.1 Messages should be evidence based and audience appropriate

Overall, studies highlight that one of the challenges in getting the right balance of harmful or hopeful messages, is the need to be **audience appropriate**. One example of this is a study of FDA’s “[The Real Costs](#)” 2014 anti-smoking campaign in the USA, which is lauded for its achievements in reducing youth smoking⁹⁴. This campaign was deemed effective as messages that illustrated the detrimental effects of smoking on physical health resonated more with its target audience (youth) than messages about loss of control to addiction as this health outcome was considered less relevant⁹⁵.

Some evaluative pieces have shown how **evidence-based targeting** has led to more successful campaign outcomes than a “one size fits all” or generic approach. Evans et al. have assessed the impact of sexual health communications in the USA, specifically looking at the success of the “[Parents Speak Up](#)” national campaign. They praise the campaign because it uses an evidence base from previous research to identify that a key factor in the reduction of risky adolescent sexual health behaviours is **positive parent-child communication**.⁹⁶

⁹² Sims, M. et al. Effectiveness of tobacco control television advertising in changing tobacco use in England: a population-based cross-sectional study. 2014.

⁹³ Harris, A. et al. The Case for Using Personally Relevant and Emotionally Stimulating Gambling Messages as a Gambling Harm-Minimisation Strategy. 2016.

⁹⁴ FDA. The “Real Cost: A Cost Effective Approach to Preventing Youth Cigarette Smoking: <https://www.fda.gov/tobacco-products/real-cost-campaign/real-cost-cost-effective-approach>. 2019.

⁹⁵ Huang, L. et al. Impact of The Real Cost Campaign on Adolescents’ Recall, Attitudes, and Risk Perceptions about Tobacco Use: A National Study. 2017.

⁹⁶ Evans, D. W. et al. Evaluation of Sexual Communication Message Strategies (Parents Speak Up National Campaign). 2011.

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The evaluation of this campaign found that tailored messaging that included a positive and action-based call to action aimed towards talking about sexual health with children “early and often” was largely successful. It was considered to be more effective than the negative messaging from previous campaigns that lectured adolescents or sent negative warning signs. It must be noted this measure of success was concluded through receptiveness to the campaign (citing increased positive attitudes and beliefs post exposure to ads), as opposed to any specific measure of behaviour change outcomes captured. Nonetheless, it demonstrates the importance of evidence-based planning in considering the types of messages that will resonate with the target audience.

Literature on safer gambling communications also highlight the need to tailor messages to the intended audiences. For example, when addressing those potentially harmed by gambling, messaging should avoid being overly simplistic in its framing of safer gambling.

For example, evidence in behaviour change research suggests that **experienced audiences**, such as those already very well versed in gambling behaviours, those at highest risk and those most frequently exposed to operator marketing are likely to disengage with overly simplistic messaging considered to be 'common sense' type messaging. Learnings from other types of communications suggest experienced audiences may feel this over simplistic messaging is directed at those less experienced⁹⁷. An example of this may be simply asking someone harmed by gambling to “stop” – as there are likely a multitude of factors and barriers for someone harmed by gambling to make the journey to cutting down or stopping gambling altogether.

The Revealing Reality report also identifies challenges in addressing gambling audiences specifically, in that many do not consider themselves to be at risk of harm despite displaying risky behaviours. Therefore, the report stresses the emphasis that safer gambling interventions and messages need to equip people with the knowledge of the risky signs and ability to identify these signs in a way that enables them to remain in control while gambling⁹⁸.



Implications for safer gambling communication

It is important to use a strong evidence base on any communications. This could include conducting formative evaluations to test messages, and/or utilising those with lived experience as a sounding board for informing messaging.

Those planning campaigns should be taking particular attention to what works with specific audiences (for example peer-to-peer conversations or affected others) in order to observe whether positive or negative framing might be more successful. There is also value in testing messaging between different demographics to assess which is most likely to be effective among the target audience.

Campaigns should not be launched without consultation with target audiences including those with lived experience.

⁹⁷ Ipsos: Food Safety Communication Toolkit. FSA report template (food.gov.uk). 2021.

⁹⁸ Revealing Reality: An Integrated Approach to Safer Gambling. 2020.

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3.3.2 Gambling messaging should also be explicit and avoid the use of ambiguous language or industry jargon

Clarity in messaging is strongly recommended when it comes to safer gambling messaging, particularly ensuring that the language used is explicitly linked to the campaign objective and is relatable to the target audiences that messages are communicating with.

As explored with the analysis of adjacent alcohol safety campaigns, ambiguous text is critiqued for its lack of clarity in conveying prevention messaging, and phrases such as ‘stay in control’ or ‘stop’ is less effective in initiating behaviour change as it provides little to no incentive or motivation for individuals, nor any solution on how to achieve this⁹⁹. A recent example of this was the evaluation of the “[Take time to think](#)” gambling message, which found it did not lead to a credible beneficial effect on gambling behaviours through a randomised online experimental study through its messaging alone, and would need to be supplanted by better signposting to support.¹⁰⁰

Tabri et al. suggest alternative messaging such as ‘set safer gambling limits’, as these tend to be more persuasive than ‘gamble safely’, because it offers a clear resolution¹⁰¹.

Industry language is also considered largely ineffective due to its length and technicality. Rather, simple text is advised as it can help minimise confusion. Likewise, research shows the use of numerical information must be carefully considered as to not exclude those who struggle with numeracy when presenting safety messaging¹⁰².



⁹⁹ Rowe, B. et al. Revealing Reality. Responsible Gambling: Collaborative innovation, identifying good practice and inspiring change. 2017.

¹⁰⁰ Newall, P. W. S., Hayes, T., Singmann, H., Weiss-Cohen, L., Ludvig, E. A., & Walasek, L. Evaluation of the “take time to think” safer gambling message: a randomised, online experimental study, 2022

¹⁰¹ Tabri, N. et al. Population Based Safer Gambling / Responsible Gambling Efforts. 2021.

¹⁰² Rowe, B. et al. Revealing Reality. Responsible Gambling: Collaborative innovation, identifying good practice and inspiring change. 2017.

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3.3.3 Adopting a distinctive and consistent branding of assets will improve salience and future outcomes

In many public health campaigns, strong and **consistent brand-led approaches** have been considered successful in achieving cut through and engagement with target audiences. For example, the UK Department for Transport's "[Think! Campaign](#)" is considered a strong "umbrella" brand and is therefore associated with safe driving messages, and instantly recognisable¹⁰³.

Implementing a consistent brand identity is strongly advised to address growing calls for a more standardised signposting to harms-related information across the gambling sector. The Revealing Reality report suggests avoiding presenting conflicting messaging across different channels (e.g., on machinery, in venues, online, etc.) to ensure that all consumers receive the same advice¹⁰⁴.

Others argue that **repeated exposure to identical messaging** in some instances can have strong resonance. In particular, the "When The Fun Stops, Stop" has been praised by Chataway et al. for having developed a consistent brand identity over a short period of time¹⁰⁵.

Likewise, there are calls for campaigns to be **highly distinctive** in their communication strategy to avoid being lost within wider industry activity, particularly during peak sports seasons¹⁰⁶. This is perhaps something very relevant to the gambling sector specifically (if not unique) given the capital spent on marketing and advertising by gambling operators and its presence at relevant events (alcohol and smoking advertising is already banned at sporting events/associations with sports teams).

Conversely, some studies argue that there is a need to refresh messaging to prevent it going stale. For example, the 'When The Fun Stops, Stop' was criticised by some for its limited diversification, and findings show that regular gamblers exposed to its messaging likened it to 'background wallpaper', a clear indication that it grew ineffective over time. Therefore, some studies recommend changing messaging regularly to maintain engagement as repeated exposure to identical messaging can create dissociation and potential backfiring¹⁰⁷.

¹⁰³ Department for Transport, Think! Campaign Evaluation <https://www.gov.uk/government/collections/think-communication-activity#think!-campaign-evaluation>

¹⁰⁴ Rowe, B. et al. Revealing Reality. Responsible Gambling: Collaborative innovation, identifying good practice and inspiring change. 2017.

¹⁰⁵ Chataway, R. et al. Expert View on Influencing Gambling Behaviour from a Behavioural Science Perspective. 2018.

¹⁰⁶ Newall, P. et al. No credible evidence that UK safer gambling messages reduce gambling. 2021.

¹⁰⁷ Newall, P. et al. Impact of the 'When The Fun Stops, Stop' gambling messages on online gambling behaviour: a randomised, online experimental study. 2022.

04

Considerations for safer gambling communications

**Recommendations to inform future
gambling harm prevention campaigns**



4 Considerations for future safer gambling communications

This final section considers the learnings gathered in this paper on messaging and framing across adjacent public health and existing safer gambling communication, to make some suggested recommendations for future gambling harm prevention campaigns.

4.1 Identifying audiences (individual vs. society)

It is important to consider the potential level of agency an individual has over their own action, and behavioural messages must be thoughtfully communicated. Given there is some evidence that those experiencing harms may be more susceptible to non-rational thought processes, targeting these individuals with messages that ask them to self-regulate may be ineffective.

Some potential considerations here include:

- **Taking a preventative approach to campaigns** in order to try and target those at earlier risk of harms, rather than focussing on those already displaying at-risk behaviours.
- **Ensuring messages are tested with target individuals** before they are used in any communications.
- Campaigns should also be designed, where possible, **in collaboration with actions from industry and regulation** in order to assist individuals to make positive behaviour changes.

There is likely a role for both societal and individual messages in safer gambling communication. Societal messages **should focus on demonstrating the normalisation of at-risk gambling as a public health issue**, and encouraging greater societal responsibility to support safer gambling, such as focussing on peer-to-peer conversation and driving awareness amongst the general public about the signs of risk behaviours and gambling-related harms.

Messages targeted at individuals need to consider the multitude of personality types and environmental factors that drive gambling-harms, and therefore a one size fits all approach is unlikely to be effective. **Segmenting audiences based on both personality type and external environmental factors** may help with identifying target audiences and speaking to them effectively.

There is limited evidence on what works well in safer gambling, **but creative development research could consider how communications campaigns may apply and interact with the principles of nudging to promote safer gambling for individuals.** It should be noted this appears to have worked best for short-term behaviour change, so campaigns may benefit from using small change behaviours alongside having a clear narrative and rationale to explain why the behaviour is beneficial, and why it should be sustained.

Additionally, some mapping of the customer journey in terms of interacting with such messages may be beneficial to inform communications media strategies.

Self-appraisal messages do appear to have had some success with those who gamble, specifically, with evidence pointing to self-reflection as an important tool to make positive changes to gambling behaviour.

Campaigns may wish to consider how they can further encourage this to happen in session (rather than reflecting after a gambling session).

Again, it should be noted that there is more evidence needed to demonstrate long-term behavioural impacts of self-appraisal messages, however limited evidence suggests **that a more holistic approach to communications that also points to further specific support tools may be appropriate for audiences at the highest risk of harms.**

4.2 Messaging and framing (hopeful vs. harmful)

There is mixed evidence on the effectiveness of using hopeful or harmful messaging when it comes to framing health and gambling communications, and the challenge is that different audiences or individuals may react differently. However, evidence does point to the importance of developing a strong evidence base. **Campaigns should ideally build in formative evaluations into their campaign strategy, based on what works with different audiences.**

Those involved in safer gambling communications could consider further collaboration, including across charities, treatment providers and industry bodies to ensure some degree of **consistent branding** across messages. This could act as a 'golden thread' from which communications would be immediately recognisable and serve as a tool for information-seeking. This communication should be focussed on a tangible action, tool or direction to further information sources.

To date, safer gambling messages have focussed more on "when to change" **rather than "why to change."** While this educational approach can be beneficial, evidence from adjacent sectors suggests that focussing on positive outcomes as a result of behaviour can resonate with target audiences, and this should be further explored.

Messages that rely on reasonable cognitive function such as "stay in control" have been found to be ineffective in adjacent campaigns. While being drunk and being in the gambling 'zone' are not necessarily directly comparable, those planning messages should consider that calls to actions may need to be tailored if aimed at those at the highest risk of harms.

There is a lack of research into whether hard-hitting messaging utilised in other health campaigns (e.g. 'smoking kills') may be effective in resonating with those harmed by gambling. **There are warnings in terms of the need to avoid stigmatising an audience that is potentially vulnerable;** and furthermore, consideration of the risk that an overtly jovial tone may be ineffective in demonstrating harms and instead actually create a 'boomerang effect' where the behaviour is encouraged.

Safer gambling campaigns should avoid stigmatising effects of negative messages by framing gambling as a societal or public health issue, **through focussing on the product and environment itself, rather than on the individual.**

It is evident that industry jargon does not work well with those who gamble, and they are more likely to respond to language that is familiar. Emotive language has worked well in many other adjacent health sector communications. **Campaigns could cognitively test appropriateness of language with those with lived experience as part of holistic evaluations.**

05

Discussion



5 Discussion

This paper has sought to help inform the development of safer gambling communications. By drawing on the learning from previous gambling and adjacent public health communications, the findings provide a useful guide to the merits and key considerations for messaging and framing of future safer gambling campaigns. Our research has primarily considered two thematic areas of discussion: firstly, the targeting of messaging to focus on individual behaviour change vs. those that highlight societal or systems-based issues; and secondly, the framing and placement of messages within a campaign, with a particular lens on hopeful or positive gain framing vs. harmful or negative and more serious framing.

It should be noted that while these two areas of debate provide rich insights and recommendations for future safer gambling communications, this paper acts a starting point and certainly does not provide all the answers to optimal messaging. It also forms the start of a much broader programme of work that will be needed to better understand best marketing and communication practices in this area. For example, there may be a need to delve further into understanding the customer journey of those who gamble and the optimal executional placement of safer gambling messages.

This paper has highlighted that there are multiple challenges to navigate when producing messaging and communications that seek to change behaviour. Despite there not being an 'ideal' way of framing safer gambling messages, this paper does give indications of the types of messages that may work well if applied to future communications. However, given the lack of evidence available in safer gambling specifically, these hypotheses should be tested with target audiences who are at risk of gambling harm and/or those with lived experience of gambling harms. It is vital that campaigns are evidence based in order to act in the best interests of the intended audiences.



In general, regardless of how campaigns are framed, communications should be sincere in the message that there is no “safe” level of gambling, but there are tangible things individuals can do to reduce their risk of gambling harms which are important to communicate. The importance of signposting to relevant tools and support is clear, and should accompany all types of messaging.

Beyond the design and delivery of future communications campaigns, it is also important to note that campaigns are not the only lever that can be used to change behaviour. Communications campaigns should be one part of a system-wide approach to make gambling safer; one which includes other activities that aim to reduce harm such as education, training, digital products, and changes to policy / legislation.

It is also crucial that those working in the area continue to publish evaluations so others can learn from successes and/or failures. There is a lack of available data across industry-led safer gambling campaigns which could help other gambling companies produce effective communications in this area, especially given their access to in-play data which cannot be accessed by third sector organisations. Increasing the evidence available in this area is crucial to gain a better understanding about what does and doesn't work.

Lastly, beyond the insights generated in this report, future safe gambling communications should also take into account the various guidelines which have been helpfully produced by the ASA, such as:

- The [CAP rules](#), for non-broadcast;
- The [BCAP rules](#), for TV and radio;
- Guidance on the [protection of adults](#);
- Guidance on the [protection of u18s](#); and
- Guidance on [ad targeting online](#) (which dovetails with the u18s guidance).

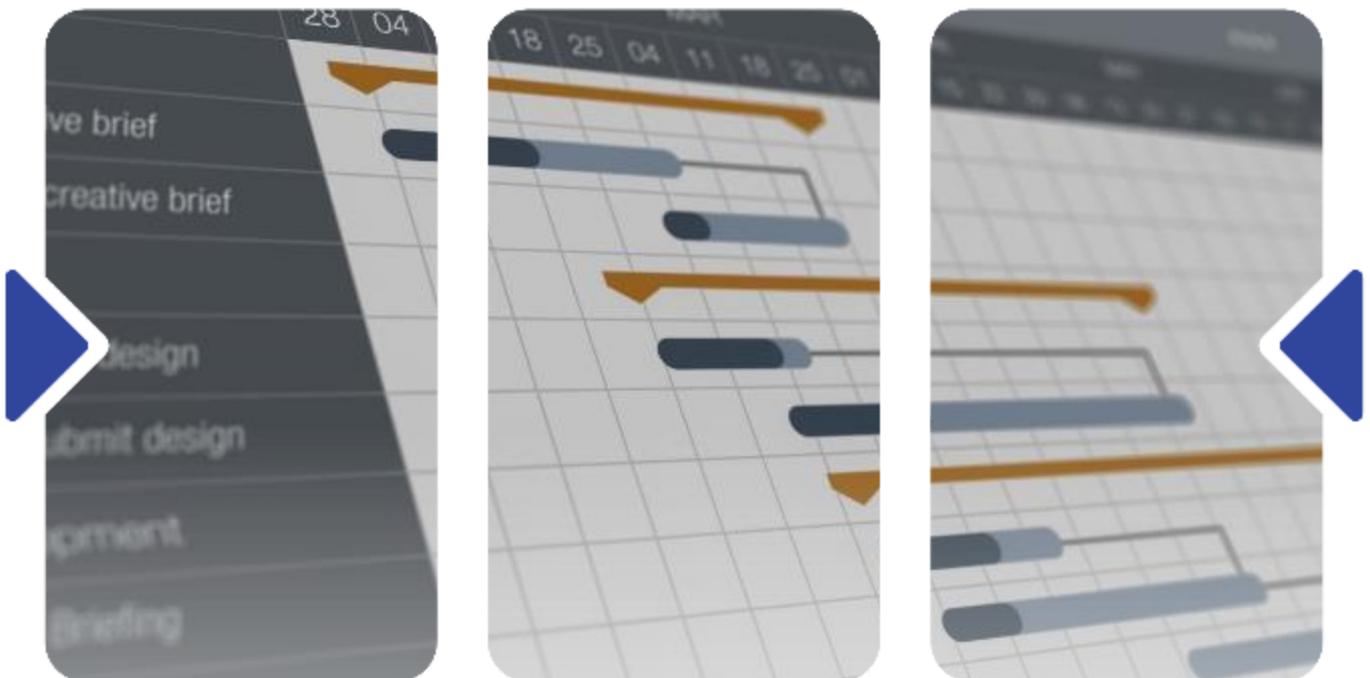
6 Appendix

6.1 Methodology

Ipsos conducted a desk review of available literature in both gambling and adjacent sectors – i.e. social marketing campaigns on public health issues such as smoking and alcohol consumption as well as mental health. The sources used in this report were found by searching different key terms relevant to the research (e.g. “public health messaging in X sector” and “communication strategies used in campaigns for X sector”) on Google, and were mostly pulled from Google Scholar, JSTOR and other online libraries. A full list of sources can be found below.

Given there is an existing and comprehensive body of evidence available for campaigns in adjacent sectors compared to gambling harm (although, not without limitations as detailed in the source appraisal), the review leads with this evidence and seeks to draw similarities between different sources of evidence.

Each thematic section within the chapter reflects on key findings, in addition to our interpretation of potential learnings or ramifications for gambling communications. Each chapter additionally has dedicated sections to learnings from gambling safety specific campaigns, where there is further evidence to explore. The review of each source was underpinned by our hypothetical thematic approaches, while also drawing on evidence available on what works in inspiring behaviour change and other salient learnings for gambling communications that fall outside the defined themes.



6.2 Source Appraisal

This section provides an overview of the different studies used to develop learnings and inform recommendations for effective public health prevention messaging presented in this report. It identifies the general strengths and weaknesses of the sources used and evaluates the validity of the evidence found by assessing the quality of the data provided within it. Adjacent sectors that are more closely aligned with the gambling harms sector (e.g. addictive behaviours, public health issues) were considered to be in scope for analysis. The scope of this review was also narrowed by selecting literature that provided insights that provide the most salient evidence in relation to the thematic approaches outlined in the introduction of this report.

It is important to note that the desk review analysed both formative evaluations and secondary academic analysis of campaigns where published evaluations are not available. The desk review analysed sources covering campaigns from both industry-funded campaigns and those developed by governments and public bodies, as well as third sector/ non-profit organisations.

The list of campaign evaluations for each sector used in this review can be found below, and other sources referenced in the report are included in the footnotes.

	Title of source and campaign	Author and date of publication
Gambling	“ <i>When The Fun Stops, Stop</i> ”: An analysis of provenance, framing and evidence of a ‘responsible gambling’ campaign.	van Schalkwyk, M. et al. 2021
	Expert View on Influencing Gambling Behaviour from a Behavioural Scientist Perspective. (various)	Chataway, R. et al. 2018
	Gambling Marketing Strategies and the Internet: What Do We Know? A Systematic Review. (“ <i>Love the Game, Not the Odds</i> ”)	Guillou-Landreat, M. et al. 2021
	The use of research in the Bet Regret campaign.	Ipsos. 2021
	No credible evidence that UK safer gambling messages reduce gambling. (“ <i>When The Fun Stops, Stop</i> ”)	Newall, P. et al. 2021
	Exploring alternatives to ‘safer gambling’ messages. (various)	Davies, S. et al. 2022
	Responsible Gambling: Collaborative innovation, identifying good practice and inspiring change. (various)	Revealing Reality. 2017
Alcohol	Diageo’s ‘ <i>Stop Out of Control Drinking</i> ’ in Ireland: An analysis.	Petticrew, M. et al. 2016
	Drinkaware “ <i>Drink Free Days</i> ” 2018 Campaign Evaluation.	Gunstone, B. and Newbold, P. 2019

	Title of source and campaign	Author and date of publication
Smoking	Comparing responses to public health and industry-funded alcohol harm reduction advertisements: an experimental study. (<i>How To Drink Properly</i>)	Brennan, E. et al. 2019
	Are “Drink Responsibly” alcohol campaigns strategically ambiguous? (<i>Know When to Say When</i> and <i>Now, Not Now</i>)	Smith, W, S. et al. 2009
	Impact of <i>The Real Cost</i> Campaign on Adolescents’ Recall, Attitudes, and Risk Perceptions about Tobacco use: A National Study.	Huang, L. et al. 2017
	Perceived Effectiveness of Antismoking Ads and Association with Quit Attempt Among Smokers: Evidence from the “ <i>Tips From Former Smokers</i> ” Campaign.	Davis, K, C. et al. 2016
	How effective and cost-effective was the national mass media smoking cessation campaign ‘Stoptober’?	Brown, J. et al. 2014
Mental Health	Review of New <i>Mindset</i> Campaign.	Richards, T. and Lynx, H. 2018
Obesity	Why Are Some Population Interventions for Diet and Obesity more Equitable and Effective Than Others? The Role of Individual Agency. (<i>Change4Life</i>)	Adams, J. et al. 2016
	Impact of the “ <i>Swap It, Don’t Stop It</i> ” Australian National Mass Media Campaign on Promoting Small Changes to Lifestyle Behaviours.	O’Hara, B, J. et al. 2016
	Five reasons why Cancer Research UK’s obesity campaign is flawed. (<i>Obesity causes Cancer too</i>)	Applied Research Collaboration West. 2019
Other	No turning back for <i>THINK!</i> campaign which just keeps digging.	Dollimore, D. 2016
	<i>THINK!</i> Campaign Evaluation.	DfT. 2022
	Effectiveness of a Mass Media Campaign in Promoting HIV Testing Information Seeking Among African American Women. (<i>Take Charge. Take the Test</i>)	Davis, K. et al. 2011
	Evaluation of Sexual Communications Message Strategies. (<i>Parents Speak Up.</i>)	Evans, D, W. et al. 2011

Verifying the credibility of the source depended on a number of factors including the reputability of the publisher within the public health discipline (e.g. Journal of Health Communication) and other similar

research forums (e.g. Journal of Gambling Studies), whether it was peer-reviewed, industry sponsored or included any other forms of bias. It was also necessary to consider the scope of the campaign, including its target audience (e.g. “The Real Cost” campaign targeted adolescents aged 13 to 17, whereas the “Parents Speak Up” campaign focussed on parents of 10 to 14 year-olds), sample size, length of campaign (e.g. the “Swap it. Don’t Stop It” campaign ran in two phases from 2008 to 2011, whereas “Change4Life” launched in 2009 and launched its most recent campaign in 2021 under the Better Health brand), etc. when drawing conclusions.

It should be noted that most of the sources used, as well as campaigns referenced, throughout this document were published within the past 10-15 years. Where available the desk review has included as many relevant recent publications (i.e. less than 5 years old) as possible and excluded sources older than 15 years as many were written at a time when online gambling was not as prevalent as it has become following the introduction of the Gambling Act in 2005. That said, it is important to consider that while some of the more salient campaigns referenced throughout the report ran over a decade ago, it is necessary that they be included to help with evaluating the changes in how the success of different public health campaigns have been measured over the years. More recently these changes have tended to centre around the emergence of social media and wider evolution of online services. However, there is limited evidence available which evaluates the use of social media, user generated content and web analytics in this field.

6.3 Lack of summative, evidence-based campaign impact evaluations

Overall, most of the studies that had been reviewed for this research concludes with key recommendations for future campaigns. Those that evaluated specific campaigns were largely formulaic in structure, examining the campaign’s performance before analysing its subsequent behavioural impact on its intended audience. However, discussions on the latter were often limited or lacking primary empirical evidence of campaign impact or real behavioural change. Instead, these studies typically relied on self-reporting measures or claimed intentions when exploring behavioural implications. Therefore, this emphasises the need for public health campaigns to build more rigorous evidence around its communications including more external impact evaluations as standard when analysing the effect of specific messaging on intended audiences. Particularly, in measuring actual behaviour(s) and unintended consequences and not just self-reported data. Currently there is a limit in the ability to make evidence-based assertions or effective comparisons on the merits of different approaches to campaigns.

It is also important to note that many of the campaign evaluations that were found within the wider literature were either limited in scale (particularly in terms of the sample size or methods used), or in scope (in relation to the thematic approach undertaken). As already mentioned, the absence of evidence in favour of assumptions (e.g. self-reported behaviours or intentions to change behaviour) to substantiate claims on campaign effectiveness in influencing behaviour change raises concerns around objectivity and impartiality. This is evident in many sources particularly when analysing the industry-funded campaigns included in the report (e.g. Diageo’s “Stop Out of Control Drinking”). As such we have taken care to present evidence collected in an objective way. That said, many of the studies were transparent in their coverage and limitations, and often highlighted the need for further similar research to qualify existing academic findings.

6.4 Varying communications evidence available across different health sectors, and limited number of studies in the U.K

Further gaps in the literature included a shortage of campaign evaluations from adjacent sectors such as those around mental health and substance abuse, that can often co-exist alongside gambling behaviours.¹⁰⁸ Not only was this evident when conducting the review for this report but was similarly noted by the authors of sources that were used. Likewise, studies tended to detail wider recommendations for campaign communication strategies, based on generic learnings from interdisciplinary research with little to no reference to relevant campaigns or were backed by evidence. Similarly, there were a limited number of evaluative studies that analysed the performance of safer gambling campaigns, and for many of those that were available, they were often industry-led and appeared to lack independent evaluations. Even fewer pieces of the literature referred to recent campaigns which meant they were not in scope (this was less of a priority when reviewing evidence from adjacent sectors).

Conversely, many studies were available on alcohol and smoking-related campaigns, which has a longer history of public information and social marketing campaigns. These typically provided insight on effective messaging strategies, detailed the implications of the campaign on attitudinal/ behavioural change, and offered recommendations on how the public health community ought to respond. Having this range of evidence enabled us to transfer relevant learnings based on their findings. However, we had to apply caution when including some of the evidence from these sectors. The primary reason for this is because some of the private sector campaigns they were referencing (e.g. Anheuser-Busch “Know When to Say When” and Coors “Now, Not Now.”) appeared to have been launched into the public domain without an evidence base, which subsequently harnessed criticism from academic studies. This criticism often focussed on industry motivations of launching the campaigns as part of corporate social responsibility as opposed to primary evidence of the campaign’s effect which limits our ability to make an assessment of these campaign impact on behaviours.

Another key evidence gap was the lack of published UK-based campaign evaluations that are published in academic journals, particularly of campaigns conducted by public sector bodies. This meant that many of the studies analysed were from different countries including Australia, Canada, Ireland, and the United States of America. This highlights the need to take careful consideration when applying these learnings to national campaigns due to cultural and demographic differences as well as other societal factors such as government policies, laws, and regulations.

¹⁰⁸ Rash CJ, Weinstock J, Van Patten R. A review of gambling disorder and substance use disorders. 2016

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