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EDITORIAL

Editors' Introduction to the Issue

Emma Casey, Kate Bedford, Fiona Nicoll

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Editors' Introduction to the Issue

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Welcome to the October 2025 issue of *Critical Gambling Studies*! Each of the papers published in this issue seeks to galvanise many of the themes central to critical gambling studies. Against the backdrop of new initiatives around harm reduction, state gambling and a range of ongoing global economic crises, these papers all remind us that thinking critically about gambling is as important as ever.

Each of the papers shares a common insistence that effective accounts of gambling motivations and experience require ever evolving and innovative methodological and theoretical approaches. They note the persistence of gambling and gambling related harms and ongoing social and political debates around levies and regulatory crackdown. In the UK, the gambling industry continues to see record profits. The government has recently introduced a statutory levy on gambling profits partly in order to fund research. It is likely that this will have a significant impact on the future of gambling studies in the UK and beyond, with UK grant schemes requiring 'lived experience' approaches to research. We are hopeful that this will ultimately feed into a diverse range of critical accounts of gambling, including a fresh emphasis on lived experience research as a growing field of study.

The papers in this issue remind us of the importance of lived experience research in gambling. Of central importance to the papers is the diverse discursive presentation of gambling harms both within academic scholarship and official policy documentation. The papers in various ways also explore the individual versus

public and state representations of harm. The ways in which state-run gambling seeks to build acceptance via legitimisation projects is central to this. All the papers in this issue serve as a reminder that the gambling industry remains controversial. In various ways, the gambling industry seeks to pre-empt criticism of its products in moral terms. The increased ubiquity of online gambling is another core theme of the papers, with authors examining the increasing number of jurisdictions introducing licensing schemes to allow transnational online gambling operators to provide platforms. The papers explore the relationships between a range of gambling stakeholders, industry, and regulators, highlighting that these relationships often occur with the complicity of the academic community. The global regulatory context of online gambling also emerges as a theme. As international gambling markets continue to open up, the papers remind us of the need for local and international regulation and thinking through how existing regulatory models can be improved on. They underscore how legislative changes are often paralleled with shifting discursive formations and institutional practices.

Mills et al.'s paper *Reframing Gambling Harms as the Product of a Predatory Industry: A Habermasian Interpretation of a Lived Experience-Led 'Counterpublic'* offers an application of the German social theorist Jurgen Habermas's critical theory in order to expose the normative legacy of lived experience gambling campaigns. The paper discusses the findings of a recent study which concluded that public health professionals have much to learn by collaborating with people



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exposed to gambling related harms. They argue that this could enhance public health approaches to gambling in a myriad of ways, including by raising awareness, engaging with social movements and the industries that produce them. Qualitative interviews with a range of public health professionals and people with lived experience of gambling related harms are explored via a Habermasian analysis, notably focusing on Habermas's "system-life world" scheme. The paper develops knowledge on the intersections between state bureaucracy, market institutions, the public sphere, social relations and culture involved in gambling.

Caruana et al.'s paper, *Squaring a Circle? Sustainability Reports as a Legitimacy-Seeking Strategy in State Gambling Monopolies*, expands on the ways in which state gambling organisations operate as monopolies. Acknowledging that gambling is a controversial industry, the paper offers interesting insights into the sustainability reports published over two years for Canadian and Finnish gambling monopolies. Making use of a content analysis of the reports, the paper uncovers various strategies intended to enhance legitimacy. This legitimacy feeds directly into an earnings strategy which is of course directed towards maximising profits for stakeholders. The paper offers a fascinating account of the interconnections between legitimacy seeking, the state and an increasingly fragmented and hard to regulate global gambling market.

The topic of regulation is again picked up in Marionneau et al.'s paper *Responsibilities for harm reduction and prevention in online gambling: Evidence from newly regulated license-based markets*. Here, gambling harm prevention and reduction are situated within a broad network of policy makers, regulators, health professionals and industry. Drawing on a range of restrictions across Europe and Canada, the paper explores the licensed online gambling market in order to interrogate the networks of responsibility for harm prevention and reduction. The paper

indicates that at present this is marked by a separating out of policy makers, regulators and gamblers themselves in terms of treatment policies. It concludes by arguing that effective harm prevention is increasingly inhibited by a system which is infused with conflicting interests around industry, harm prevention resource resources, and offshore gambling provision. Improved harm prevention would necessitate a more symmetrical range of responsibilities, priorities and power relations among key stakeholders.

Harm is further explored in Korfitsen et al's paper *Why, by whom and how? Representations of gambling problems and their solutions in Swedish general administrative court cases*. Here, the focus is on legislative changes in 2018 designed to facilitate support for those suffering gambling related harms in Sweden. Examining 69 appeals concerning gambling treatment within the general administrative court, the paper draws on research which scrutinises court judgements. The paper offers fascinating insights into the ways in which discursive, objectifying and often material consequences of court representations vary quite significantly, often leading to uneven welfare interventions and treatment provision. It is a unique paper filling a gap in existing gambling research which has tended to overlook the ways in which gambling "responsibility" also operates within court systems.

All of the papers in this issue argue for the increasingly urgent requirement of fresh methodological interventions into the study of gambling and gambling related harm. The emphasis on lived experience is especially welcome as is the location of gambling related harm interventions within complex systems of power relations, including legislation, public health initiatives, harm reduction policies, commerce and the state. It reminds us that far from gambling harms being the experience of a minority of isolated individuals, gamblers are instead situated within wide networks of political, social and economic structures and inequalities.

This issue of the journal concludes with Rob Aitken's insightful review of Douglas Unger's novel *Dream City*. The book centres the role of Las Vegas casinos in shifting variants of the American dream—from frontier dreams of opportunity, across working class dreams of decently paid construction jobs, through to executive dreams of casinos as globalised expressions of financial power. Aitken uses the book to (re)think the relationship between finance and gambling, as mutually imbricated. In-so-doing, he connects with scholars in critical finance studies and urban geography who have examined the way that gambling haunts accounts of legitimate finance, even as it is often simplistically cast as the excessively indulgent counterpart to rational investment.

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ORIGINAL RESEARCH ARTICLE

Reframing Gambling Harms as the Product of a Predatory Industry: A Critical Theory Interpretation of a Lived Experience-Led 'Counterpublic'

Thomas Mills, Catherine L. Jenkins, James Grimes, Jo Sampson, Paula Reavey, Susie Sykes

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Reframing Gambling Harms as the Product of a Predatory Industry: A Habermasian Interpretation of a Lived Experience-Led 'Counterpublic'

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Abstract: The framing of public health challenges influences how societies and governments respond to them. This paper argues that public health professionals can counter the narrative influence of harmful commodity industries by amplifying the reframing efforts of progressive social movements. We utilise Jürgen Habermas's ideas to theorise a practical example of a network which shifted narratives to focus on the commercial determinants of gambling harms, offering an original contribution by bridging critical social theory with real-world public health advocacy. Habermasian constructs inform a systematic and theoretically grounded analysis of 33 semi-structured interviews, including people with Lived Experience (LE) of gambling harms. Habermas's ideas, notably his diagnosis of modern social problems as antagonism between the System and the Lifeworld, provide political-economic context to the emergence of a LE social movement. We show that Habermas's notion of communicative rationality underpins both the internal dynamics of this movement and public health professionals' attempt to nurture a 'counterpublic' around it: i.e., a space for new ways of thinking and talking about social issues. Paradoxically, the findings reveal the importance and limitations of local collaborations with people affected by harmful industries in the face of those industries' power, products and advertisements. The findings offer theoretical and practical contributions to commercial determinants research, helping to establish normative foundations and ground it in participatory public health practice.

Keywords: gambling harms, community-centred gambling harms reduction, community mobilisation, policy advocacy, critical theory, commercial determinants of health

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Background

The advancing field of the Commercial Determinants of Health (CDoH) is focusing public health research and practice on harmful commodity industries, including the tobacco, gambling, fossil fuel and alcohol industries, to name some examples (Friel et al., 2023; Maani et al., 2023; Special Initiative on NCDs and Innovation [SNI], 2024). CDoH research includes the analysis of harmful industries' products, production processes, marketing and corporate political strategies, as well as the adverse health

impacts that may be attributable to their actions (Knai & Sovana, 2023). Adverse health impacts include those directly resulting from the consumption of harmful commodities, such as cancers linked to alcohol use (Jun et al., 2023) or gambling-related suicides (Marionneau & Nikkinen, 2022). There is also increasing recognition of the harms generated by more indirect industry efforts to shape social norms and influence how products are discussed in the public sphere via marketing and industry-funded educational campaigns. An established tactic is to

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frame product harms as an individual matter, either via emphasis on 'personal responsibility' or a distinct 'problem' minority (van Schalkwyk & Cassidy, 2023). This may generate stigma (Marko et al, 2023b; Miller & Thomas, 2018; Mills et al., 2023) and undermines effective population level public health policy (Maani et al., 2023).

Community mobilisation is increasingly recognised as vital if the adverse health impacts of CDoH are to be effectively addressed (Freudenberg, 2021; Friel et al, 2021; Hawkins and McCambridge, 2020; SNI, 2024). The World Health Organisation's (WHO) report on CDoH across Europe strongly emphasises this (SNI, 2024), echoing established literature on social movements which highlights their role in creating new possibilities for policy action by reframing social issues (Benford & Snow, 2000). While harmful commodity industries may themselves seek to engineer the appearance of public support, there may still be potential for public health actors to utilise progressive movements' 'persuasive framing' to counter their structural power (Friel et al, 2021) and generate more effective, sustainable and equitable public policy (SNI, 2024). However, while there is a longstanding tradition in community mobilisation in public health (Carlisle, 2000), there are few illustrative examples of how public health professionals can amplify the reframing efforts of social movements that share public health

objectives (Kapilashrami et al., 2016; Laverack, 2013; Scambler and Goraya, 1994).

Here, we deepen calls for a social movement-oriented public health through a consideration of Jürgen Habermas' critical social theory and a practical example of a public health network which amplified the voices of people with Lived Experience (LE), called "Communities Addressing Gambling Harms" (CAGH). We make a case for public sphere interventions that engage and educate the public via the amplification of LE campaigns as a strategy for addressing the narrative influence of harmful commodity industries.

Communities Addressing Gambling Harms

The CAGH network was administered by a public health team based at a city-region government in England. CAGH aimed to raise awareness of gambling harms across the region while facilitating community-centred gambling harms reduction via twelve locally based community projects. A complex intervention (Skivington et al., 2021), CAGH included a LE Advisory Panel, various Voluntary, Community, Faith and Social Enterprise (VCFSE) organisations (some of which were LE-led) and a Community of Practice (CoP), the latter attended by VCFSE project staff to discuss ideas and implementation challenges. The term 'CAGH network' refers to the combination of these intervention components.

Table 1. CAGH Learning Points. Adapted from Mills et al. (2024)

Intervention type	Learning point
Community engagement	LE-led platforms can connect with diverse ethnic and faith-based communities to raise awareness of gambling harms
Education	Education on harmful products and manipulative marketing strategies can be engaging while avoiding both moralising and stigmatising language
Training	Training in gambling harms assessment, signposting and support is relevant across the community, health and education sectors
Support	LE-led community support organisations can provide accessible and person-centred support that complements NHS gambling addiction clinics
Social campaigns	Campaigns to end gambling sponsorship in sports can mobilise the charitable arms of professional clubs despite a challenging commercial environment

The public health team acquired evaluation assistance from the National Institute for Health and Social Care (NIHR)-funded research centre, PHIRST (Public Health Intervention Responsive Studies Teams) South Bank. The PHIRST South Bank research team has published various research papers based on this evaluation. Mills et al (2024) explore how the CAGH CoP enabled the development of diverse social innovations in community engagement, education, training, social support and social campaigns; the key learning points of the CoP are presented in Table 1. In an additional paper, Jenkins et al (2024) push out beyond CAGH to explore the contributions of people with LE to gambling harms reduction across the sector, as educators, trainers, counsellors, peer supporters, research advisors and social campaigners.

This paper focuses on how the CAGH network raised awareness of the commercial determinants of gambling harms across the city-region area. The analysis is an in-depth secondary analysis (Heaton, 2008) of qualitative evaluation data focusing on the public sphere orientation of CAGH, which is not explored in Mills et al (2024) or Jenkins et al (2024). Specifically, we explore how CAGH amplified the efforts of LE campaigners to reframe gambling harms as an issue of harmful products rather than

‘irresponsible’ individuals. Habermas’s ideas are utilised to enrich understanding of these reframing efforts through a focus on the LE social movement that underpinned CAGH and those intervention types (i.e., community engagement, education and social campaigns) that sought impact in the public sphere.

Jürgen Habermas’s critical social theory

Habermas’s work, which extends from the 1960s to the present decade, can be principally understood as seeking a robust foundation for Critical Theory, a form of empirical inquiry oriented to emancipation and social justice (Jay, 1996). His most advanced text in this regard, the two-volume *‘The Theory of Communicative*

Action’ (Habermas, 1984; Habermas, 1987), presents various complementary theories operating across two levels. On the first level, there is a theory of ‘communicative rationality’ that proposes how individuals reach understanding with one another. In Habermas’s view, when acquiring language, speakers acquire intuitive knowledge of the communicative practices and conditions that facilitate mutual understanding and agreement (Habermas, 1984). Habermas undergoes a ‘rational reconstruction’ of these conditions. He claims that, while only realised imperfectly in the real-world, any sincere communicative act anticipates an ideal of the perfect communicative encounter, or ‘ideal speech situation’. Real-world communication can be reflected upon to uncover distortions considering this ideal, while the ideal may also serve as a guide for democratic institutional reforms (Blaug, 1997).

The second level to *The Theory of Communicative Action* presents a theory of the evolution of modern society that aims to elucidate constraints on real-world communication. Here, Habermas invites us to view late capitalist society as a shifting conflict of two overlapping social spaces: the System and the Lifeworld. The System is the space of material reproduction consisting of state and market institutions. Coordination is facilitated here via steering media, such as money and power. By contrast, the Lifeworld is the symbolic space in which personalities, culture and social relationships are nurtured (Power et al., 2020); it includes the public sphere, in which public opinion is formed (with potential to steer the System), as well as the private sphere of family, friendships and civic associations. Actors are oriented to reaching agreement in the Lifeworld, with communicative rationality the guiding force, whereas, in the System, actors are strategic in their interactions with others, making decisions on the basis of instrumental means-ends rationality (Habermas, 1984; Habermas, 1987).

Capitalist modernisation entails a gradual decoupling of the System; the System's subsequent domination or 'colonisation' of the Lifeworld is not inevitable but reflects the trajectory of modern societies. Though the optimal inter-relationship between the System and Lifeworld changes over time (and can only be evaluated qualitatively according to social actors' 'internal perspectives'), Habermas believes that core aspects of culture, social relations and personality require nurturing through consensus-oriented communication. Thus, when System processes intrude into these domains, Habermas speaks of colonisation:

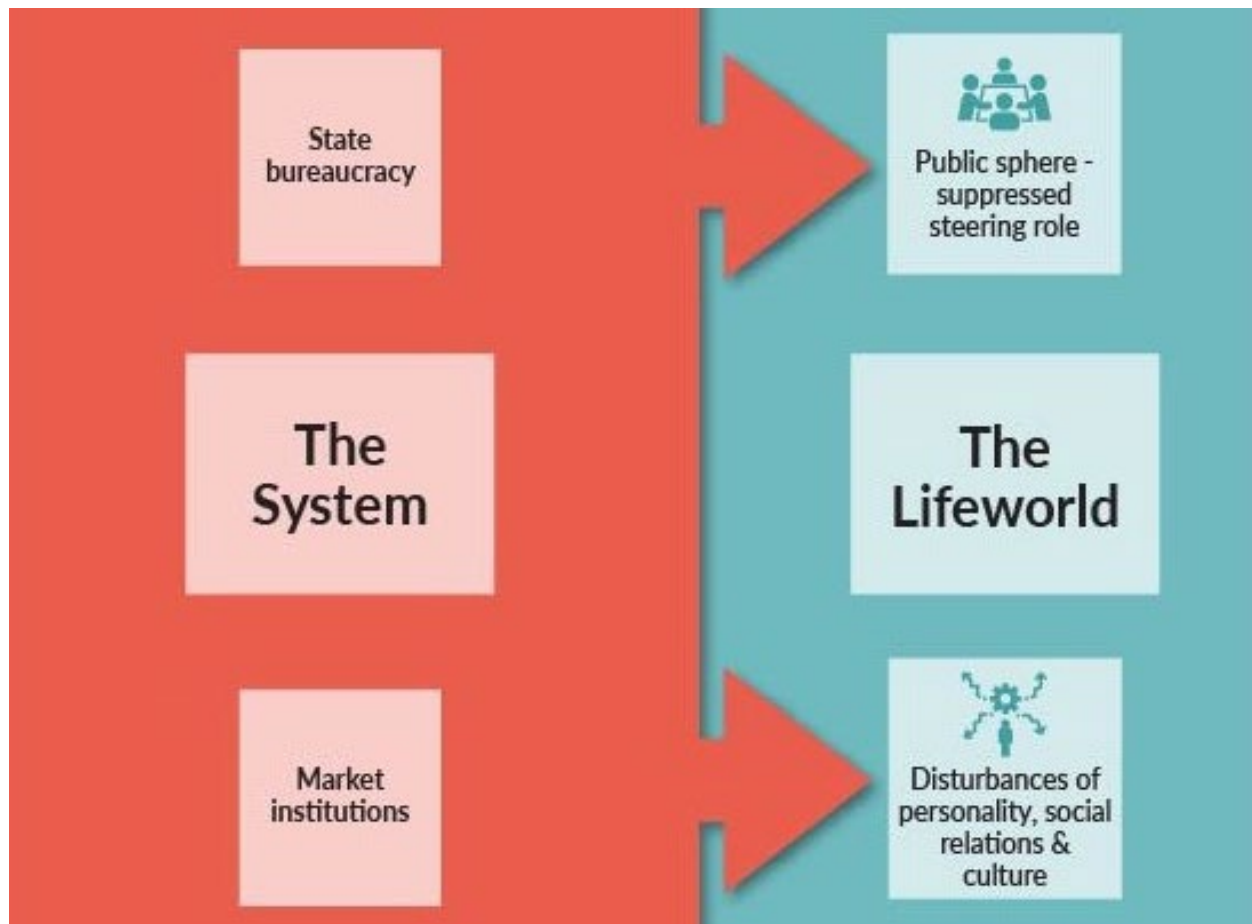
In the end, systemic mechanisms suppress forms of social integration even in those areas where a consensus dependent co-ordination of action cannot be replaced, that is, where the

symbolic reproduction of the lifeworld is at stake. In these areas, the mediatization of the lifeworld assumes the form of colonisation (Habermas, 1987, p. 196).

We have represented Habermas' System-Lifeworld schema in Figure 1, identifying varied Lifeworld disturbances that arise when the System is in a colonising state; this figure is elaborated upon throughout the paper.

Habermas's analysis of how bureaucratic and market forces distort social life in late capitalism offers a foundation for both empirical research and political intervention. His focus on the dysfunctions of welfare state-capitalism has, however, prompted debate about possible analytical and political blind spots in relation to, for example, gendered social practices and norms which predate capitalist modernisation (Fraser, 1990). Notwithstanding the salience of some

Figure 1. System colonisation of the Lifeworld.



objections, including the charge of Eurocentrism (Allen, 2016), we think Habermas' ideas provide a useful political economy with practical implications for public health practice oriented to addressing CDoH. Our thinking has been shaped by Cosgrave's (2022) Habermas-informed analysis of the twinned evolution of state and corporate gambling strategies during the neoliberal period, which helpfully highlights various colonising impacts arising from the pursuit of increased state revenues and capitalist profits.

Cosgrave describes how a process of cultural rationalisation, from the 1960s onwards, displaced prior religious and social values that urged gambling's proscription in many countries. With gambling now framed as presenting economic opportunity, the risks of market liberalisation are downplayed. Central to this is the dominance of instrumental rationality as System processes expand and intensify. Following Max Weber (a major influence on Habermas), the exercise of instrumental rationality generates contradictions as confident assertions to 'master all things by calculation' (Weber quoted by Cosgrave, 2022), resulting in negative, unintended consequences. Constraints in the public sphere limit moral-practical discussion over gambling's place in society as citizens are 'instrumentalised' as revenue-generators, particularly where the state directly produces and promotes gambling via, for example, national lotteries. The dominance of instrumental rationality in production sees further tensions develop, as technologically constituted gambling products not only incorporate a house edge but manipulate consumer proclivities and affect responses, in an analysis that builds on Natasha Schüll's celebrated account of 'the zone' (Cosgrave, 2022).

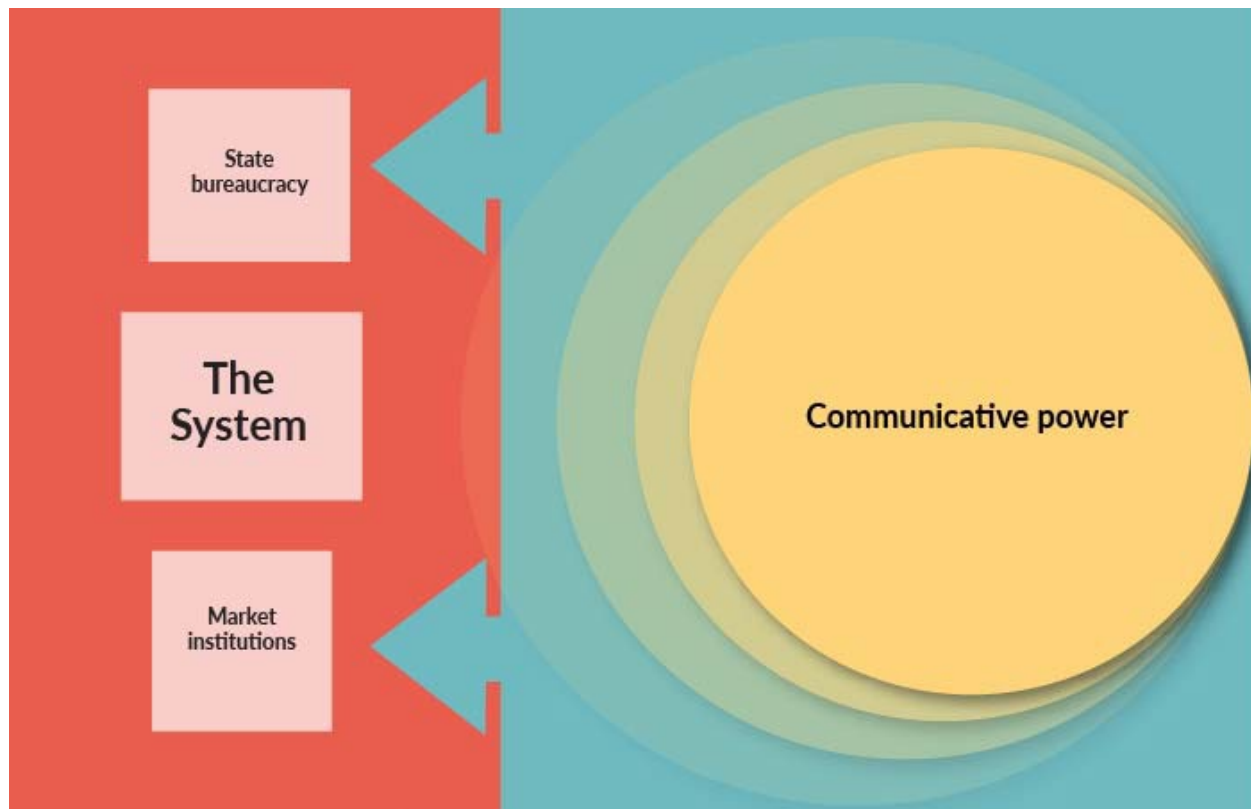
Habermas uses the phrase 'systematically distorted communication' (Habermas, 1984) to describe communicative encounters like these that are distorted in ways that may not be apparent to participants. A line of inquiry that

Cosgrave does not consider is the role of public deliberation in bringing collective clarity to situations marked by such systematic distortions; indeed, Cosgrave presents a form of cultural criticism that is less suggestive of courses of action than more practical applications of Habermas' ideas (Blaug, 1997).

It is useful here to consider the social actor that Habermas sees as most exhibiting his conception of communicative rationality in late capitalism: new social movements (Habermas, 1987b; Kelleher, 2001). Habermas interprets these movements, which may include environmental, LGBTQ, peace and alternative health movements, as responses to System colonisation. Such movements are not concerned with questions of distribution (as the politically conscious working class once was) but with the moral-practical questions of '*who we are, how we live and who is accountable*' (Edwards, 2004, p. 115). Below, we interpret LE campaign groups along these terms.

From a Habermasian perspective, new social movements support 'counterpublics' for developing new ways of thinking and talking about social issues that challenge dominant narratives (Fraser, 1990). Some social movements are, of course, highly regressive (Fraser, 1990) and some create a hostile environment for public health, as in the case of groups propagating vaccine conspiracies. What differentiates progressive movements from regressive ones is the former's internal exercise of communicative rationality: social hierarchies are questioned, while democratic deliberation drives a shared understanding of the nature and consequences of social practices and ideologies (Kemmis, 2008). These movements can influence public policy through a form of 'communicative power' linked to their publicly defensible claims; a power that possesses normative legitimacy that distinguishes it from the organised social power of corporations and political parties (Habermas, 1997). This communicative power is represented in Figure 2. Habermas believes that progressive social movements have the potential to

Figure 2. The communicative power of Lifeworld actors.



decolonise social life and may even support the development of participatory institutions that subordinate the System to the Lifeworld (Scambler and Goraya, 1994).

Towards a Habermasian public health?

Before we utilise Habermas' ideas to interpret CAGH, it is useful to reflect on the public health profession's positioning in relation to the System-Lifeworld schema. On one hand, public health can be interpreted as a System endeavour (Scambler and Goraya, 1994), with public health professionals constituting an elite professional grouping that, in the UK, finds employment by the state. Certainly, in the development of the profession, early emphasis on professionalisation with medical qualifications marking entry, along with the dominance of quantitative methodologies (e.g., epidemiology and surveillance) (Sim et al., 2022), left very little scope for public deliberation regarding the ends and

means of public health and discounted lay knowledges (Williams and Popay, 2001).

On the other hand, and as noted in the introduction, public health has a long tradition of community activism and mobilisation (Carlisle, 2000; Laverack, 2013) through which public health professionals aim to empower communities to address the health challenges that affect them. The field of 'critical health literacy' relates to this, emerging in response to the limitations of 'functional' approaches (Sykes et al., 2024), to support individuals and communities to be active citizens in relation to health. While these forms of public health practice more strongly align with Habermasian theory, exhibiting a 'Lifeworld orientation' (Scambler & Goraya, 1994), this raises the question of whether and how communities may be empowered by public health professionals. Popay et al (2021) detect depoliticising trends within 'empowerment' approaches, with a focus on community assets

and proximal conditions at the expense of political and social transformation.

There is no simple solution for public health that springs from Habermasian theory. Habermas is aware that efforts to democratise institutions, if not emerging from below, can reflect and reinforce state, corporate or professional power in sometimes subtle ways. However, given the special role that Habermas assigns to autonomous social movements in driving social change, the question arises of how public health professionals might reach out and support such movements to achieve shared political and social objectives, a form of public health practice anticipated by Scambler and Goraya (1994). Here, we interpret CAGH as an illustrative example of such a partnership, with public health professionals and people with LE sharing a desire to displace System narratives of gambling harms as part of a drive to re-evaluate and re-institutionalise commercialised gambling in late capitalist society.

Ethical considerations

The study was carried out in accordance with the Declaration of Helsinki and received ethical approval from the School of Health and Social Care Ethics Panel at London South Bank University [ETH2122-0114, ETH2223-0117 and ETH2122-0179]. All participants provided formal written informed consent to participate.

Methods

A qualitative process evaluation was undertaken of the CAGH network by a public health research team, based at PHIRST South Bank. The evaluation design was initially developed through three workshops which were attended by the research team, public health professionals linked to CAGH and two people with LE of gambling harms recruited locally from CAGH. The evaluation design was then implemented over an 18-month period. A Patient and Public Involvement and Engagement (PPIE) panel, consisting of three people who held

positions on the CAGH LE Advisory Panel, guided the research team during data collection and analysis.

Data collection

An interview topic guide was developed which explored three topic areas: 1) the CoP's role in driving innovation and learning among the network, 2) the potential of community-centred interventions to address gambling harms at project level and 3) LE contributions to addressing gambling harms reduction (both within and beyond CAGH). The topic guide was piloted twice before being implemented flexibly in semi-structured interviews; the research team also gleaned tacit insight into CAGH by informally attending CoP meetings, with this influencing interview questions and data analysis. Network actors were purposefully sampled for interviews across three main groups:

- Senior CAGH Advisors (n=6), including two people with declared LE: the unique identifier for this group is 'SCA'
- People with declared LE on the LE Advisory Panel (n=7): the unique identifier for this group is 'PLE'
- Project staff from the 12 VCFSE projects (n=16), which included three members of staff with declared LE: the unique identifier for this group is 'PS'

22 interviews were undertaken at the midpoint of the CAGH network's implementation phase with a further 11 at the endpoint, including four follow-up interviews with stakeholders who had pivotal roles in CAGH: in total, 33 interviews were undertaken with 29 network actors. All interviews were digitally recorded and transcribed verbatim.

Data analysis

A Habermasian-informed, secondary analysis (Heaton, 2008) of interview data was conducted, following the primary analysis presented in Mills et al (2024) and Jenkins et al (2024). Habermas'

critical social theory was utilised, as the research team observed that CAGH's empowerment of LE campaigners resonated with applications of Habermas that utilise a critical methodological practice to address power relations among professionals, researchers and participants (Blaug, 1997). The research team thus convened ongoing theorisation sessions with CAGH facilitators and the PPIE panel to elucidate their practice, explore whether and how Habermas' ideas aligned, and to conduct and refine the analysis.

Data analysis aimed to identify and theorise System and Lifeworld processes, inter-relationships and tensions within the data, an analytical strategy common to the small number of Habermas-informed empirical studies (Blaug, 1997; Power et al., 2020). TM combined a reading of Habermas texts (both primary and secondary literature) with iterative phases of data analysis, theorisation, writing and group discussion. With a coding framework already developed and applied to all interview data using NVIVO 12 (2017), in the primary analysis by TM and CJ, Habermasian constructs were incorporated into this to code and organise data that related to the System and Lifeworld constructs. TM also developed various Figures (see Figures 1, 2, 3, 4 and 5) to visually and accessibly elucidate how the System and Lifeworld presented in the data, which enabled group discussion about Habermas' ideas among the research team, CAGH facilitators and PPIE panel. Data summaries were also reflected on and discussed, informing the iterative development of themes which were refined during the writing and review process.

Findings

Data were organised into two themes that, together, convey how CAGH amplified the perspectives of LE campaigners:

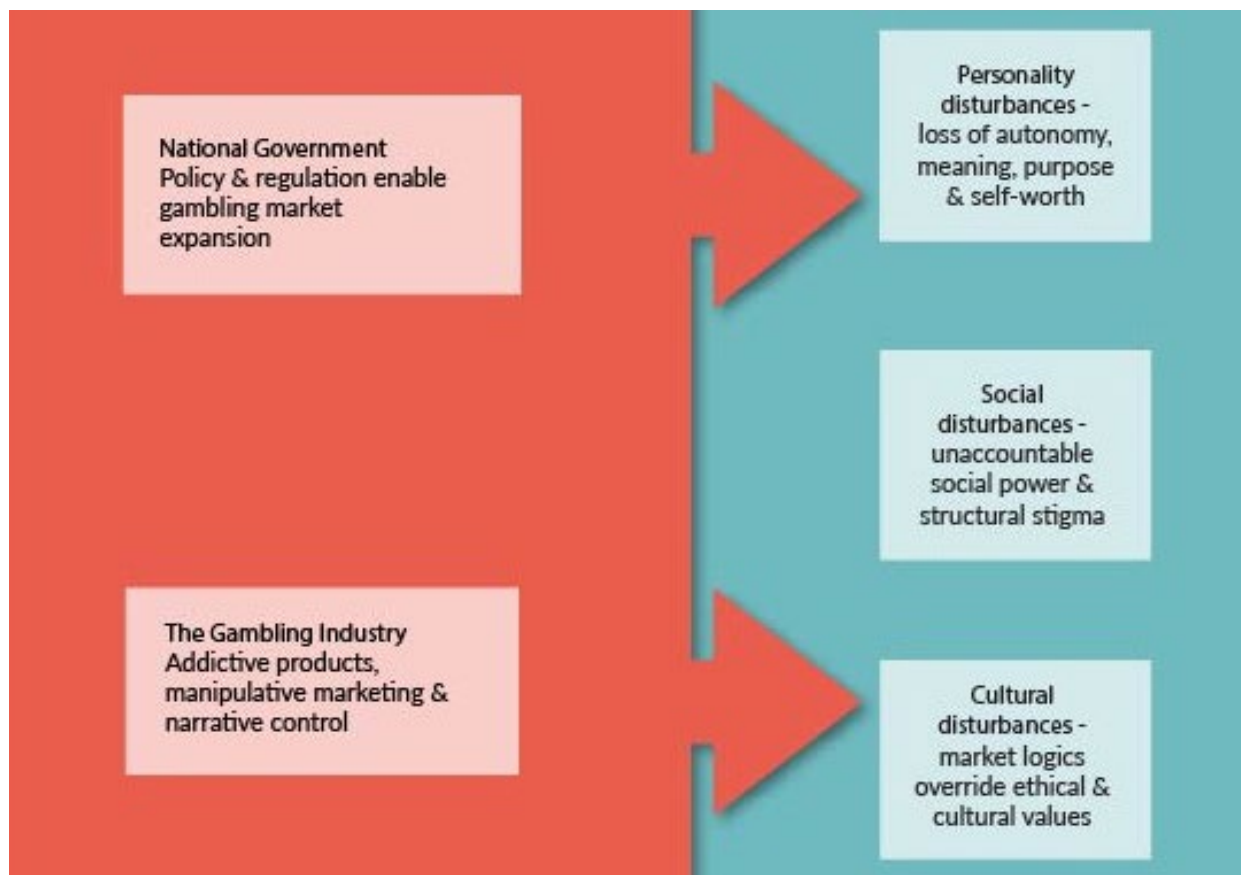
- Theme 1: A LE-led counterpublic for challenging industry narratives
- Theme 2: CAGH: A Lifeworld orientation

Theme 1 tracks the spontaneous emergence of a LE-led counterpublic that Habermasian commentators see as pivotal to social change, as through counterpublics new ways of thinking and talking about social facts are generated (Fraser, 1990). Theme 2 then explores how CAGH sought to amplify this LE-led counterpublic. Here, Habermas' ideas lend theoretical support to the public health professionals' strategy of facilitating social change through a communicative, dialogical approach. Each theme has figures that build on Figures 1 and 2 to elucidate the narrative.

Theme 1: A LE-led counterpublic for challenging industry narratives

According to Habermas, the expansion and intensification of System processes across society – including the transformation of culture and leisure into mass commodities that imply 'indirect control through fabricated stimuli' (Habermas, 1971, p. 107) – need not result in negative personal and social outcomes. This occurs only when space is eroded for consensus-oriented communication to facilitate socialisation, social integration, and cultural renewal. The people with LE within the sample provided many examples of disturbances indicating the erosion of these core Lifeworld domains (see Appendix 1 for supporting data excerpts). These disturbances include a loss of autonomy, meaning and self-worth (personality disturbances), unaccountable social power and structural stigma (social disturbances) and examples of damaged ethical and cultural values (cultural disturbances) (see Figure 3), each linked to the operation and influence of the gambling industry. For example, we interpret the following quote as indicating a personality disturbance:

Figure 3. Colonising impacts of commercialised gambling.



The [gambling] industry manipulate and groom you. They do: they just completely strip you of everything that is, I can't find the right word, is you, as a person (PLE5).

Some people's experientially based understanding of the commercially driven nature of gambling harms led them to campaign politically. During the study, people with LE within the sample protested at professional sports organisations to end gambling sponsorship, appeared on diverse media to publicly challenge the gambling industry and participated in a cross-party parliamentary reform movement. Central to these campaigning efforts was a rejection of 'personal responsibility' narratives, as well as the medicalised notion of the 'problem gambler'. These narratives were criticised for concealing the gambling industry's role in facilitating harm and for generating shame and stigma. Some LE-led

organisations who participated in CAGH were developing educational interventions to displace alternatives framed in terms of personal responsibility, with the latter exhibiting possible strategic communication:

I'm happy to stand up and talk about addictive products. I'm happy to talk about the role the industry play in marketing and promotion, appeal strategies etc., and the harm that gambling does. If I felt that I was silenced in any way then that would be wrong, whereas I do feel that some of the messaging from some of the organisations isn't as transparent (SCA6).

LE campaigners found these efforts to counter pro-industry messaging challenging in part due to constrained funding. Those LE-led organisations that rejected industry funding out

of principle reported this being 'detrimental to us and our growth' (SCA3), with extremely limited public or indirect (e.g., regulatory settlement) funding options that permit operational independence: 'I've got no issue ... if money is given to an independent body' (SCA6).

Further challenges included national policy inertia, as campaigners clashed with the inaction of national politicians, generating exasperation: 'what more do we, as a community, need to show and tell the government?' (SCA3). One LE campaigner was told by a national politician that gambling advertising would not be curtailed because 'there's huge industries that benefit', suggesting the determining influence of the steering media of money over policy decisions. The campaigner alluded to the very different System logics underpinning the politician's argument, in contrast to their Lifeworld perspective: 'It's not up to people like me to make that financial argument. We've just got to keep saying that: "This is harming people. This is harming young people"' (PLE2).

However, LE campaigners recognised that the broader LE community exhibits diverse positions on the question of how to talk about and understand gambling harms. Some people prefer a sense of shared responsibility with the gambling industry while others align with the 'problem gambler' label because it may help them 'own' their recovery, despite others seeing a 'horrible term' that 'misrepresents the truth' (PLE4). Furthermore, it was reported that there was intense debate within the LE community on the question of how to fund gambling harms prevention, with some LE organisations accepting industry funding. However, LE campaigners in the sample professed an underlying respect for others with contrasting views on this question. These differences aside, the process of collectively appraising the gambling industry's role in gambling harms was linked to situated learning that may help some from sustaining their recovery from gambling addiction:

I relapsed a few years ago as a result of advertising, but now I'm a little bit more educated around it ... I'm educated around it because I've spoken to more people, I understand it a little bit more deeply, about the Gambling Act Review and the products and why they are addictive and the fact that they are designed to be addictive, and all these different things. I now go from seeing a gambling advert: where once that might have triggered me into wanting to gamble..., now I look at them and ... see them for what they are (PLE1).

Here, then, we can identify a counterpublic in which learning is being generated as pro-industry narratives are being publicly scrutinised. The public health professionals in the sample highlighted the significance of these reframing efforts while LE campaigns, particularly in relation to gambling-related suicide, were praised for placing gambling harms on national policy agendas. Operating across local, regional and national levels, these public health professionals were frustrated as their efforts to address gambling harms locally were compromised due to an absence of statutory funding and constraints on their professional policy advocacy, given the System context in which they operate. The following quote alludes to the unique public influence of social movements that Habermas sees as a potential source of communicative power (Habermas, 1997). With people with LE able to openly talk about the politics of gambling harms, opportunities are presented for upstream policy action:

I'm in government ... which means that we're ... constrained on what we can say ... [By contrast the] Lived Experience community are free to hold people to account and to say what they think and what, actually, is going on. ... There's definitely a good pocket of voices who are countering that industry narrative and who are very critical ... [and] very upstream ... My experience from other areas is that we focus too much on the downstream and we don't often look at the upstream ... it's harder [for public health professionals] to win hearts and minds around that (SCA2).

Figure 4 conveys the LE counterpublic pushing back against System colonisation in the gambling sector (see Figure 4).

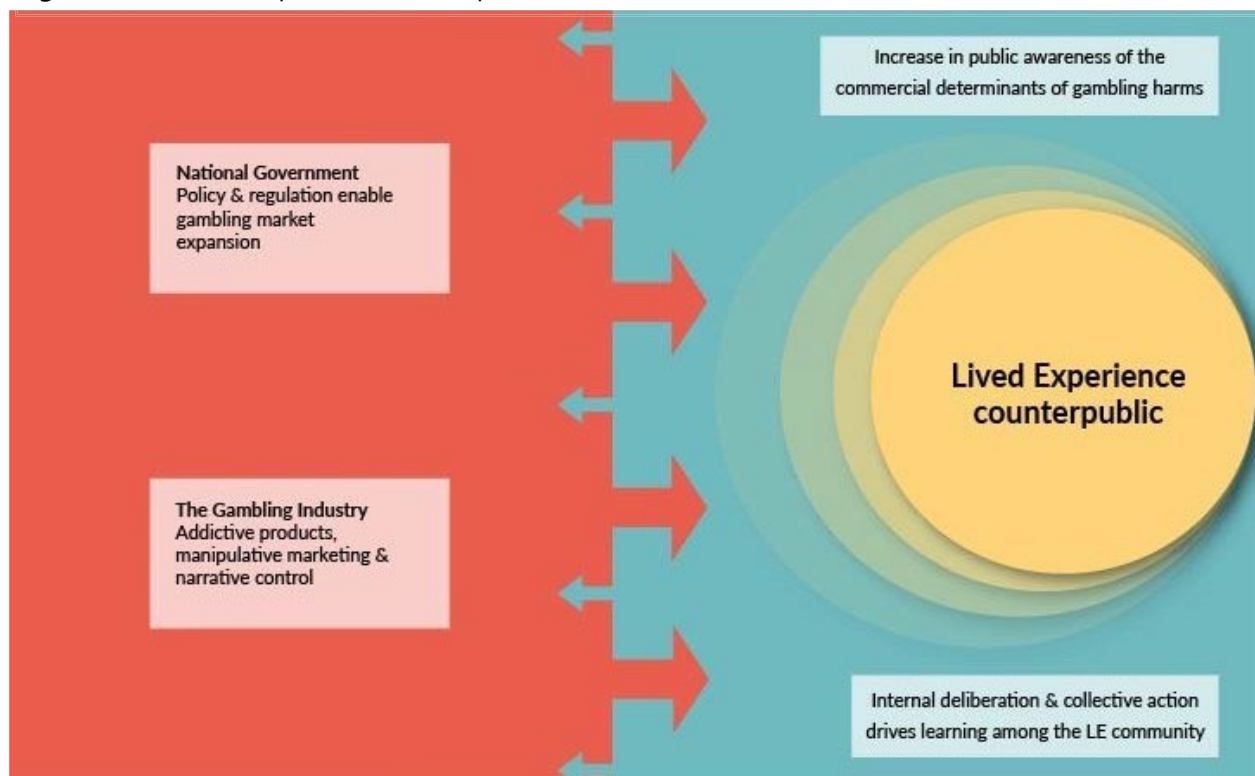
Theme 2: CAGH: A Lifeworld orientation

CAGH aimed to raise awareness of gambling harms by amplifying the LE counterpublic identified in Theme 1. Diverse community-based

and local government organisations were invited to join the CAGH network to discuss the nature of gambling harms with the LE Advisory Panel. It was anticipated that these discussions would shape the aims and contents of CAGH projects, which would then disseminate narratives that were more reflective of the values and understandings of the panel. CAGH facilitators anticipated that this may, in turn, stimulate public calls for System reforms. One locally based public health professional planned to highlight these calls within their local government to 'guilt us into a bit more action from a public health point-of-view' (SCA5). This approach of seeking social and political change through informed public discussion reflects, we argue, a 'Lifeworld orientation'. The public health team utilised a communicative, dialogical approach to facilitate public discussion on fundamental questions pertaining to gambling:

It's stimulating that conversation: what role does gambling play in our society? Is it in balance or not, now we've had an

Figure 4. The Lived Experience counterpublic.



opportunity to discuss and talk about it and think about it? ... Maybe we don't want to have five betting shops on our high street? And maybe the next time a licensing decision or application comes up we're going to ... put a representation into the council, as a community group, because we are worried about this and don't need another one (SCA1).

Such values-oriented, Lifeworld discussion was stimulated in the public sphere via a variety of interventions. CAGH facilitators coproduced a social marketing campaign with the LE Advisory Panel called *"Odds Are: They Win"*, designed to amplify their rejection of personal responsibility narratives. *"Odds Are: They Win"* sought to educate the public (including but not limited to gambling consumers) about harmful gambling products and industry malpractice. Campaign posters were disseminated on social media and in physical spaces, including the city-region's tram network, to ensure consistent attention on the gambling industry as the source of harm: 'That is where our narrative is in [redacted name of city-region government] now' (SCA1). The aim was to initiate public conversations about the gambling industry:

"Odds Are: They Win" ... doesn't say 'gambling is bad'. It's saying, "have a look at what industry is doing" and [it aims to] start that conversation about [whether it is] good or bad, start to recognise what might be harmful tactics, harmful products ... (SCA1).

Similarly, CAGH education, community outreach and social campaigning projects adopted a communicative, dialogical approach to achieving impact in the public sphere. LE-led platforms were convened with VCFSE organisations hosting people from the LE Advisory Panel to talk about their experiences of gambling harms. Audiences were informed about and reflected on examples of personal, social and

cultural Lifeworld disturbances (see Theme 1). In one educational session, for example, audiences considered the case of an 11-year-old boy who, asked to draw themselves wearing a football shirt of their favourite team, did so with a gambling sponsor on the front. In Habermasian terms, audiences are being invited here to diagnose a possible instance of System colonisation, in the form of a cultural disturbance. Audiences then deliberated upon how children and young adults may be protected from exposure to gambling, with conversations exploring national policy options. Educational sessions were convened on the assumption that, with audiences becoming more aware, they might educate others:

If they come out of that and think "Blimey, I had no idea it could be that bad", then that to me is a result because they might go and speak to their partner or their kids ... and suddenly when they're seeing those adverts on telly they might be more aware of it, and rather than just being a background noise they [might] think "That's another gambling advert: I see what that bloke is saying now". And to me that's all it is: it's planting that seed and everything else can water that seed afterwards (PLE1).

Indeed, public awareness was reported to build in a 'ripple effect' (PLE1) that was intangible but worked through 'filtering through' (PLE5), 'changing attitudes ... and changing cultures' (PS2) in a process of 'gradual change' (PLE3). A VCFSE organisation highlighted the communicative power (Habermas, 1997) of CAGH:

[We are] trying to build a grassroots movement within community sports ... to help advocate and lobby clubs and the government ... [to] use sports as the advocacy tool rather than people in public health or academia saying, "You can't do this: this is really bad". It's

actually coming from sport itself ... that's where the power lies with this (PS4)

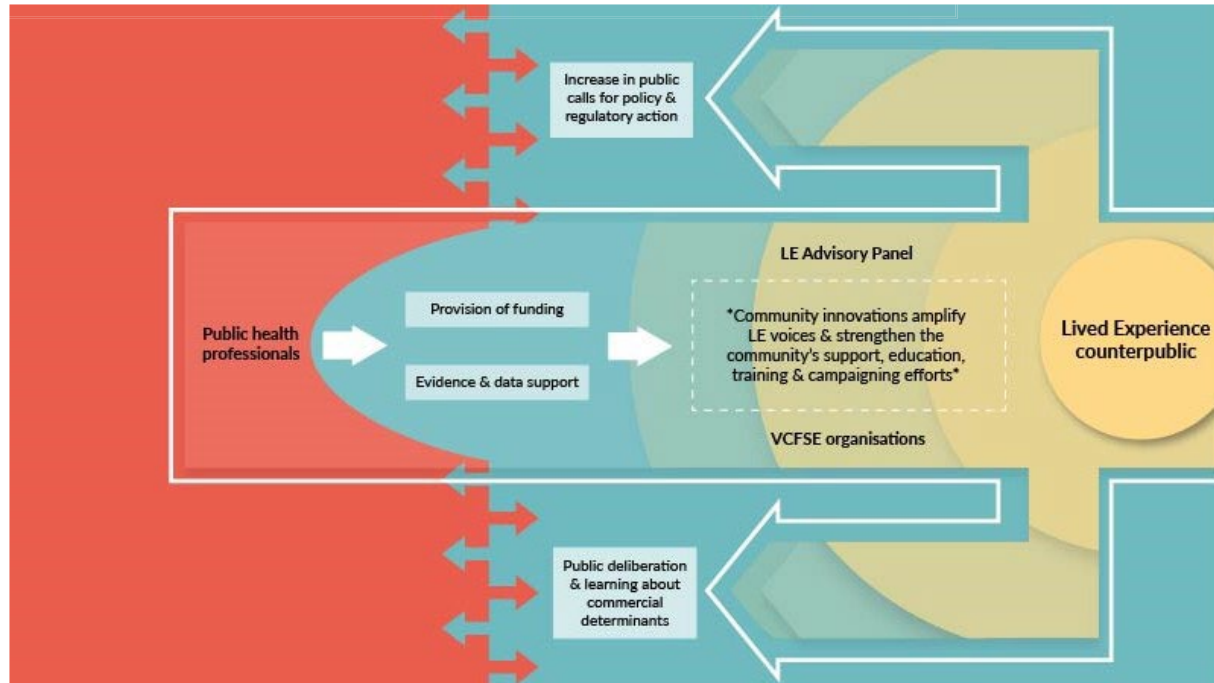
However, achieving social change on a communicative basis alone was challenging. One social campaign project which aimed to have professional sports clubs commit to the objective of ending gambling sponsorship reported challenges due to clubs' existing deals with the gambling industry. The campaign had to soften its language to ensure that clubs engaged yet the appropriateness of this was questioned by the LE Advisory Panel. Discussing this issue, the project lead described constraints in the public sphere, suggesting limitations to dialogical change efforts when pushing into System spaces in which the steering media of money is dominant:

They [the LE Advisory Panel] didn't think ... [the language] was strong enough: they wanted it to be more ... visceral ... but, when you then use that language potentially in the public sphere, that has the potential to cut lines of communication off and push away stakeholders that we really want to engage ... [because] they have commercial contracts in place (PS4).

There was also widespread recognition of the limitations to community level interventions generally. While the people with LE in the sample welcomed the opportunity presented by CAGH to engage in gambling harms reduction work locally, many had advanced understandings of the need for a multi-levelled public health strategy that combines local interventions of different types (e.g., local government, NHS and community services) with national level policy and regulatory measures to restrict access to gambling products and end gambling advertisements. In the following quote, a project staff member with LE reflects on their own experiences to offer a nuanced account of the likely impact of their educational intervention in the context of a colonising System:

I don't ... believe that educational stories are enough ... It's just a raindrop in an ocean of gambling messaging and marketing ... and they absorb so much at that age. I absorbed so much ... [and] I don't believe that it would have stopped me. What would have stopped me is [an educational story] and then, maybe, there would have been a fleeting moment in my head where I would have gone, "I'm not going to gamble today", then, there would have been no advertising on TV. When I got home that day from the school, I'd have tried to log into the gambling site and they [would have] said, "No, you can't log into today because you spent too much money last week." I wouldn't have had the email saying, "Here's a free bet", "Here's a bonus", "Here's a VIP scheme". If all those things would have happened – I know it's an ideal world – then I think that would have been an intervention that would have worked (PS7).

Figure 5. Communities Addressing Gambling Harms.



A diagrammatical representation of CAGH

Figure 5 situates CAGH at the seam of the System and Lifeworld, as a collaboration between public health professionals, people with LE of gambling harms and VCFSE organisations. The white arrows represent how CAGH amplified the LE counterpublic described in Theme 1. CAGH facilitators provided funding, evidence and data to network actors while supporting deliberative fora to explore fundamental moral-practical questions regarding the nature and role of commercialised gambling in contemporary capitalism. Varied educational, outreach and social campaigning interventions were developed which, as we saw in Theme 2, raised awareness among the public by stimulating reflection on examples of Lifeworld disturbances linked to out-of-control commercial forces. Considerable barriers were encountered, however, linked to the structural power of the gambling industry and the pervasiveness of its products and advertisements. The System thus remains in a colonising state with this unlikely to change without policy and regulatory reform at national and perhaps global

levels: the local experience of ongoing friction between System and Lifeworld is represented by the oppositional red and blue arrows.

Discussion

This paper presents a Habermasian interpretation of the CAGH network, as an illustrative example of social movement-oriented public health. CAGH made progress shifting narratives from individual behaviours to harmful products while generating considerable learning at project level (see Table 1), the latter indicating how communities may be mobilised in a multi-levelled public health strategy for gambling harms. The analysis complements a recent paper on the CAGH CoP, which explored the collaborative development of VCFSE project ideas (Mills et al., 2024), with a focus on CAGH's public sphere orientation. In our view, Habermas' ideas enriched understanding of the LE counterpublic that underpinned CAGH, as well as the communicative logics of CAGH in facilitating public discussions about the commercial determinants of gambling harms. Important

implications for CDoH research and practice follow:

Habermas's ideas provide the conceptual tools to fully comprehend LE accounts of the harmful consequences of gambling industry narratives, products and advertisements, reported in many qualitative studies (Jenkins et al., 2024; Marko et al., 2023a; Miller et al., 2018; Miller and Thomas, 2018). Using Habermas' categories, we interpreted these as disturbances within and across the Lifeworld domains of personality, social relationships and culture, with this indicating that the System, as it pertains to gambling, is in a colonising state. Here, Habermas' System-Lifeworld schema is furnishing a social structural explanation which complements LE campaigners' shared understanding of the social and political status of gambling harms.

As well as enhancing analytical understanding, Habermas's ideas have implications for pressing strategic questions. Our diagnosis of pervasive System colonisation in the gambling space – and the limits we have identified to community-centred gambling harms reduction – aligns with CDoH scholars' calls for a fundamental policy shift to promote the health and wellbeing of individuals and communities over gambling industry interests (van Schalkwyk & Cassidy, 2024; Thomas et al., 2023). What Habermas contributes, to this ambitious policy agenda, is an appreciation of the importance of a democratic politics that builds alliances and enriches public deliberation on policy issues.

However, public engagement and education have remained somewhat peripheral to CDoH research and practice, perhaps due to justified concerns regarding the reductionism of many past health literacy campaigns (Sykes et al., 2024). Some CDoH practitioners have even argued for a professionally led, strategically discreet policy advocacy, favoured to avoid 'nanny state' accusations, legal challenges and counter-lobbying (Sykes et al., 2023).

Recent innovations, however, point to a more publicly oriented praxis. The concept of 'critical CDoH literacy' has emerged in recognition of the need for training and support for public health professionals to help them understand and act on CDoH (Brook et al., 2024); this could be broadened to support the public's involvement as citizens. In a recent and important project, Sheffield City Council is developing plans and policies to mitigate harms caused by harmful commodity industries. Residents are actively involved in deliberative fora with a view to forging a shared understanding of CDoH. Much like CAGH, this Lifeworld work of co-creating narratives is intended to underpin the Council's policy response to the influence of harmful commodity industries (Clarke et al., 2024).

Habermas provides a powerful theoretical justification for such an approach, for it may activate the communicative power that he sees as integral to progressive social change (Habermas, 1997) – a resource that is inaccessible to System actors. This was recognised in our findings as essential to 'win hearts and minds' (see Theme 1) and 'build a grass roots movement' (see Theme 2). In this sense, we interpret CAGH as exhibiting social movement-oriented public health. Habermasian theory and CAGH resonate with policy advocacy approaches that galvanise public support for policy change (Cullerton et al., 2018; David et al., 2019; Sykes et al., 2023) and recent calls for the mobilisation of civil society (Freudenberg, 2021; Hawkins and McCambridge, 2020; SNI, 2024).

Through CAGH, people of different walks of life learnt about harmful commercial products and practices. The "*Odds Are: They Win*" campaign was vital, as this ensured consistency of narrative across twelve diverse projects, focusing conversations on the commercial determinants of gambling harms. Our themes presented above, along with the CAGH CoP paper (Mills et al., 2024) and "*Odds Are: They Win*" short communication (Mills et al., 2023), thus complement literature on (re)framing in public health (Elwell-Sutton et al.,

2019; Fitzgerald et al, 2025), providing insight into the processes, relationships and interventions involved in displacing pro-industry narratives at the community level. Crucially, the public health professionals who facilitated CAGH developed trusting relationships with LE campaigners, who held positions on the LE Advisory Panel. A shared sense of the appropriate contents for *"Odds Are: They Win"* emerged overtime. This is significant as it suggests that LE-informed reframing initiatives do not capture and convey a generalised LE perspective, which would be challenging given the contrasting views within LE communities (see Theme 1); but rather, a more differentiated and emergent perspective underpinned by a broad commitment to a public health approach to gambling harms.

CAGH facilitators' provision of funding, secured via the Gambling Commission's regulatory settlement scheme, was critical to amplifying the perspectives of LE campaigners who reported challenges accessing sustainable, independent funding. Campaigners distinguished between forms of funding over which the gambling industry can exert influence and those that it cannot, such as regulatory settlement funding. Leading gambling harms researchers hold contrasting views on this contentious topic (Roberts et al., 2025; van Schalkwyk et al., 2023). Our findings are supportive of the idea that public health actors can achieve progress towards a public health approach to gambling harms using funding sources with indirect linkages to the gambling industry – provided these are administered by statutory bodies and afford operational independence. We see it as vitally important, as a statutory levy is introduced in the UK, for LE-led campaigning organisations to be involved in developing policy positions and governance standards on such complex, strategic questions. Partnership arrangements resembling CAGH could help facilitate this.

However, CAGH may have done more to empower people to engage politically, thus more strongly aligning with critical health literacy

(Sykes et al., 2024). Campaigners on the LE Advisory Panel were supported to speak at local government licensing meetings while VCFSE staff contributed to the city-region government's response to a national government gambling policy consultation. Yet recipients of CAGH interventions, including young people, diverse ethnic- and faith-based communities and the wider public, had a more passive role as they were not supported to act on their learning about commercially driven harm. Options may have included a public petition for concerned citizens to sign, public attendance at LE-led protests at professional sports clubs, or for *"Odds Are: They Win"* to emulate the *"Bite Back"* campaign, the latter empowering young activists to challenge corporate control of the food system (Hoenink et al., 2024). Such a campaign might centre on young people's rights for forms of leisure and culture that facilitate self-development and collective joy without risk of harm: the gamblification of football being the most obvious infringement here. These options would build further on the LE counterpublic that has thus far been pivotal to placing gambling harms on policy agendas.

Conclusion

We have argued that public engagement efforts that amplify the perspectives of LE campaigners have an important role to play in countering the narrative influence of harmful commodity industries. By theorising the CAGH network, we have illustrated ways in which public health professionals can amplify the reframing efforts of LE campaigners and facilitate public learning about harmful commodities and the industries which produce, sell and advertise them. Habermas' critical social theory enables us to appreciate the normative legitimacy that LE-led campaigns carry that is inaccessible to public health professionals. In a policy context in which evidence-based public health policy frequently goes unacted on due to the power and influence of harmful commodity industries, more research

is needed in counter-industry innovations for mobilising citizens.

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References

- Allen, A. (2016). *The End of Progress: Decolonizing the Normative Foundations of Critical Theory*. Columbia University Press. <https://cup.columbia.edu/book/the-end-of-progress/9780231173247/>
- Benford, R. D., & Snow, D. A. (2000). Framing Processes and Social Movements: An Overview and Assessment. *Annual Review of Sociology*, 26, 611–639. <https://doi.org/10.1146/annurev.soc.26.1.611>
- Blaug, R. (1997). Between Fear and Disappointment: Critical, Empirical and Political Uses of Habermas. *Political Studies*, 45(1), 100–117. <https://doi.org/10.1111/1467-9248.00074>
- Brook, A., Körner, K., van Schalkwyk, M. C. I., Barnes, A., & Petticrew, M. (2024). Overcoming doubt: Developing CDoH Essentials, a practical tool to introduce the commercial determinants of health. *Health Promotion International*, 39(6), daae166. <https://doi.org/10.1093/heapro/daae166>
- Carlisle, S. (2000). Health promotion, advocacy and health inequalities: A conceptual framework. *Health Promotion International*, 15(4), 369–376. <https://doi.org/10.1093/heapro/15.4.369>
- Clarke, Z., Stevely, A., McGill, E., Carters-White, L., Fryer, K., Beng, J., Hird, S., & Pickard, A. (2024). *Sharing understanding of commercial determinants of health in Sheffield*. NIHR: School for Public Health Research. <https://sphr.nihr.ac.uk/research/developing-a-shared-understanding-of-the-commercial-determinants-of-health-between-residents-of-sheffield-researchers-and-sheffield-city-council/>
- Cosgrave, J. (2022). Gambling Ain't What It Used To Be: The Instrumentalization of Gambling and Late Modern Culture. *Critical Gambling Studies*, 3(1), 12-23. <https://doi.org/10.29173/cgs81>
- Cullerton, K., Donnet, T., Lee, A., & Gallegos, D. (2018). Effective advocacy strategies for influencing government nutrition policy: A conceptual model. *International Journal of Behavioral Nutrition and Physical Activity*, 15, 83. <https://doi.org/10.1186/s12966-018-0716-y>
- David, J. L., Thomas, S. L., Randle, M., Daube, M., & Balandin, S. (2019). The role of public health advocacy in preventing and reducing gambling related harm: Challenges, facilitators, and opportunities for change. *Addiction Research & Theory*, 27(3), 210–219. <https://doi.org/10.1080/16066359.2018.1490410>
- Edwards, G. (2004). Habermas and Social Movements: What's 'New'? *The Sociological Review*, 52(Suppl. 1), 113-130. <https://doi.org/10.1111/j.1467-954X.2004.00476.x>
- Elwell-Sutton, T., Marshall, L., Bibby, J., & Volmert, A. (2019). *Reframing the conversation on the social determinants of health*. Health Foundation. <https://www.health.org.uk/publications/reports/reframing-the-conversation-on-the-social-determinants-of-health>
- Fraser, N. (1990). Rethinking the Public Sphere: A Contribution to the Critique of Actually Existing Democracy. *Social Text*, 25/26, 56–80. <https://doi.org/10.2307/466240>
- Freudenberg, N. (2021). *At What Cost: Modern Capitalism and the Future of Health* (1st ed.). Oxford University Press. <https://doi.org/10.1093/oso/9780190078621.001.0001>
- Fitzgerald, N., Angus, K., Howell, R., Labhart, H., Morris, J., Fenton, L., Woodrow, N., Castellina, M., Oldham, M., Garnett, C., Holmes, J., Brown, J., & O'Donnell, R. (2025). Changing public perceptions of alcohol, alcohol harms and alcohol policies: A multi-methods study to develop novel framing approaches. *Addiction*, 120(4), 655–668. <https://doi.org/10.1111/add.16743>
- Friel, S., Collin, J., Daube, M., Depoux, A., Freudenberg, N., Gilmore, A. B., Johns, P., Laar, A., Marten, R., McKee, M., & Mialon, M. (2023). Commercial determinants of health: future directions. *The Lancet*, 401(10383), 1229–1240. [https://doi.org/10.1016/S0140-6736\(23\)00011-9](https://doi.org/10.1016/S0140-6736(23)00011-9)
- Friel, S., Townsend, B., Fisher, M., Harris, P., Freeman, T., & Baum, F. (2021). Power and the people's health. *Social Science & Medicine*, 282, 114173. <https://doi.org/10.1016/j.socscimed.2021.114173>
- Habermas, J. (1971). *Toward a Rational Society: Student Protest, Science, and Politics* (J. Shapiro, Trans.). Beacon Press. (Original work published 1968).
- Habermas, J. (1984). *Theory of Communicative Action, Volume One: Reason and the rationalisation of society* (T. McCarthy, Trans.). Beacon Press. (Original work published 1981).
- Habermas, J. (1987). *Theory of Communicative Action, Volume Two: Lifeworld and system: A critique of functionalist reason* (T. McCarthy, Trans.). Beacon Press. (Original work published 1981).
- Habermas, J. (1997). *Between Facts and Norms: Contributions to a Discourse Theory of Law and Democracy* (W. Rehg, Trans.). MIT Press. (Original work published 1992).
- Hawkins, B., & McCambridge, J. (2020). Policy windows and multiple streams: An analysis of alcohol pricing policy in

- England. *Policy & Politics*, 48(2), 315–333.
<https://doi.org/10.1332/030557319X15724461566370>
- Hoening, J., Cerny, C., Mahoney, C., & Pajda, N. (2024). *Fuel us, don't fool us: Big Food & Our Communities: Where are food chains expanding? (Out-of-home #1)*. Bite Back.
<https://doi.org/10.17863/CAM.115571>
- Heaton, J. (2008). Secondary Analysis of Qualitative Data: An Overview. *Historical Social Research*, 33(3), 33–45.
<https://doi.org/10.12759/hsr.33.2008.3.33-45>
- Jay, M. (1996). *The Dialectical Imagination: A History of the Frankfurt School and the Institute of Social Research, 1923-1950*. University of California Press.
<http://www.jstor.org/stable/10.1525/j.ctt1pnwsg>
- Jenkins, C. L., Mills, T., Bland, C., Grimes, J., Reavey, P., Wills, J., & Sykes, S. (2024). Involving Lived Experience in regional efforts to address gambling-related harms going beyond 'window dressing' and 'tick box exercises'. *BMC Public Health*, 24(384). <https://doi.org/10.1186/s12889-024-17939-7>
- Jun, S., Park, H., Kim, U.-J., Choi, E. J., Lee, H. A., Park, B., Lee, S. Y., Jee, S. H., & Park, H. (2023). Cancer risk based on alcohol consumption levels: A comprehensive systematic review and meta-analysis. *Epidemiology and Health*, 45, e2023092. <https://doi.org/10.4178/epih.e2023092>
- Kapilashrami, A., Smith, K. E., Fustukian, S., Eltanani, M. K., Laughlin, S., Robertson, T., Muir, J., Gallova, E., & Scandrett, E. (2016). Social movements and public health advocacy in action: The UK people's health movement. *Journal of Public Health*, 38(3), 413–416.
<https://doi.org/10.1093/pubmed/fdv085>
- Kelleher, D. (2001). New social movements in the health domain. In Scambler, G. (Ed.). *Habermas, Critical Theory and Health*. Routledge.
<https://doi.org/10.4324/9781315008547>
- Kemmis, S. (2008). Critical theory and participatory action research. In Reason, P. & Bradbury, H. (Eds.). *The SAGE Handbook of Action Research*. SAGE Publications.
<https://doi.org/10.4135/9781848607934>
- Knai, C. & Sovana, N. (2023). A systems perspective on the pathways of influence of commercial determinants of health. In Maani, N., Petticrew, M., & Galea, S. (Eds.). *The Commercial Determinants of Health*. Oxford University Press.
<https://doi.org/10.1093/oso/9780197578742.001.0001>
- Laverack, G. (2013). *Health Activism: Foundations and Strategy*. (1st ed.). SAGE Publications.
<https://doi.org/10.4135/9781446270004>
- Maani, N., Petticrew, M., & Galea, S. (2023). *The Commercial Determinants of Health*. Oxford University Press.
<https://doi.org/10.1093/oso/9780197578742.001.0001>
- Marionneau, V., & Nikkinen, J. (2022). Gambling-related suicides and suicidality: A systematic review of qualitative evidence. *Frontiers in Psychiatry*, 13, 980303.
<https://doi.org/10.3389/fpsy.2022.980303>
- Marko, S., Thomas, S. L., Pitt, H., & Daube, M. (2023a). The impact of responsible gambling framing on people with lived experience of gambling harm. *Frontiers in Sociology*, 8, 1074773.
<https://www.frontiersin.org/articles/10.3389/fsoc.2023.1074773>
- Marko, S., Thomas, S. L., Pitt, H., & Daube, M. (2023b). The lived experience of financial harm from gambling in Australia. *Health Promotion International*, 38(3), daad062.
<https://doi.org/10.1093/heapro/daad062>
- Miller, H. E., & Thomas, S. L. (2018). The problem with 'responsible gambling': Impact of government and industry discourses on feelings of felt and enacted stigma in people who experience problems with gambling. *Addiction Research & Theory*, 26(2), 85–94.
<https://doi.org/10.1080/16066359.2017.1332182>
- Miller, H. E., Thomas, S. L., & Robinson, P. (2018). From problem people to addictive products: A qualitative study on rethinking gambling policy from the perspective of lived experience. *Harm Reduction Journal*, 15, 16.
<https://doi.org/10.1186/s12954-018-0220-3>
- Mills, T., Evans, J., Jenkins, C. L., Grimes, J., Reavey, P., Wills, J., & Sykes, S. (2024). Galvanising innovation in community-centred approaches for gambling-related harms: A process evaluation of multi-component Community of Practice. *Global Health Promotion*, 17579759241293453.
<https://doi.org/10.1177/17579759241293453>
- Mills, T., Grimes, J., Caddick, E., Jenkins, C. L., Evans, J., Moss, A., Wills, J., & Sykes, S. (2023). 'Odds Are: They Win': a disruptive messaging innovation for challenging harmful products and practices of the gambling industry. *Public Health*, 224, 41–44.
<https://doi.org/10.1016/j.puhe.2023.08.009>
- Popay, J., Whitehead, M., Ponsford, R., Egan, M., & Mead, R. (2021). Power, control, communities and health inequalities I: Theories, concepts and analytical frameworks. *Health Promotion International*, 36(5), 1253–1263. <https://doi.org/10.1093/heapro/daaa133>
- Power, M., Small, N., Doherty, B., & Pickett, K. E. (2020). The Incompatibility of System and Lifeworld Understandings of Food Insecurity and the Provision of Food Aid in an English City. *VOLUNTAS: International Journal of Voluntary and Nonprofit Organizations*, 31(5), 907–922.
<https://doi.org/10.1007/s11266-018-0018-7>
- Roberts, A., Rogers, J., Sharman, S., Stark, S., Dymond, S., Ludvig, E. A., Tunney, R. J., O'Reilly, M., & Young, M. M. (2025). Why it is important to conduct gambling research that is fair and free from conflicts of interest. *Addiction*, 120(4), 801–803. <https://doi.org/10.1111/add.16729>

- Scambler, G., & Goraya, A. (1994). Movements for change: the new public health agenda. *Critical Public Health*, 5(2), 4-10. <https://doi.org/10.1080/09581599408406280>
- Sim, F., Wright, J., & Ferguson, K. (2022). Creating a robust multidisciplinary public health workforce—almost there? *Journal of Public Health*, 44(Supp 1), i40–i48. <https://doi.org/10.1093/pubmed/fdac090>
- Skivington, K., Matthews, L., Simpson, S. A., Craig, P., Baird, J., Blazeby, J. M., Boyd, K. A., Craig, N., French, D. P., McIntosh, E., Petticrew, M., Rycroft-Malone, J., White, M., & Moore, L. (2021). Framework for the development and evaluation of complex interventions: Gap analysis, workshop and consultation-informed update. *Health Technology Assessment*, 25(57). <https://doi.org/10.3310/hta25570>
- Special Initiative on NCDs and Innovation. (2024). *Commercial Determinants of Noncommunicable Diseases in the WHO European Region*. World Health Organisation Regional Office for Europe. <https://www.who.int/europe/publications/i/item/9789289061162>
- Sykes, S., van den Broucke, S., & Abel, T. (2024). The dark side of the moon: can critical health literacy offer solutions to the fundamental problems of health literacy? *Global Health Promotion*, 17579759241298255. <https://doi.org/10.1177/17579759241298255>
- Sykes, S., Watkins, M., Bond, M., Jenkins, C., & Wills, J. (2023). What works in advocating for food advertising policy change across an english region – a realist evaluation. *BMC Public Health*, 23(1), 1896. <https://doi.org/10.1186/s12889-023-16829-8>
- Thomas, S., Crawford, G., Daube, M., Pitt, H., Hallett, J., McCarthy, S., Francis, L., & Edmunds, M. (2023). Time for policies on gambling to benefit health—not the gambling industry. *Health Promotion Journal of Australia*, 34(2), 267–271. <https://doi.org/10.1002/hpja.721>
- van Schalkwyk, M. C. I., Thomas, S., McKee, M., Fell, G., & Daube, M. (2023). Statutory levy on gambling may do more harm than good. *BMJ*, 381, e075035. <https://doi.org/10.1136/bmj-2023-075035>
- van Schalkwyk, M. & Cassidy, R. (2023). The Gambling Industry: Harmful Products, Predatory Practices, and the Politics of Knowledge. In Maani, N., Petticrew, M., & Galea, S. (Eds.). *The Commercial Determinants of Health*. Oxford University Press. <https://doi.org/10.1093/oso/9780197578742.001.0001>
- van Schalkwyk, M. C. I. & Cassidy, R. (2024). How we can solve the crisis in UK gambling policy. *BMJ*, 384, q16. <https://doi.org/10.1136/bmj.q16>
- Williams, G. & Popay, J. (2001). Lay health knowledge and the concept of the lifeworld. In Scambler, G. (Ed.). *Habermas, Critical Theory and Health*. Routledge. <https://doi.org/10.4324/9781315008547>

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Appendix 1. Lifeworld disturbances caused by commercialised gambling

Lifeworld disturbance domain	Illustrative summary
Socialisation – personality disturbances	Some people with LE talked about previously not being able to control urges to gamble while others talked about losing meaning and purpose, and of unfulfilled potential, implying autonomy gaps: ‘Gambling took over my twenties: I missed out on all life’s milestones’ (PLE7). These personality disturbances were frequently discussed alongside gambling products, marketing and commercial advertisements. One person with LE told a story about how they used their smart phone to gamble on Christmas Day while sat on the toilet to hide it from their family. Others described how challenging it is to pass numerous high-street betting shops on route to work, or to receive gambling marketing online offering ‘free bets’, despite blocks on computers and smart phones. Here, the gambling industry’s products and advertisements are disrupting the Lifeworld conditions necessary for autonomy and self-development: The industry manipulate and groom you. They do: they just completely strip you of everything that is, I can’t find the right word, is you, as a person (PLE5).
Social integration – social disturbances	For Habermas, System colonisation is indicated by institutionalised positions and social roles that operate without legitimacy or accountability. While this can include government actors, our LE participants mainly voiced concerns in relation to the gambling industry. The industry’s failure to enact a duty of care led people with LE to describe it as ‘toxic’ (SCA6) and a ‘predator’ (PLE6) while industry representatives were described as ‘shits’ (PLE2), ‘gangsters’ and ‘drug dealers’ (PLE4), reflecting strong perceptions of moral illegitimacy. The following quote alludes to operators’ strategic orientations, in which moral or social concerns are secondary to the profit motive: ‘[They] don’t want to change their business model because there is no incentive for them to do so’ (PLE2). Industry-funded health messaging campaigns, framed in terms of ‘individual responsibility’, were highlighted as consciously strategic, as through them the industry could evade responsibility, implying accountability gaps: They (gambling operators) have to take responsibility ... For example, the adverts ... that are constantly thrown at us and that little label that comes up: “When the fun stops, stop”. It’s a pathetic strapline because, as an addict, the fun will have stopped way back ... So, the industry has just got to be held accountable for the damage that they’re doing (PLE5).
Culture – cultural disturbances	People with LE in the sample painted a picture of a generalised lack of knowledge, coupled with an absence of appropriate narratives, for making sense of gambling harms. Industry communications was seen to generate stigma and hinder self-understanding among those affected: I notice Sky Bet have currently got an advert that says, “Five hundred and fifty thousand people know how to set their limit”, which suggests the thousands of others that don’t are irresponsible ... That’s where it’s dangerous: you feel like you’re the only gambling addict in the world. You feel like it’s you that’s got the problem (PLE2). This narrative vacuum coincides with technological innovation facilitating unprecedented access to gambling, extending it into previously gamble-free spheres of life: one new gambling app enables parents and children to bet on school sports games, considered ‘ethically grey to say the least’ (PS4). As well as campaigning for major policy changes based on human rights concerns, some LE campaigners were moved to defend cultural assets from such System colonisation. Most notable here was LE campaigns to end gambling sponsorship in football, enacted because of campaigners’ passion for the sport, despite it being central to their pathway to gambling addiction. The following quote is indicative of a cultural disturbance as commodification ‘spoils’ a cultural asset: I do that [campaign against gambling sponsorship] because I’ve fallen out of love with football now, the gambling advertising ... spoil[s] it for me (PLE4).

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SQUARING A CIRCLE? Sustainability Reports as a Legitimacy-Seeking Strategy in State Gambling Monopolies

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Abstract: State gambling organisations are monopolies, that increasingly proclaim a commitment to sustainability principles, however their profits come at a substantial social cost. Gambling raises an array of economic, social and ethical governance concerns. This study examines the evolution of sustainability, corporate social responsibility (CSR), environmental, social and governance (ESG) practices, and the growing trend of publishing annual sustainability reports. These aspects are considered within the literature on organisational legitimacy, and a framework of legitimacy-seeking strategies is identified. Qualitative research is utilised to analyse sustainability reports published during 2021-2022 by two state gambling monopolies: the British Columbia Lottery Corporation (BCLC) in Canada and Veikkaus in Finland. Using Leximancer software, content analysis identified key themes that can be linked to legitimacy strategies and gambling-related concerns. Findings suggest that while sustainability reports enhance organisational legitimacy, fundamental ethical and social challenges persist, requiring more deliberate managerial approaches.

Keywords: Sustainability reports, Legitimacy-seeking strategies, State gambling monopolies, Controversial industry, Content analysis, Leximancer

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Introduction

The global gambling industry consists of over 5000 casinos and online gambling businesses. In 2024, it was still suffering the effects of the COVID-19 pandemic but had an estimated revenue of \$305.8 billion USD (Le, 2024). The global lottery market is forecast to hit \$450.6 billion USD in 2027 (Business Research Insights, 2022). Lotteries, which are the most popular form of gambling in the world, may take several forms. In the United States, most states operate their own state-owned gambling monopolies, though a few states continue to resist betting operations within their borders. These gambling monopolies operate lotteries, casinos and other forms of gambling, including online products. The proliferation of state-owned gambling monopolies has resulted in a global gambling market that is characterised by fragmentation.

State gambling monopolies play an important role in economies as they generate lucrative funding for the state without the introduction of taxation (Blalock et al., 2007). Indeed, an investigation of state lotteries by the Howard Centre for Investigative Journalism at the University of Maryland reports that in 10 states in the USA, lotteries generate more revenue than corporate income taxes (Tame et al., 2022). Gambling, drinking, and smoking have been termed a trilogy of vice (Prentice & Cotte, 2015). Each industry they represent can be described as a “controversial” industry defined as “products, services or concepts that for reasons of delicacy, decency, morality, or even fear, elicit reactions of distaste, disgust, offence or outrage when mentioned or when openly presented” (Wilson & West, 1981, p. 92). Despite providing a significant amount of revenue to the state, the legitimacy of

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the operations of state gambling monopolies is often questioned. Even with the growth of sustainability reporting, little is known about its role in legitimacy-seeking strategies within controversial industries like gambling. This study addresses this gap by analysing sustainability reports to identify specific strategies and their alignment with organisational objectives. BCLC and Veikkaus were selected not only for their convenience as examples of state-owned organisations but also because of their distinct contexts—BCLC within a decentralised Canadian regulatory framework and Veikkaus operating under a state monopoly within the EU—offer a comparative lens for understanding how gambling regulation shapes legitimacy strategies.

The gambling literature identifies several concerns associated with gambling, spanning economic, social and ethical governance dimensions. Broadly, the economic concerns include:

(1) Regressive taxation. Government involvement in the gambling industry, particularly through lotteries, creates a system that inherently contributes to and aggravates existing structural inequalities among customers. The concept of 'regressive taxation' is central to understanding these inequalities. Lotteries and other forms of gambling disproportionately affect the poor and underprivileged (Roukka & Salonen, 2020). Unlike progressive taxes, where higher earners pay a larger percentage of their income, lotteries act as a voluntary but highly regressive levy, extracting a greater proportion of disposable income from those least able to afford it. Such activities often exploit economically disadvantaged populations (e.g., Gabrielyan & Just, 2020), redistributing income from the 'have-nots' to the 'haves' (Wisman, 2006; Wolff, 2011). This redistribution occurs because the funds

generated often flow into general state revenues or specific public programmes, from which wealthier segments of society also benefit, while the primary financial burden falls on lower-income individuals.

(2) Revenue justification. Despite its regressive nature, gambling is often defended as a mechanism for bolstering state revenue to support public services (Clotfelter & Cook, 1990). Unlike taxes on assets such as property, stocks, and bonds held by wealthier households, however, gambling revenue requires substantial state spending on employee salaries and advertising campaigns to encourage lower-income households to gamble more (Wolff, 2011).

(3) Inefficient revenue allocation. A significant portion of gambling revenue does not directly fund public services. For example, over half of lottery ticket sales are redistributed to a few individuals who become wealthy overnight, limiting their potential to stimulate broader economic activity. Consequently, only a small fraction of gambling proceeds ultimately benefit public coffers (Wolff, 2011).

(4) Reinforcing luck-based success. Gambling extracts significant amounts of money from large populations while enriching only a few. This dynamic perpetuates the notion that success is attainable through luck rather than effort, potentially undermining collective efforts to address systemic economic challenges (Wolff, 2011).

The social and ethical governance concerns include:

(1) Problem gambling and health concerns. The thrill and entertainment value of gambling can be compelling, but only for those who are not problem gamblers, gambling addicts, at-risk

individuals, or those prone to poor decision-making. Gambling is linked to a range of health and societal challenges, with problem gambling being a significant concern. The global prevalence of problem gambling is estimated to range between 0.12% and 5.8% (Calado & Griffiths, 2016). Academic research on gambling has primarily focused on problem gambling and its implications for public health and player addiction (e.g., Auer & Griffiths, 2013; Philander & Mackay, 2014; Rousseau & Ventur, 2002; Sutton & Griffiths, 2007; Wardle et al., 2011). This body of literature also highlights the critical need for regulatory measures aimed at curbing gambling opportunities and activities to mitigate this risk (e.g., Buil et al., 2015; Järvinen-Tassopoulos et al., 2021; Leneuf, 2011; McAllister, 2014; Orford, 2020; Rose & Owens, 2009; Srikanth & Mattamana, 2011).

(2) Money laundering. Although lotteries are considered less likely targets for money laundering activities, other gambling activities provided by state gambling monopolies do raise legitimate concerns about money laundering risks (Hugel & Kelley, 2002). Money laundering is defined as “falsely claiming a legitimate source for an illegally acquired advantage” (van Duyne, 2003, p. 69). Under US federal law, even the simple acceptance of funds suspected of being dirty constitutes money laundering (Kelly, 2014). Gambling presents significant vulnerabilities for money laundering, where illicit funds generated through corruption, organised crime, or terrorism are integrated into the legitimate financial system. These activities, including drug trafficking and embezzlement, pose risks to financial

integrity and public safety (Buchanan, 2018; Mills, 2000). Historically, gambling has been used to launder money made from drug trafficking and related criminal activity. However, after September 11, 2001, the focus of money laundering has shifted to risks related to financing terrorism and risk to national security (Boran, 2003; Chong & Lopez-De-Silanes, 2015).

(3) Public-Private Partnerships (PPP). Many governments have entered PPP to manage gambling activities, citing potential benefits such as resource efficiency and revenue growth. However, these partnerships can create conflicts of interest, limiting the willingness of public entities to regulate the industry effectively or prioritise public protection (Hancock et al., 2008).

While the focus of ESG is on economic, social and governance issues, sustainability adds an added focus on environmental and ecological responsibility (Brown et al., 1987; Jeurissen, 2000).

As operators in a controversial industry, state gambling monopolies necessarily maintain a delicate balancing act. In pursuit of legitimacy, gambling businesses often adopt legitimacy-seeking strategies to address key gambling concerns. To make this possible, these organisations increasingly engage in CSR, ESG practices and sustainability initiatives. They also publish annual sustainability reports to showcase their efforts in supporting several worthwhile causes (van der Maas et al., 2022). However, the relevance of annual sustainability reports provided by state gambling monopolies in the context of their controversial industry status has received scant attention, and it remains unclear what legitimacy strategies these support (Leung, 2019; Reast et al., 2013). Therefore, the main objective of this research is to identify the legitimacy-seeking strategies pursued by state gambling monopolies.

The paper commences by looking at the role of sustainability, the evolution of CSR, the development of ESG programmes, and the growing trend of publishing annual sustainability reports. This is followed by a review of the literature on organisational legitimacy and legitimacy-seeking strategies to identify different types of legitimacy-seeking strategies and present a framework for their classification (Reast, 2013; Suchman 1995). A qualitative research approach is adopted that uses a convenience sample consisting of the published sustainability reports spanning two years for two state gambling monopolies – the British Columbia Lottery Corporation (BCLC) in Canada and Veikkaus in Finland. These companies were selected for their distinct regulatory and cultural contexts, which offer valuable insights into broader issues in gambling regulation. BCLC operates within Canada's decentralised framework, reflecting provincial autonomy and the integration of state participation in public revenue generation. In contrast, Veikkaus exemplifies a centralised monopoly model under the Finnish Lotteries Act, reflecting the Nordic welfare approach to societal well-being. Veikkaus's ongoing transition to a licensing system highlights the evolving regulatory pressures faced by state gambling monopolies in the EU, providing a comparative perspective for understanding sustainability and legitimacy strategies. Content analysis of these sustainability reports using Leximancer software is used to identify key themes and concepts related to their sustainability practices. The framework by Reast et al. (2013) is subsequently applied to determine the legitimacy-seeking strategies these organisations use to address gambling-related concerns highlighted in the literature. The findings provide valuable insights into the legitimacy-seeking strategies of BCLC and Veikkaus, revealing the main themes and the specific gambling concerns they appear to address. The findings underline the importance of aligning legitimacy-seeking strategies with

specific gambling concerns and a more purposive managerial approach to developing these strategies. ESG and sustainability reporting represent valuable tools that state gambling monopolies and other entities can leverage to enhance their legitimacy. Although these sustainability reports allow gambling organisations to effectively communicate their legitimacy-seeking strategies, the fundamental concerns associated with gambling activities persist.

Sustainability

Sustainability is broadly defined as "development that meets the needs of the present without compromising the ability of future generations to meet their own needs" (United Nations, 1987). A particularly prevalent description of sustainability encompasses three interrelated elements consisting of economic viability, social equity, and environmental or ecological responsibility (Brown et al., 1987; Jeurissen, 2000). These elements aim to balance profit-making activities with the preservation of natural resources and the promotion of social welfare, ensuring long-term benefits for both businesses and society. In the context of the unique characteristics of the gambling industry, a difficult balancing act is required to achieve economic, social, and ecological sustainability (e.g., Adams, 2016). In economic terms, the generation of significant revenue for governments (and private partners where PPP exist) raises questions regarding the fairness and efficiency of this revenue generation. Sustainable gambling operations must balance profit motives with equitable economic contributions, minimising regressive impacts while fostering inclusive growth. In social terms, gambling raises major risks of problem gambling, addiction, and financial harm, particularly among vulnerable populations (e.g., Järvinen-Tassopoulos et al., 2021). Sustainability in this context necessitates responsible gambling practices, such as player protection mechanisms, support for addiction

treatment programmes, and public awareness campaigns. Sustainability in the gambling sector also involves social ethical governance and transparent operations. Effective regulation and oversight are critical to mitigating issues such as money laundering, corruption, and unfair practices. Although less prominent than economic, social and ethical governance concerns, the gambling industry also has environmental responsibilities, particularly for large-scale operations like casinos and resorts. Energy consumption, waste management, and the environmental impact of gambling-related infrastructure need to be addressed to align with broader sustainability goals. More recently, sustainability reporting, through frameworks like CSR and ESG programmes, provides a mechanism for gambling organisations to demonstrate accountability and commitment to sustainability.

CSR, ESG AND SUSTAINABILITY REPORTS

The Corporate Social Responsibility concept originated from the work of Howard Bowen (1953, p. 31) who asked: "What responsibilities to society may businessmen reasonably be expected to assume?" CSR has since evolved from an implicit to an assumed obligation with firms also starting to measure the outcomes of their actions. (Carroll et al., 2012; Frederick, 2006). Measures of sustainability are reflected in the Triple Bottom Line (TBL) measurement framework that considers the 3Ps of Planet, Profits, and People that some firms have adopted. However, this approach has been criticised as "an almost 'business-as-usual' approach of 'sustainable development' promoted by the international mainstream, ambiguous enough to allow for consensus building, but devoid of much substance" (Purvis et al., 2019, p. 685). CSR was conceived as a mechanism to instil accountability in companies, while ESG initiatives have aimed to enhance this by delineating pertinent sustainability metrics. Both are used by firms in legitimacy-seeking activities that underline claims of building a better world among their

stakeholders. ESG was initially driven by investment companies and prevalent among publicly traded firms (Zou et al., 2020). However, firms increasingly recognise that sustainability reports can support a legitimacy-seeking strategy that can be employed not only to influence investors as was originally the intention but also customers, employees, and other stakeholders (United Nations Global Compact, 2004; Leung, 2019; Sweeney & Coughlan, 2008). Furthermore, ESG reporting is progressively mandated by governments, as exemplified by the EU Corporate Sustainability Reporting Directive. This directive necessitates companies to incorporate annual sustainability reports in conjunction with their end-of-year financial filings.

The pursuit of CSR, sustainability and related sustainability reporting has become an increasingly important activity. Firms in controversial industries are more focused on developing CSR policies and transparency tools than mainstream industries as they expect these to be important to stakeholders (Conte et al., 2023).

CSR and ESG in Controversial Industries

Unlike in non-controversial industries, CSR and ESG initiatives in gambling often serve dual purposes: mitigating public disapproval and reinforcing societal trust. For example, BCLC and Veikkaus leverage these frameworks to emphasise their contributions to public welfare, despite any risks associated with gambling activities. CSR in gambling focuses on addressing negative societal impacts, such as addiction and financial problems, while ESG principles increasingly integrate sustainability and environmental considerations to align with broader societal expectations. This dual focus highlights the tension between profitability and ethical responsibility in controversial industries such as gambling.

Sustainability Reporting as a Legitimacy Tool

Sustainability reporting has become a critical tool for controversial industries to signal accountability and legitimacy. In the gambling industry, these reports often highlight measures to mitigate harm, promote responsible gambling, and allocate revenues to public welfare initiatives. For instance, BCLC's transition from CSR to ESG principles and Veikkaus's focus on harm prevention illustrate how sustainability reporting is employed not just as a transparency tool but as a strategic mechanism to align organisational practices with societal expectations. This approach enables gambling organisations to balance their controversial status with efforts to secure public trust and regulatory approval.

Research shows that the pursuit of CSR and sustainability tools by controversial industries do derive benefits. These tools provide value (Cai et al., 2012), a substantial risk-decreasing effect (Hoje & Na, 2012), and can potentially provide social legitimacy (Du & Vieira, 2012) and allow contribution to social good as firms in mainstream industries (Lindorff et al., 2012). The advantages obtained enable companies operating in contentious industries to enhance their organisational legitimacy, placing them in a stronger position to confront future challenges and thrive in an increasingly competitive and environmentally conscious market.

Organisational legitimacy and legitimacy-seeking strategies

Organisational legitimacy has been characterised as a process of "justification" (Maurer, 1971), "cultural conformity" (Dowling & Pfeffer, 1975) and "understandable" (Scott, 1991). Suchman (1995) provides a useful review and synthesis of the literature and identifies strategic and institutional as the two main contrasting approaches to managing organisational legitimacy. Those from a strategic tradition adopt a managerial perspective that views legitimacy as an operational resource that emphasises how

organisations "instrumentally manipulate and deploy evocative symbols in order to garner societal support" (p. 572). In this view legitimization "is purposive, calculated and frequently oppositional" (p. 576). In contrast, those from an institutional tradition emphasise how "sector-wide structuration dynamics generate cultural pressures that transcend any single organization's purposive control" (p. 572). In this tradition, rather than managers looking out, it is society looking in and "a manager's decisions are often constructed by the same belief systems that determine audience reactions" (p. 576). Suchman (1995) uses these two approaches to define organisational legitimacy as "a generalized perception or assumption that the actions of an entity are desirable, proper, or appropriate within some socially constructed system of norms, beliefs and definitions" (p. 574). In the definition, legitimacy is generalized in that it represents an umbrella evaluation that is resilient to particular events (p. 574); it is a perception or assumption that is possessed objectively, yet created subjectively; and it is socially constructed and reflects a congruence between the behaviours of the organisation and the shared beliefs of a social group.

In his review and synthesis, Suchman (1995) also identifies a trichotomy of legitimacy that relies on different behavioural dynamics.

- Pragmatic legitimacy is based on audience self-interest. Supporting stakeholders receive something of value for their support. Pragmatic legitimacy incorporates exchange legitimacy that considers a policy's expected value to the audience; influence legitimacy that audiences view as responsive to their larger interests and dispositional legitimacy where personified organisations are seen to "share our values" and have "our best interests at heart."

- Moral legitimacy is based on normative approval that is less based on self-interest and considers whether the organisation's acts enhance societal welfare. It considers whether the organisation's acts meet stakeholder value systems and are approved as "the right thing to do." It includes three main forms consisting of consequential (evaluation of outputs and consequences), procedural (evaluation of techniques and procedures), and structural (evaluations of categories) together with the less common form of personal (evaluation of leaders and representatives) legitimacy (p. 579).

- Cognitive legitimacy involves no evaluation and can be based on comprehensibility or taken-for-grantedness. Comprehensibility stems from models that furnish plausible explanations for the organisation and its endeavours (p. 582) while taken-for-granted legitimacy renders alternatives inconceivable, rendering challenges to the legitimated entity unthinkable (p. 583).

Reast et al. (2013) build on the work by Suchman (1995) to propose four legitimacy-seeking strategies in a 2 x 2 matrix. On the vertical axis, the objectives of legitimacy-seeking processes is considered with passive acquiescence or active support as alternatives,

while on the horizontal axis, the matrix considers the foundation of the strategic legitimacy process pursued by the organisation which can be either transactional or interactional. The matrix provides four types of legitimacy. First, construing legitimacy mostly addresses moral and to a certain extent cognitive legitimacy and occurs where strong opposition exists. It results when "the organisation endeavors to clarify and explain, through repeated dialogue, the meaning and appropriateness of its actions" (Reast et al., 2013, p. 144). Second, earning legitimacy mostly addresses moral legitimacy and the organisation's impact on vulnerable groups. It "relates to the development and use of initiatives that include any activities that reflect the social conscience of the organisation, such as CSR" (Reast et al., 2013, p. 146). Third, bargaining legitimacy is a pragmatic type of legitimacy that involves the organisation "bargaining with stakeholder groups using various tangible resources (material, employment, infrastructure, supply chain, financial, human, skills training to seek legitimacy (Reast et al., 2013, p. 147). Finally, capturing legitimacy mostly addresses moral and to a certain extent cognitive legitimacy. It results where the "organisation identifies key and significant stakeholders and seeks to develop, through interactions, closer and potential formal cooperation" (Reast et al., 2013, p. 148). These four legitimacy-seeking strategies are shown in Figure 1.

Figure 1. Legitimacy-seeking strategies framework (Reast et al., 2013)

Objectives of strategic legitimacy-seeking processes	Active support	Bargaining legitimacy	Capturing legitimacy
	Passive support	Earning legitimacy	Construing legitimacy
		Transactional approaches	Interactional approaches
Foundation of strategic legitimacy-seeking processes			

Research Focus

State gambling monopolies² are part of a controversial industry (Wilson & West, 1981) and the profits that these organisations make come at a significant economic and social cost, requiring a delicate balancing act. Controversial industries seek organisational legitimacy to gain access to resources and operate successfully in the market (Meyer & Scott, 1983; Suchman, 1995). They seek to evade and mitigate disapproval by signalling conformity to existing shared norms and values (Scott, 2008; Suchman, 1995). However, by their very nature, controversial industries face long-term challenges instead of one-off crises. In these circumstances, state gambling monopolies

increasingly use annual sustainability reports as CSR tools to pursue legitimacy-seeking strategies.

The study uses Leximancer software to perform content analysis on the published sustainability reports of these monopolies. This analysis identifies key themes and concepts reflected in the sustainability practices of these organisations. We then apply Reast et al. (2013) framework (Figure 1) to determine the legitimacy-seeking strategies these organisations use to address gambling concerns highlighted in the literature.

An organisation's operations are often shaped by the cultural attitudes and the legal and regulatory policies in its jurisdiction. Table 1 provides a comparative overview of gambling

Table 1. Comparative overview of gambling policies in Canada and Finland

	Canada	Finland
Regulatory Model	Decentralised: Regulation and licensing are regulated by 13 main gambling regulators corresponding to the country's 10 provinces and 3 territories	Centralised: The Finnish Gambling Act governs all gambling activities. Gambling is a state monopoly, controlled by Veikkaus, a government-owned company.
Types of gambling permitted	Lotteries, casinos, sports betting, horse racing, and charitable gaming. Online gambling is regulated in specific provinces, such as PlayNow.com in British Columbia.	Lotteries, slot machines, casino games, online gambling, and sports betting, all operated by Veikkaus, which provides both land-based and online services. Slot machines, once common in public spaces like supermarkets, are being reduced to address gambling harm.
Revenue use	Used to fund public services (health and education) and community (charitable causes, addiction support) programmes	Social causes and welfare programmes (Social welfare and health, culture and arts, sports, and animal welfare).
Harm prevention	Strong emphasis on responsible gambling and programmes to address gambling addiction. Provinces enforce geolocation restrictions to ensure players reside in their jurisdiction.	Strong focus on harm prevention involving mandatory identification for all gambling activities. Loss limits for online gambling to curb excessive spending and advertising restrictions to minimise the promotion of gambling.

² This research focuses on two state-owned gambling monopolies, the British Columbia Lottery Corporation (BCLC) in Canada and Veikkaus in Finland. These businesses were selected as representative examples of state-owned

organisations in two distinct jurisdictions in North America and the EU.

policies in Canada and Finland, highlighting key differences and similarities in their regulatory frameworks and gambling policies.

The research examines the two-year period during the COVID-19 pandemic, which had a significant impact on both jurisdictions. In Canada, prolonged casino closures caused substantial revenue losses and widespread job disruptions. The surge in online gambling during this period prompted provinces, including British Columbia, to expand their offerings and tighten regulations. Similarly, Finland experienced a notable revenue decline as Veikkaus closed casinos and reduced the availability of slot machines, focusing on harm prevention rather than revenue recovery. The growth of online gambling has strengthened national markets but also increased competition from offshore operators, exposing them to competition from international operators, whose profits bypass local taxation and benefit from reduced regulatory constraints (e.g., Järvinen-Tassopoulos, 2022).

Method

Sample and Data

To explore the outlined research questions, this study employs a qualitative analysis approach, utilising a convenience sample comprising the published annual sustainability reports of two state gambling monopolies: the British Columbia Lottery Corporation (BCLC) in Canada and Veikkaus in Finland.

BCLC is a social-purpose Crown corporation that commenced operations in 1985. Over the years, BCLC has expanded its portfolio beyond lotteries to include various other gambling activities, including sports betting, destination casinos, bingo and online gambling. BCLC employs around 1100 employees and operates via over 3,200 retailers generating Can\$1,636 bn in net income during the 2022/23 fiscal year (British Columbia Lottery Corporation, 2023). As a Crown corporation, the generated revenue is

passed on to the Province of British Columbia to support social undertakings in the state budget.

Veikkaus is a Finnish state-owned gambling company holding exclusive rights to gambling operations in mainland Finland. Veikkaus has a diverse gambling portfolio that includes weekly and daily drawn lottery games, lucky games, scratch cards, casinos and other betting products. It employs some 1,400 personnel stationed at 90 locations across Finland. In 2022, Veikkaus reported a total revenue of €1,071 million, with a balanced distribution between the retail network (€532 million) and the digital channel (€539 million). The generated revenue is passed on to support social expenditure in the state budget. Veikkaus and gambling in Finland are transitioning away from a monopoly structure and adopting a license model type of operation by the start of 2026 (Karpathakis, 2024).

BCLC and Veikkaus were chosen because both were state-owned gambling monopolies with broad gambling portfolios that include lotteries, casinos and various other betting products. They are both subject to a legal regulatory framework with BCLC operating under the provincial Company Act and Gaming Control Act (GCA) in Canada while Vakkaus operates under the Finnish Lotteries Act, with plans for a transition to a licensing system. BCLC and Veikkaus both pursue social responsibility and sustainability programmes and operate systems that guard against Anti-Money Laundering (AML) behaviour. Both operate in a single market within developed economies and regions, one in North America and the other in the EU making them both similar and diverse at the same time. Examining the state lottery reporting mechanisms in British Columbia, Canada and Finland reveals subtle, yet important differences influenced by their distinct cultural and national contexts. The regulatory frameworks for gambling in Canada and Finland exemplify how national cultural values and legal traditions shape state involvement. In Canada, the Gaming Control Act and the status of entities like the British Columbia Lottery Corporation (BCLC) as

Crown corporations reflect a deep-seated emphasis on provincial autonomy and a cultural acceptance of state participation in key sectors to ensure public benefit. Conversely, Finland's state-owned Veikkaus, governed by the Finnish Lotteries Act, aligns with its Nordic welfare model, where a strong cultural value of collective responsibility means that profits from gambling are channeled into comprehensive social services, underscoring the state's role in societal well-being and balancing revenue with public health. The cultural differences are further evident in the social responsibility initiatives, with BCLC focusing on individual well-being through the GameSense programme, while Veikkaus addresses societal concerns through the No Limit campaign, reflecting a cultural emphasis on collective responsibility.

Both state gambling monopolies provide detailed sustainability reports that can be downloaded from their respective websites. BCLC provides a Sustainability Report for the fiscal year 2021 (1 April 2020 to March 31, 2021) and an Environmental, Social, and Governance Report for the fiscal year 2022 (1 April 2021 to March 31, 2022). These consist of 24 and 37 pages respectively. The sustainability report for the fiscal year 2021 signalled a transition over two years to a new reporting framework reflecting a focus away from CSR to ESG principles. Veikkaus provides an Annual and Sustainability Report for each of their Fiscal years 2021 and 2022 which are calendar years. These consisted of 92 and 97 pages respectively. The reports for the two organisations do not cover the same two-year period because the financial year in Canada is April to March while in Europe it is a calendar year. The reports from both state gambling monopolies span the COVID-19 period in Canada from March 2020 to May 2022 and in Finland from March 2020 to July 2022.

Leximancer Analysis

Leximancer software was used to undertake content analysis of the two sets of sustainability

reports collected. Leximancer uses natural language processing (NLP) algorithms that allow the processing of large sets of unstructured text data to identify and extract concepts, themes, and relationships (Boyd & Schwartz, 2021). When qualitative researchers deal with small datasets involving a limited number of interviews, data analyses do not present insurmountable problems. However, manual approaches to text analyses are impractical with large datasets as is the case with the sustainability reports of Canadian and Finnish operations that ranged from 24 to 97 pages. In these circumstances, content analysis tools like Leximancer software can be used to analyse text format and capture the meaning of the content more fully, identifying opinions and market trends (Araújo et al., 2020).

Leximancer software is reliable as it eliminates human intervention, thereby removing human bias, researcher prejudice and coder subjectivity in word counting and other activities. Moreover, it can deliver objective data analysis that can improve the validity of the results (Arici et al., 2022; Arasli et al., 2021; Dambo et al., 2021). The Leximancer software has been utilised for text analyses in various contexts, including educational-based pathology case notes (Watson et al., 2005), political statements (McKenna & Waddell, 2007), travel blogs (Tseng et al., 2015), academic journal abstracts (Cretchley et al., 2010), online advertisements of luxury brands (Reyneke et al., 2011), online reactions and conversations about consumer-generated ad stories (Campbell et al., 2011) and online consumer reviews (Cassar et al., 2023; Robson et al., 2013).

The Leximancer software employs five types of analyses. First, it undertakes quantitative analyses to indicate the frequency and occurrence of concepts in the analysed text. Common words like "and," "the," and "of" are typically filtered out to focus on meaningful content. Words with close meanings like risk and risks, community and communities, COVID and pandemic were merged. Certain words like becoming, addressing, include and including were removed. This process helps

with prioritisation and focus on key themes (Tables 2 and 3). Second, semantic analyses are used to capture the semantic meaning of words and phrases, considering their context and relationships. This allows for a more nuanced understanding of the content. Third, linguistic analyses automatically extract concepts and themes from textual data. It uses concept seed words as the starting point for defining concepts, with more terms added to the definition of concepts from the text through learning (Leximancer Pty Ltd., 2021). This helps identify the key topics and ideas in text data. The resultant concepts can be words or definitions, such as groups of words that travel together throughout the text. During the analyses, Leximancer constructs a thesaurus list of closely related words associated with concepts using word frequency and concept counts (Cretchley et al., 2010). Fourth, relational analyses are used to capture how the identified concepts relate to each other within a document to form themes. Finally, the output results of the automatic analytical process allow Leximancer to provide visualisations in the form of concept maps that help explore and interpret the patterns and relationships identified in the text. Concepts that frequently travel together in the text appear as dots and clusters of concepts form themes that appear as circles (Martin & Rice, 2007). Themes represent the most dominant and influential factors expounded in the text analysed. They take their name from the most frequent and connected concept within the resultant circle. The concepts and themes identified appear in the form of a two-dimensional map which is known as a “concept map” or “theme network.” The concept map provides a bird’s eye view of the data showing the main concepts and how they interrelate and form themes. The importance of themes is determined by the number of concepts that form the theme rather than the size of the theme circle. Also, the importance of a theme is indicated by the circle colour with a gradation from hot (red, orange) being the most important to cold (green, blue)

being less important (Cretchley et al., 2010). Resultant models and visualisations were refined by adjusting the analysis parameters, such as the importance of specific terms or the inclusion/exclusion of certain words as described above. The final visualisations in Figures 2 and 3 can allow insights from the textual data analysed.

Limitations of the Leximancer Analysis

While Leximancer provides valuable tools for analysing large datasets, it is important to recognise its limitations, particularly in capturing changes over time and the challenges of applying quantitative methods to narrative data. Leximancer’s use of natural language processing (NLP) algorithms enables efficient handling of extensive textual data (Adadi, 2021). However, issues related to data quality – such as inconsistency, incompleteness, and bias – can be difficult to address and may limit the generalisability of findings across different fields (Xi et al., 2023).

Additionally, NLP methods, including those employed by Leximancer, face difficulties in fully capturing the subtleties and complexities of human language. The software may struggle with subtle expressions, colloquial phrases, sarcasm, or culturally specific meanings, potentially leading to interpretations that lack depth (Javaid et al., 2023). Although sustainability reports are typically clear and straightforward, there remains a risk of misinterpretation, particularly when clarifying ambiguous terms or uncovering implied meanings.

Another limitation stems from changes over time in the language or focus of sustainability reports. Leximancer provides snapshots of textual patterns but does not naturally account for how language, concepts, or themes evolve across reporting periods. This limitation may hide shifts in organisational strategies or trends over time, requiring careful human interpretation to draw meaningful conclusions.

Furthermore, while Leximancer reduces subjectivity by automating analyses, it transforms

data into visual representations and numerical outputs that may oversimplify complex narratives. This process risks losing the depth and context present in qualitative data, especially when examining intricate topics such as corporate sustainability or legitimacy strategies. Leximancer also analyses only textual data, excluding visual elements, which may restrict its applicability in certain contexts. As a result, researchers must interpret Leximancer outputs thoughtfully, supplementing findings with qualitative insights to preserve the richness of the narrative.

Finally, the reliability of Leximancer results depends heavily on data quality and preprocessing decisions. Choices such as removing specific terms, combining related words, or defining concepts involve subjective judgments that can influence outcomes. These limitations highlight the need to complement Leximancer analyses with manual checks and cross-verification to ensure robust and accurate interpretations.

Results

BCLC and Veikkaus serve as illustrative examples of state-owned gambling organisations operating in two distinct jurisdictions in North America and the EU, respectively. This study analyses the sustainability reports of these state monopolies using Leximancer to identify key themes and concepts related to their sustainability practices. Reast et al.'s (2013) framework is applied to examine the legitimacy-seeking strategies used to address concerns highlighted in the gambling literature.

The Leximancer analysis generates concept maps, highlighting the frequency and occurrence of key themes within reports. For BCLC, the concept maps and associated data are presented in Figure and Table 2, while those for Veikkaus appear in Figure and Table 3. These maps provide insights into dominant themes within the reports and reveal changes over two fiscal years for each organisation.

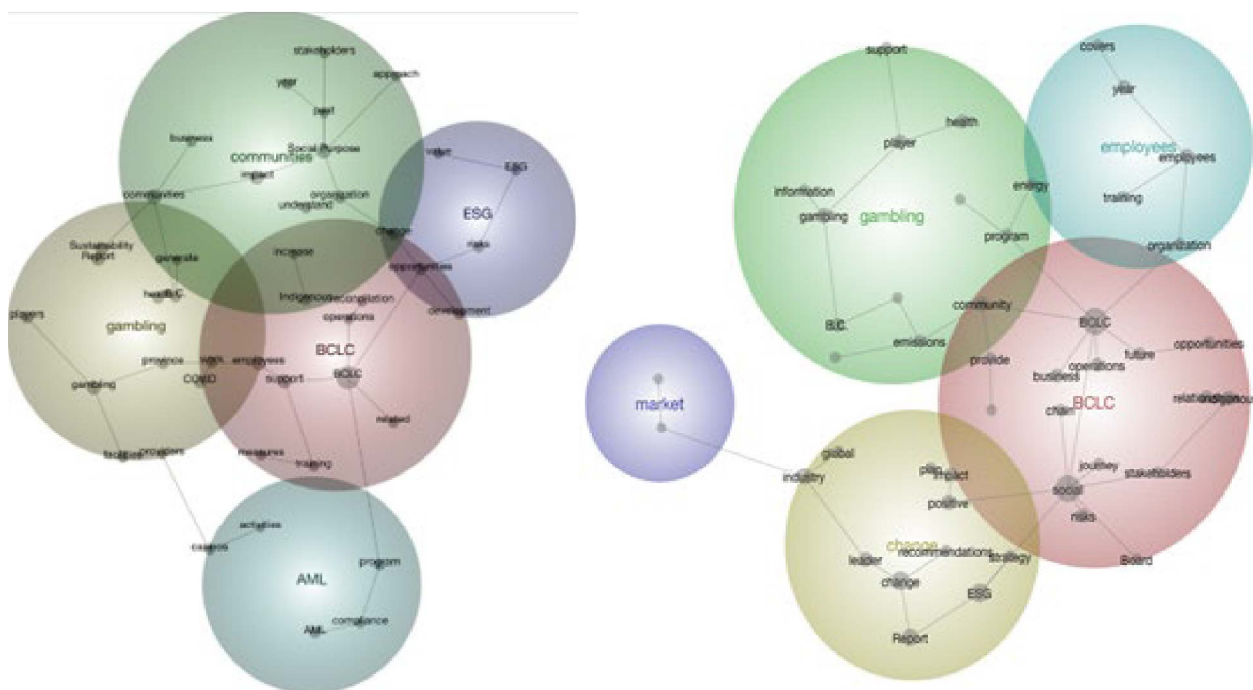
British Columbia Lottery Corporation (BCLC), Canada

The Leximancer conceptual maps highlight key thematic changes over the two years analysed. In fiscal year 2021, the dominant theme was 'BCLC,' followed by 'Communities.' However, the absence of 'Communities' in fiscal year 2022 indicates a shift in priorities. Unsurprisingly, 'Gambling' remained a prominent theme, reflecting the organisation's core business. Themes titled 'AML' and 'ESG' that appear in the fiscal year 2021 but not 2022 reflect a relative decline in these issues. A notable development in 2022 was the emergence of the theme "Change", reflecting the impact of the COVID-19 pandemic. This theme was accompanied by related themes titled 'Employees' and 'Market,' which highlight BCLC's adaptive response to the challenges brought about by the pandemic.

In both the fiscal years 2021 and 2022, a 'BCLC' theme remained prominent intersecting, with 'Communities'. This reflects BCLC's focus on Indigenous engagement, particularly following the launch of its Indigenous Reconciliation and Relations programme in 2021. The initiative aimed to strengthen relationships with Indigenous populations, recognising them as overlooked stakeholders.

The 2021 report notes that "BCLC is committing to supporting Indigenous People in all areas of its operations" (p. 9) in line with "The provincial government's unanimous passage of the Declaration of the Rights of Indigenous Peoples Act ..." where "... all Crown agencies, including BCLC, are expected to support" (p. 9). Support for Indigenous people continued in the fiscal year 2022, with BCLC stating that it intends to "build transformational relationships" (p. 31), instituting "an Indigenous and Stakeholder Engagement Framework" (p. 32) and "establishing a Senior Manager, Indigenous Relations and

Figure 2. Concept map for BCLC sustainability reports for fiscal year 2021 (left) and 2022 (right).



Reconciliation" (p. 28). BCLC claims to "have embarked on a journey to decolonize our operations while creating a better understanding of, and relationships with, Indigenous Peoples and communities" (p. 28).

In fiscal year 2021, 'Communities' emerged as the second most important theme closely linked to 'BCLC' theme. The report emphasises BCLC's commitment to embracing a social purpose, claiming that:

... we exist to generate win-wins for the greater good. We are excited by the opportunity to approach our business, our decisions and our interactions through a social purpose lens. (p. 1)

Moreover, BCLC's approach to stakeholder engagement is said to reflect its efforts to build relational trust and reinforce its legitimacy. The report for 2021 continues:

Our approach to engagement is guided by the following principles:

Significance: We deal with issues that are significant to our stakeholders and to us

Completeness: We understand the views, concerns, needs and expectations of our stakeholders

Responsiveness: We respond in a clear, timely and appropriate manner

Measurable: We track the quality, responsiveness and outcomes of our engagement (p. 21)

However, by fiscal year 2022, the focus had shifted from supporting diverse communities to a singular emphasis on the Indigenous community. The absence of a 'Communities' theme in 2022 reflects a narrowing of BCLC's commitment.

The initiatives aimed at building relationships with communities in the fiscal year 2021 and, more specifically, Indigenous people in the fiscal year 2022 underline a commitment to broader social issues that promote equitable engagement and address the risks of problem gambling and health concerns in vulnerable communities. These actions also indirectly support the justification of revenue allocation and regressive taxation concerns by showing how gambling revenues can

benefit and support disadvantaged populations. BCLC's focus on reconciliation with Indigenous people exemplifies Bargaining legitimacy rooted in active intervention and investment in tangible resources to build relationships and compensate an overlooked stakeholder.

In the 2021 report, the 'BCLC' theme also highlights measures taken to support employees during COVID-19 pandemic. Initiatives included "Flexible Work and Child Care Leave Program; Quarantine/Isolation pay; Vacation pay-outs; Vaccination time off and Remote work equipment support" (p. 20). In fiscal year 2022, a separate 'Employees' theme emerges (Figure 2), underscoring BCLC's continued focus on employee wellbeing. The report provides a table with data on "Employee wellbeing" and emphasises that "BCLC strongly encourages the development of our employees through development conversations and goals, a variety of training and development opportunities, and a preference toward internal candidates" (p. 36).

These efforts promoting employee wellbeing and ethical practices toward employees address social and ethical governance concerns. They also indirectly address one of the economic concerns of gambling dealing with inefficient revenue allocation by showing a willingness to invest gambling-generated funds to support employees. By prioritising employee wellbeing and training, BCLC adopts a Bargaining legitimacy-seeking strategy highlighting its active involvement with its workforce. This is reflected in its investment in pragmatic pandemic-related programmes such as flexible work arrangements, isolation pay, and remote work support.

The 'Gambling' theme representing BCLC's core business, features prominently in the concept maps for both fiscal years. In 2022, it ranks as the second most prominent theme, following the disappearance of 'Communities'. Its importance is reinforced in both reports, which emphasise that "Revenue generated by gambling helps fund important services across (the state) and the communities in our province benefit in

countless ways" (2021, p. 18; 2022, p. 25). Despite the challenges posed by the COVID-19 pandemic, BCLC underscores its continued contribution to the public purse. The 2021 report states that "the temporary closure of all gambling facilities managed by BCLC across B.C. to support public safety" (p. 3) meant that this "affected BCLC's ability to generate revenue" (p. 28). However, it also expresses pride by stating that "Despite these temporary closures and the ongoing challenges of the coronavirus pandemic, BCLC generated \$430 million in net income to the province" (p. 3). Similarly, the 2022 report includes a table titled "Community" (p. 37) detailing how revenue generated over the past two years was distributed to the government and the community.

These efforts to highlight the societal benefits of gambling revenues address two economic concerns that deal with gambling as a form of regressive taxation and the justification of revenue allocation.

By highlighting the positive impact of gambling revenues on communities and services, BCLC adopts an Earning legitimacy-seeking strategy that seeks passive acquiescence while aligning its operations with societal expectations, emphasising the broader value of its contribution to reassure stakeholders.

The emergence of a distinct 'ESG' theme in the Leximancer analysis of BCLC's 2021 sustainability report reflects a strategic shift in adopting an ESG perspective. The report states that "BCLC will conduct a TCFD (Task Force on Climate-related Financial Disclosures) guided climate change risk analysis concurrently with the development of the ESG strategy" (p. 8). This represents a transition from practices in previous years, as BCLC notes that "The ESG framework is replacing our past focus on Corporate Social Responsibility (CSR)" (p. 8). The report further outlines key themes and sub-themes within the ESG framework "addressing environmental, social and governance issues" (p. 6). BCLC also emphasises that it is "committed to establishing a higher

Table 2. Ranked concepts from BCLC sustainability reports

Fiscal Year 2021			Fiscal Year 2022		
Concept	Count	Relevance %	Concept	Count	Relevance %
BCLC	82	100	BCLC	123	100
Social Purpose	29	35	ESG	52	42
Report	23	28	Report	46	37
Sustainability	23	28	Indigenous	28	23
AML	21	26	State.	22	18
COVID	17	21	Board	13	11
ESG	16	20			
State	12	15			
Indigenous	9	11			
communities	35	43	social	105	85
gambling	29	35	change	60	49
employees	27	33	favourable	46	37
support	26	32	year	42	34
impact	21	26	employees	40	33
organization	20	24	industry	36	29
players	20	24	gambling	35	28
health	18	22	community	34	28
opportunities	17	21	player	30	24
work	17	21	impact	28	23
change	16	20	business	28	23
program	16	20	leader	25	20
business	13	16	positive	24	20
related	13	16	risks	24	20
province	12	15	health	23	19
risks	12	15	opportunities	22	18
training	11	13	future	21	17
facilities	11	13	support	21	17
year	11	13	operations	20	16
stakeholders	11	13	journey	18	15
casinos	11	13	emissions	18	15
development	10	12	program	18	15
value	10	12	organization	18	15
compliance	10	12	global	17	14
generate	9	11	relationships	17	14
approach	9	11	strategy	16	13
measures	8	10	stakeholders	15	12
providers	8	10	information	15	12
understand	7	9	covers	14	11
reconciliation	7	9	plan	13	11
operations	7	9	energy	13	11

Fiscal Year 2021			Fiscal Year 2021		
Concept	Count	Relevance %	Concept	Count	Relevance %
activities	7	9	practices	12	10
increase	6	7	chain	11	9
past	6	7	training	11	9
favourable	6	7	provide	10	8
unfavourable	5	6	services	10	8
			reduce	10	8
			recommendations	9	7
			develop	8	7
			market	6	5
			research	6	5
			unfavourable	6	5

Note: Items above the line refer to names while those below are words

standard to measure the impacts of our programs and initiatives" (p. 10), particularly concerning player health.

The Leximancer analysis of the sustainability report for 2022 confirms BCLC's shift to an ESG focus with the emergence of a 'Change' theme that includes ESG. The report subtitled "Becoming an Industry Leader in addressing climate change and furthering the Circular Economy" underscores this renewed focus. BCLC undertakes to "align with The Task Force on Climate-related Financial Disclosures (TCFD) recommendations" (p. 8) and provides climate change metrics in the Appendix (p. 34). Furthermore, the 2022 report details the enactment of the "Canadian Net-Zero Emissions Accountability Act", which mandates that firms "set a commitment to reduce CHG emissions" (p. 14). To support these efforts, BCLC reports recruiting a sustainability innovation manager, who "In this role, the manager is: Developing long-term strategies to reduce GHG" (p. 10).

Beyond tackling the economic and social governance concerns often discussed in gambling literature, 2022 saw BCLC focus on ESG with an emphasis on sustainability and ecological and environmental issues. Its efforts in this respect focus on climate-related risk analysis and emissions reduction. These initiatives reflect an

Earning legitimacy-seeking strategy that involves passive acquiescence with societal values and expectations around sustainability and environmental responsibility while reassuring a broad stakeholder base.

The 'AML' theme arises from the importance given to AML activities in the fiscal report for 2021 where an entire section (pp. 12-13) is devoted to it. As stated in the report, BCLC is subject to the Federal Financial Transactions and Reports Analysis Centre of Canada – FINTRAC which as "Canada's financial intelligence unit, [is] mandated to facilitate the detection, prevention and deterrence of money laundering and financing of terrorist activities" (p. 13). Therefore, "To meet the provisions of the Proceeds of Crime (Money Laundering) and Terrorist Financing Act (PCMLTFA), BCLC is responsible for executing a compliance program for all casinos in the province" (p. 12). To this effect, "A dedicated compliance officer [...] is responsible for the implementation of the compliance program and works to ensure that all B.C. casinos are in full compliance with the PCMLTFA and Regulations" (p. 12). In addition, "Regular internal reviews of our AML program are conducted by internal and external auditors and any gaps are immediately addressed" (p. 13). However, the Leximancer analyses show that the 'AML' theme no longer

emerges as a separate theme in fiscal 2022. AML had a count mention of 21 and a 26% relevance in the fiscal year 2021 but received a count of less than 6 in the sustainability report for the fiscal year 2022 (Table 3).

The AML activities undertaken are legally mandated actions that seek to counter an important gambling industry concern related to the possibilities of ML. BCLC adopts a Capturing legitimacy-seeking strategy to address these issues by exhibiting active involvement and strengthening formal relationships and cooperation with regulatory agencies to improve compliance programmes.

In the fiscal year 2022, the 'AML' and 'ESG' themes are replaced by 'Employee' and 'Market' themes. The 'Employee' theme focuses primarily on organisation and training. From an environmental perspective, the report highlights energy efficiency efforts: "In 2021, BCLC used seven per cent less energy compared to 2019 and 0.5 per cent less compared to 2020 - as many employees continued to adopt a hybrid working model over the course of the year" (p. 11). However, it is unclear whether these figures include the energy consumption of their home-based staff. The report also includes a table with "Data covering employee well-being for the fiscal year" (p. 36).

The activities capture efforts of meeting environmental sustainability together with social and ethical governance concerns by emphasising a reduction in organisational impacts and fostering a responsible, supportive work environment. This is a continuation of an Earning legitimacy-seeking strategy where BCLC seeks passive support for initiatives highlighting energy efficiency efforts and employee wellbeing to align with societal expectations regarding sustainability and workforce development.

The 'Market' theme in the fiscal year 2022 is primarily linked to market research and highlights the use of a "Problem Gambling Severity Index (PGSI)" which "is a self-reported, standardized measure of assessing at-risk gambling

behaviours" (p. 21). This index is monitored by a "continuous tracking survey conducted online by a third-party market research professional" (p. 21).

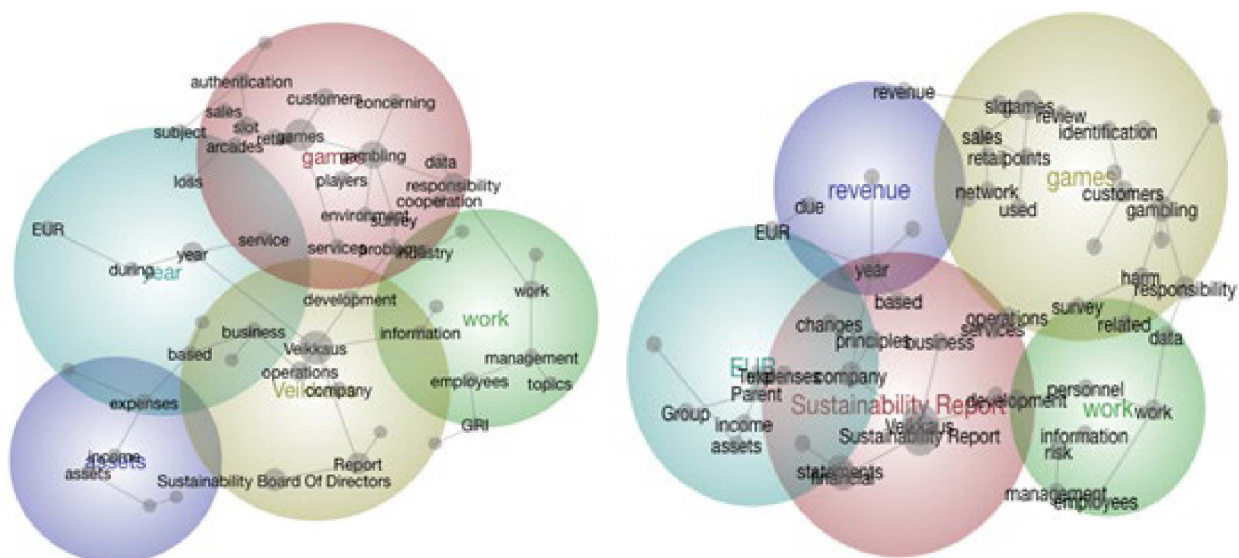
This activity addresses problem gambling and health concerns by emphasising the need for research and monitoring to mitigate the risk of problem gambling. BCLC adopts a construing legitimacy-seeking strategy that allows BCLC to garner passive support through problem understanding via research. However, since the study is commissioned by BCLC this may give rise to a conflict of interest and detract from its credibility. (e.g., Adams, 2016)

Veikkaus, Finland

The conceptual maps for Veikkaus highlight five key themes across the two years analysed. In 2021 the primary focus is on a 'Games' theme, followed by a 'Veikkaus' theme that captures its operations including sustainability activities. However, in 2022 the themes are reversed, with a main 'Sustainability Report' theme, followed by a 'Games' theme. During Fiscal year 2021, the next three themes are 'Work', 'Year', and 'Assets'. In contrast, in fiscal 2022, these themes shift to 'Work', 'Euro', and 'Revenue'.

Gambling games form the core business of Veikkaus, and the 'Games' theme in the 2021 and 2022 fiscal reports captures the organisation's activities in the sector. The reports state that at Veikkaus "we create joy through games" (2021, p. 12; 2022, p. 12) offering "joy and interesting games, but not at any cost" (2021, p. 4; 2022, p. 4) and acting "to make sure that the joy of gaming is preserved, and that gaming is kept as a form of entertainment in which people engage in moderation" (2021, p. 4; 2022, p. 4). These offerings align with legislation that seeks "the directing of the demand for games from offerings not part of the monopoly system" (2021, p. 8; 2022, p. 8). Additionally, the 2022 report highlights the concerns arising from "the war in Ukraine and the resulting general consumer uncertainty and lower purchasing power (that

Figure 3. Concept map for Veikkaus sustainability reports for fiscal year 2021 (left) and 2022 (right).



have also affected the demand for Veikkaus games” (p. 6).

The focus by Veikkaus on promoting joy, moderation and responsible gaming aligned with the legislation to ensure safe experiences suggests a focus on problem gambling and health concerns and a justification of revenue collection and allocation. Veikkaus adopts an Earning legitimacy-seeking strategy that seeks passive acquiescence while aligning its operations with societal expectations, emphasising the broader value of its contribution to reassure stakeholders. The ‘Games’ theme in the 2022 report is eclipsed by a dominant ‘Sustainability Reporting’ theme. It highlights the effects of sustainability measures, which “reduce Veikkaus’ (Gross Gaming Revenue) GGR significantly. Veikkaus has regularly informed the beneficiary ministries about the revenue prospects” (p. 33). Various activities related to sustainability are highlighted:

We work continuously to improve the energy efficiency of our premises, to increase the share of renewable energy and heat, and to optimise our own transportation. We are lessees in most of our offices and thus unable to directly

affect the energy solutions on the premises. (p. 41)

Moreover, “over 4,000 beneficiaries receive support from our gambling revenue every year” (p. 42) while “The beneficiary ministries will distribute the settled funds to the categories of beneficiaries defined by law” (p. 67).

The text addresses the economic viability of gambling revenues, indicating revenue impacts and the allocation of funds to beneficiaries in line with legal requirements underlining a revenue justification concern. It also highlights sustainability measures, suggesting an environmental sustainability focus. Veikkaus adopts a Construing legitimacy-seeking strategy that seeks passive acquiescence and to build relationships, dialogue and understanding.

The ‘Veikkaus’ theme is the second most important theme after the ‘Games’ theme in the 2021 report. The sustainability report states that “Veikkaus is a Finnish gambling company entirely owned by the Finnish State. We were founded in 2017,” from the merger of three former Finnish gambling operators (p. 4).

Table 3: Ranked concepts from Veikkaus sustainability reports

Fiscal Year 2021			Fiscal Year 2022		
Concept	Count	Relevance %	Concept	Count	Relevance %
Veikkaus Sustainability Report	360	100	Sustainability Report	449	100
EUR	346	96	Veikkaus EUR	445	99
GRI	77	21	EUR Group	85	19
Total	32	9	Total Parent	54	12
	30	8		43	10
games	278	77	games	36	8
gambling	212	59	financial statements	252	56
responsibility	166	46	gambling	220	49
year	140	39	company	191	43
operations	127	35	responsibility	154	34
work	114	32	year	148	33
slot	102	28	customers	141	31
customers	98	27	work	118	26
development	69	19	services	108	24
favourable	66	18	operations	87	19
authentication	65	18	employees	77	17
management	65	18	used	72	16
sales	62	17	sales	72	16
employees	61	17	data	70	16
business	60	17	slot	66	15
company	57	16	development	61	14
retail	54	15	information	60	14
expenses	54	15	principles	60	13
based	51	14	management	57	13
data	49	14	expenses	55	12
services	48	13	assets	53	12
survey	48	13	identification	50	11
cooperation	46	13	business	50	11
during	46	13	revenue	49	11
income	46	13	based	47	10
information	45	12	review	46	10
assets	45	12	harm	44	10
unfavourable	44	12	related	43	10
arcades	44	12	income	42	9
problems	43	12	personnel	41	9
players	43	12	favourable	41	9
industry	40	11	risk	41	9
environment	39	11	concerning	39	9

Fiscal Year 2021			Fiscal Year 2022		
Concept	Count	Relevance %	Concept	Count	Relevance %
service	37	10	recognised	39	9
concerning	37	10	changes	36	8
topics	37	10	value	36	8
subject	35	10	points	35	8
loss	34	9	due	34	8
personnel	34	9	period	34	8
value	34	9	environment	33	7
period	33	9	survey	31	7
sheet	28	8	cooperation	30	7
health	27	8	unfavourable	29	6
betting	27	8	retail	28	6
international	26	7	experience	27	6
emissions	26	7	digital	27	6
protection	25	7	lottery	25	6
economic	25	7	system	24	5
			arcades	23	5
			network	21	5
			emissions	21	5

Note: Items above the line refer to names while those below are words

According to the Lotteries Act, Veikkaus must provide games in a way which ensures the legal protection of those engaging in the games, working to prevent fraud and crime, and to prevent and mitigate the economic, social, and health-related harms induced by gambling. (p. 4)

The report further notes that Veikkaus employs some 1,440 employees, and its proceeds are used for the common good in its entirety. The allocation of the proceeds is decided by the government

The activities emphasise the mitigation of economic, social, and health-related harms induced by gambling addressing problem gambling and health concerns. Veikkaus adopts a Capturing legitimacy-seeking strategy that seeks active involvement with formal cooperation and interaction with key stakeholders.

The 'Work' theme is the third most prominent theme in both the 2021 and 2022 concept maps. The 2021 report highlights the "Lotteries Act reform" and consultation (p. 8); Veikkaus's objective of becoming the "best place to work" in the gaming sector (p. 9); fostering "Wellbeing at work" (p. 10); and the approval of "Veikkaus' sustainability programme" until 2025 (p. 14). The 2022 report revisits these elements. "The target culture that Veikkaus' renewal efforts and strategy enable was also reworded. Therefore, the culture is summarised in a three-word tagline: Courageously – Together - Caring" (p. 71). The 'Work' theme also captures wellbeing at work "measured by following the shares of sick leave of total working hours" (p. 44) and "assess human rights impacts, especially in relation to supply chains and children's rights" (p. 36).

The focus of Veikkaus is on its longer-term target culture that encompasses sustainability and wellbeing and provides justifications for the revenue generated through gambling activities.

Veikkaus employs an Earning legitimacy-seeking strategy involving passive acquiescence through reassuring stakeholders.

The fourth theme in the 2021 report is the 'Year' theme while in 2022 it is replaced by the 'EUR' theme. Being an annual report, the 'Year' theme is not surprising, capturing the key events of 2021 that include "the opening of Finland's second casino" (p. 7); approval of "regulatory reforms for carrying out sustainability measures" (p. 31); the "overhaul of the Veikkaus' app" (p. 66); a decrease in supervision costs and fees (p. 67); and the prepayment of the financial profit of EUR 658 million to Government (p. 67). The 'EUR' theme in the 2022 report similarly highlights key achievements, often expressed in monetary terms. These include "a gross gaming revenue of EUR 1,071.0 million, of which EUR 679.9 million were returned to the ministries" (p. 42); "building a carbon roadmap" (p. 18); and the fact that "games reach a majority of Finnish adult population" (p. 51).

The activities captured by both the 'Year' and 'EUR' themes underline the efficient allocation of revenue. Veikkaus employs an Earning legitimacy-seeking strategy that seeks passive support that attracts and reassures stakeholders by leveraging tangible achievements.

The fifth and final theme in 2021 is 'Assets' while in 2022 it shifts to 'Revenue', both of which are closely related. The 'Assets' theme includes financial tables detailing "Tangible assets and depreciation" (p. 81) and "Intangible assets and amortisation" (p. 82). The 'Revenue' theme for 2022 includes "Gross gaming revenue" (pp. 68; 69) and "Key indicators 2020-2022" (p. 81).

The activities captured by both the 'Assets' and 'Revenue' themes underline the professional management and performance of the organisation, justifying revenue allocation. This is achieved by employing an Earning legitimacy-seeking strategy that pursues passive support through reassuring stakeholders.

Findings

Tables 4a and 4b summarise the key findings for BCLC and Veikkaus, including ranking of the themes arising from the Leximancer analysis and their related activity. It also identifies the legitimacy-seeking strategy pursued and infers the gambling concern it seeks to address.

Implications for Theory and Management

The findings offer valuable insights for both theory and management. The legitimacy-seeking strategy matrix by Reast (2013), combined with Leximancer analyses, provides a practical framework for examining sustainability reports in the gambling industry and other controversial sectors.

From a management perspective, the findings suggest that content analysis using Leximancer software can serve as a diagnostic tool, grouping and ranking themes in sustainability reports to reveal organisational priorities. These reports are often outsourced to communication agencies, with varying levels of managerial input. For example, BCLC's legitimacy strategies reflect an organisational perspective, as seen in its government-mandated "Indigenous Reconciliation and Relations program." In contrast, Veikkaus appears to take a more managerial approach to sustainability reporting. This analysis helps assess whether communicated messages align with intended strategies.

Both managerial and organisational approaches to legitimacy strategies require clear objectives, even if these are not explicitly stated in reports. BCLC's reports suggest a Bargaining strategy, focusing on relationships with Indigenous communities and employees to address problem gambling, health concerns, and governance issues.

This reflects an adaptive response to societal and regulatory pressures. Veikkaus, on the other hand, emphasises Earning and Construing strategies, targeting problem gambling, health, and environmental concerns

Table 4a. Summary of findings from the analysis for BCLC

Leximancer theme	Activity	Gambling concern/s	Legitimacy-seeking strategy
BCLC/ Communities	Indigenous Reconciliation and Relations program	Problem gambling and health concerns; Justification of revenue allocation and regressive taxation	Bargaining
BCLC	Pandemic-related programmes	Social and ethical governance concerns; Justification of revenue allocation	Bargaining
Gambling	Societal benefits of gambling revenues	Regressive taxation; Justification of revenue allocation	Earning
ESG/ Change	ESG; ecological and environmental sustainability	Ecological and environmental sustainability	Earning
AML	Anti Money Laundering activities	Money Laundering (ML)	Capturing
Employee	Reduction in organisational impacts; fostering a supportive work environment	Environmental sustainability; Social and ethical governance	Earning
Market	Problem Gambling Severity Index (PGSI)	Problem gambling and health concerns	Construing

Table 4b. Summary of findings from the analysis for Veikkaus

Leximancer theme	Activity	Gambling concern/s	Legitimacy-seeking strategy
Games	Gaming (gambling) as a form of entertainment	Problem gambling and health concerns; Justification of revenue allocation	Earning
Sustainability Reporting	Revenue prospects and sustainability measures	Justification of revenue allocation; Ecological and environmental sustainability	Construing
Veikkaus	Mitigation of harm	Problem gambling and health concerns	Capturing
Work	Longer-term target culture	Justification of revenue allocation	Earning
Year/ EUR	Efficient allocation of revenue	Justification of revenue allocation	Earning
Assets/ Revenue	Professional management and performance	Justification of revenue allocation	Earning

ESG and Sustainability as Strategic Priorities

ESG and sustainability reporting provide significant opportunities for controversial industries like gambling. They offer a platform for legitimacy-seeking strategies while addressing economic, social, governance, and ecological concerns (Brown et al., 1987; Jeurissen, 2000; United Nations Global Compact, 2004; Leung, 2019; Sweeney & Coughlan, 2008). Key issues

include problem gambling, mental health issues, and money laundering risks.

State lottery organisations, such as BCLC and Veikkaus, highlight the economic benefits of gambling revenue, as it funds public services and social programs. However, this revenue often comes from lower-income individuals, raising ethical questions about the sustainability of this model. Transitioning from state monopolies to licensing systems could jeopardise the social dividends generated by gambling revenue, a challenge policymakers seem reluctant to address.

Ecological concerns, while less prominent in gambling, are addressed through initiatives like reducing emissions and improving energy efficiency. However, the industry's most pressing challenges lie in social and ethical governance, particularly problem gambling. Veikkaus's 2021 report acknowledges its legal duty to mitigate gambling-related harms, while BCLC's 2022 report adopts the Problem Gambling Severity Index (PGSI) to monitor at-risk behaviours. Problem gambling, though affecting a small percentage of the population, has significant social costs, comparable to disorders like anorexia nervosa (Mizerski, 2013, p. 1587).

State-owned gambling monopolies often follow government directives rather than proactively addressing gambling-related issues. For example, BCLC's focus on Indigenous communities stems from provincial mandates, not internal initiatives. Research in Canada shows higher rates of problem gambling among Indigenous populations (Williams et al., 2022).

Similarly, concerns about money laundering are addressed through anti-money laundering (AML) practices, with both BCLC and Veikkaus implementing protocols like Know Your Customer (KYC) requirements and compliance monitoring (Mills, 2000).

Limitations and Future Research

The qualitative research analyses reported are based on a convenience sample consisting of two state gambling monopolies in Canada and Finland. While insightful, the findings cannot be considered a comprehensive review, as they rely solely on the sustainability reports for fiscal years 2021 and 2022 published on the organisations' websites. Future research could expand this work by examining sustainability reports from state gambling monopolies across all Canadian provinces to identify commonalities potentially driven by federal regulations. Similarly, in Europe, a comparison of state gambling organisations across EU countries, possibly comparing operators in Nordic and Southern states, could identify interesting commonalities and differences. Moreover, the integration of the legitimacy-seeking framework with Leximancer's analytical tools offers an objective and scalable model for exploring legitimacy strategies employed by gambling organisations. This approach could be extended to investigate firms in other controversial industries. While Leximancer's software eliminates count and choice errors in content analysis, it still involves some degree of researcher interpretation, particularly in understanding conceptual maps and determining the number of themes. Future studies could compare results using alternative content analysis tools, such as IBM Watson or Diction to further validate and refine the methodology.

Conclusion

The negative consequences of gambling have long been recognised with traditional monotheistic religions condemning the practice

(Binde, 2007). From a Catholic social-teaching perspective, Iglesias-Rodriguez (2023) argues that contemporary commercial gambling violates core moral principles. Using the concept of "social usefulness," the author contends that any positive outcomes from gambling cannot justify its legitimacy, given the significant social costs it incurs.

However, shifting attitudes toward religion particularly in Western societies, have led to widespread acceptance of gambling. Players are now seen as "consumers" (Cosgrave & Klassen, 2001) free to spend their time and money as they choose. Gambling, whether land-based or increasingly online, is often perceived as just another form of entertainment. To bolster its legitimacy, the industry highlights its role in providing quality employment. For instance, the 2022 sustainability reports of both BCLC and Veikkaus emphasise their provision of stable jobs, employee training and welfare programmes for thousands of employees. Pro-gambling advocates argue that without legal gambling options, the industry would go underground (Ferentzy & Turner, 2009). While this argument has merit, there is a significant difference between offering controlled, limited gambling opportunities and actively promoting and expanding gambling networks to attract a broad audience.

Both BCLC and Veikkaus have adopted ESG and sustainability reporting as part of their legitimacy-seeking strategies. Despite their limitations, sustainability reports serve as effective tools for communicating with different stakeholders. However, balancing moral responsibility with economic, social, ethical, and ecological considerations often conflicts with profit-making goals. This tension creates contradictions that are difficult to resolve.

Gambling concerns, particularly the disproportionate impact on lower-income individuals and the prevalence of problem gambling, represent the "elephant in the room" for the industry. These issues challenge the

sustainability of state gambling monopolies, presenting politically uncomfortable dilemmas. Addressing them would require stricter regulations and a restriction on gambling opportunities – a circle that is impossible to square.

References

- Adadi, A. (2021). A survey on data-efficient algorithms in big data era. *Journal of Big Data*, 8(1), 24. <https://doi.org/10.1186/s40537-021-00419-9>
- Adams, P. J. (2016). *Moral Jeopardy: Risks of Accepting Money from the Alcohol, Tobacco and Gambling Industries*. Cambridge: Cambridge University Press. <https://doi.org/10.1017/CBO9781316118689>
- Arasli, H., Saydam, M. B., & Kilic, H. (2020). Cruise travellers' service perceptions: A critical content analysis, *Sustainability*, 12(17), 6702. <https://doi.org/10.3390/su12176702>
- Araújo, M., Pereira, A., & Benevenuto, F. (2020). A comparative study of machine translation for multilingual sentence-level sentiment analysis. *Information Sciences*, 512, 1078-1102. <https://doi.org/10.1016/j.ins.2019.10.031>
- Arici, H. E., Cakmakoglu Arici, N., & Altinay, L. (2022). The use of big data analytics to discover customers' perceptions of and satisfaction with green hotel service quality. *Current Issues in Tourism*, 26(2), 270-288. <https://doi.org/10.1080/13683500.2022.2029832>
- Auer, M., & Griffiths, M. D. (2014). An empirical investigation of theoretical loss and gambling intensity. *Journal of Gambling Studies*, 30, 879-887. <https://doi.org/10.1007/s10899-013-9376-7>
- Binde, P. (2007). Gambling and religion: Histories of concord and conflict. *Journal of Gambling Issues*, 20, 145-165. <https://doi.org/10.4309/jgi.2007.20.4>
- Blalock, G., Just, D. R., & Simon, D. H. (2007). Hitting the jackpot or hitting the skids: Entertainment, poverty, and the demand for state lotteries. *American Journal of Economics and Sociology*, 66(3), 545-570. <https://www.jstor.org/stable/27739651>
- Boran, C. (2003). Money laundering. *The American Criminal Law Review*, 40(2), 847-871. <https://heinonline.org/HOL/P?h=hein.journals/amcrimlr40&i=857>
- Bowen, H. R. (1953). *Social Responsibilities of the Businessman*. Harper.
- Boyd, R. L., & Schwartz, H. A. (2021). Natural language analysis and the psychology of verbal behavior: The past, present, and future states of the field. *Journal of Language and Social Psychology*, 40(1), 21-41. <https://doi.org/10.1177/0261927X20967028>

- British Columbia Lottery Corporation. (2021). *Sustainability Report 2020/21*. <https://corporate.bclc.com/content/dam/bclccorporate/reports/corporate-citizenship/2021/sustainability-report-2020-21.pdf>
- British Columbia Lottery Corporation. (2022). *BCLC Environmental, Social, and Governance Report 2022*. <https://corporate.bclc.com/content/dam/bclccorporate/reports/corporate-citizenship/2022/environmental-social-and-governance-report-2022.pdf>
- British Columbia Lottery Corporation. (2023). *2022/23 Annual Service Plan Report*. <https://corporate.bclc.com/content/dam/bclccorporate/reports/annual-reports/2023/Annual-Report-2022-23.pdf>
- Brown B. J., Hanson M. E., Liverman D. M., & Merideth R.W., Jr. (1987). Global sustainability: toward definition, *Environmental Management*, 11, 713–719. <https://doi.org/10.1007/BF01867238>
- Buchanan, J. (2018) Money laundering through gambling devices. *Society and Business Review*, 13(2), 217-237. <https://doi.org/10.1108/SBR-08-2017-0057>
- Buil, P., Moratilla, M. J. S., & Ruiz, P. G. (2015). Online gambling advertising regulations in Spain. A Study on the Protection of Minors. *Adicciones*, 27, 198–204.
- Business Research Insights (2025, April 21). *Lottery Market Size, Share, Growth, Trends, Global Industry Analysis, By Type (Draw-Based Games, Sport Games, and Instant Games), By Application (Online Lottery and Lottery Store), Regional Insights and Forecast From 2025 To 2033*. <https://www.businessresearchinsights.com/market-reports/lottery-market-100506>
- Cai, Y., Jo, H., & Pan C. (2012). Doing well while doing bad? CSR in controversial industry sectors. *Journal of Business Ethics*, 108(4), 467-480. <https://doi.org/10.1007/s10551-011-1103-7>
- Calado, F., & Griffiths, M. D. (2016). Problem gambling worldwide: An update and systematic review of empirical research (2000–2015). *Journal of Behavioral Addictions*, 5(4), 592–613. <https://doi.org/10.1556/2006.5.2016.073>
- Campbell, C., Pitt, L. F., Parent, M., & Berthon, P. R. (2011). Understanding consumer conversations around ads in a Web 2.0 world. *Journal of Advertising*, 40(1), 87-102. <https://doi.org/10.2753/JOA0091-3367400106>
- Carroll, A. B., Lipartito, K. J., Post, J. E., Werhane, P. H., & Goodpaster, K. E. (2012). *Corporate responsibility: The American experience*. Cambridge University Press. <https://doi.org/10.1017/CBO9781139108041>
- Cassar, M., Konietzny, J., & Caruana, A. (2023). Customer encounter satisfaction and narrative force: An investigation of user-generated content on TripAdvisor. *Scandinavian Journal of Hospitality and Tourism*, 23(1), 51-72. <https://doi.org/10.1080/15022250.2023.2194272>
- Chong, A. & Lopez-De-Silanes, F. (2015). Money laundering and its regulation. *Economics & Politics*, 27(1), 78-123. <https://doi.org/10.1111/ecpo.12051>
- Clotfelter, C. T. & Cook, P. J. (1990). On the economics of state lotteries. *Journal of Economic Perspectives*, 4(4), 105-119. <https://doi.org/10.1257/jep.4.4.105>
- Conte, F., Sardanelli, D., Vollero, A., & Siano, A. (2023). CSR signaling in controversial and noncontroversial industries: CSR policies, governance structures, and transparency tools. *European Management Journal*, 41(2), 274-281. <https://doi.org/10.1016/j.emj.2021.12.003>
- Cosgrave, J., & Klassen, T. R. (2001). Gambling against the State: The State and the Legitimation of Gambling. *Current Sociology*, 49(5), 1-15. <https://doi.org/10.1177/0011392101495002>
- Cretchley, J., Gallois, C., Chenery, H., & Smith, A. (2010). Conversations between carers and people with schizophrenia: A qualitative analysis using Leximancer. *Qualitative Health Research*, 20(12), 1611-1628. <https://doi.org/10.1177/1049732310378297>
- Dambo, T. H., Ersoy, M., Auwal, A. M., Olorunsola, V. O., & Saydam, M. B. (2021). Office of the citizen: A qualitative analysis of Twitter activity during the Lekki shooting in Nigeria's #EndSARS protests. *Information, Communication & Society*, 25(15), 2246-2263. <https://doi.org/10.1080/1369118X.2021.1934063>
- Dowling, J., & Pfeffer, J. (1975). Organizational legitimacy: Social values and organizational behavior. *Pacific Sociological Review*, 18, 122-136. <https://doi.org/10.2307/1388226>
- Du, S., & Vieira, E. T., Jr. (2012). Striving for legitimacy through corporate social responsibility: Insights from oil companies. *Journal of Business Ethics*, 110(4), 413-427. <https://doi.org/10.1007/s10551-012-1490-4>
- Ferentzy, P., and Turner, N. (2009). Gambling and Organised Crime - A review of the Literature. *Journal of Gambling Issues*, 23, 111-155. <https://doi.org/10.4309/jgi.2009.23.6>
- Frederick, W. C. (2006). *Corporation be good: The story of corporate social responsibility*. Dog Ear Publishing.
- Gabrielyan, G., & Just, D. R. (2020). Economic shocks and lottery sales: An examination of Maine State lottery sales, *Applied Economics*, 52(32), 3498-3511. <https://doi.org/10.1080/00036846.2020.1713294>
- Hancock, L., Schellinck, T., & Schrans, T. (2008). Gambling and corporate social responsibility (CSR): Re-defining industry and state roles on duty of care, host responsibility and risk management. *Policy and Society*, 27(1), 55–68. <https://doi.org/10.1016/j.polsoc.2008.07.005>
- Hoje, J., & Na, H. (2012). Does CSR reduce firm risk? Evidence from controversial industry sectors. *Journal of Business Ethics*, 110(4), 441-456. <https://doi.org/10.1007/s10551-012-1492-2>

- Hugel, P. & Kelly, J. (2002). Internet gambling, credit cards and money laundering. *Journal of Money Laundering Control*, 6(1), 57-65.
<https://doi.org/10.1108/13685200310809428>
- Iglesias-Rodríguez, P. (2023). The gambling business from the point of view of Catholic moral and social teachings. *Studies in Religion/Sciences Religieuses*, 52(4), 531-551.
<https://doi.org/10.1177/00084298221144384>
- Järvinen-Tassopoulos, J., Marionneau, V., & Nikkinen, J. (2021). Gambling harms caused by electronic gambling machines should be prevented with state control. *Nordic Studies on Alcohol and Drugs*, 38(6), 631-639.
<https://doi.org/10.1177/14550725211034030>
- Järvinen-Tassopoulos, J. (2022). State-Owned Gambling Operation in a Global Competitive Environment. In: Nikkinen, J., Marionneau, V., & Egerer, M. (Eds), *The Global Gambling Industry* (pp. 27-40). Springer Gabler.
https://doi.org/10.1007/978-3-658-35635-4_3
- Javaid, M., Haleem, A., & Singh, R. P. (2023). A study on ChatGPT for Industry 4.0: Background, potentials, challenges, and eventualities. *Journal of Economy and Technology*, 1, 127-143.
<https://doi.org/10.1016/j.ject.2023.08.001>
- Jeurissen, R. (2000). John Elkington, Cannibals With Forks: The Triple Bottom Line of 21st Century Business. *Journal of Business Ethics*, 23, 229-231.
<https://doi.org/10.1023/A:1006129603978>
- Karpathakis, M. (2024, February 5). *Nordic Gambling Update 2024: Finland*. MediaWrites.
<https://mediawrites.law/nordic-gambling-update-2024-finland/>
- Kelly, J. (2014). Money laundering and gambling. *Gaming Law Review and Economics*, 18(3), 297-304.
<https://doi.org/10.1089/glr.2014.1834>
- Le, T. (2024, April). *Global casinos & online gambling – market research report (2014-2029)*. IBISWorld.
<https://www.ibisworld.com/global/industry/global-casinos-online-gambling/2190/> (Accessed 2025).
- Leneuf, F. P. (2011). The new French legislation on online gambling in its European perspective. In Littler, A., Hoekx, N., Fijnaut, C. J. C. F., & Verbeke, A.-L. (Eds.), *In the Shadow of Luxembourg: EU and National Developments in the Regulation of Gambling* (pp. 219-236). Brill | Martinus Nijhoff Publishers.
https://doi.org/10.1163/9789004215825_012
- Leung, T. C. H. (2019). Legitimacy-seeking strategies in the gambling industry: The case of responsible gambling. *Sustainability Accounting, Management and Policy Journal*, 10(1), 97-125. <https://doi.org/10.1108/SAMPJ-04-2018-0121>
- Leximancer Pty Ltd. (2021). *Leximancer User Guide: Release 4.5*.
<https://doc.leximancer.com/doc/LeximancerManual.pdf>
- Lindorff, M., Prior Jonson, E., & McGuire, L. (2012). Strategic corporate social responsibility in controversial industry sectors: The social value of harm minimization, *Journal of Business Ethics*, 110, 457-467.
<https://doi.org/10.1007/s10551-012-1493-1>
- Martin, N. J., & Rice, J. L. (2007). Profiling enterprise risks in large computer companies using the Leximancer software tool. *Risk Management*, 9(3), 188-206.
<https://doi.org/10.1057/palgrave.rm.8250030>
- Maurer, J. G. (1971). *Readings in Organizational Theory: Open System Approaches*. Random House.
- McAllister, I. (2013). Public opinion towards gambling and gambling regulation in Australia. *International Gambling Studies*, 14(1), 146-160.
<https://doi.org/10.1080/14459795.2013.861001>
- McKenna, B., & Waddell, N. (2007). Media-led political oratory following terrorist events: International political responses to the 2005 London bombing. *Journal of Language and Politics*, 6(3), 377-399.
<https://doi.org/10.1075/jlp.6.3.06mck>
- Meyer, J. W., & Scott, W. R. (1983). *Organizational environments: Ritual and rationality*. Sage Publications.
- Mills, J. (2000). Internet casinos: a sure bet for money laundering. *Dickinson Journal of International Law*, 19(1), 77-116.
<https://heinonline.org/HOL/P?h=hein.journals/psilr19&i=85>
- Mizerski, D. (2013). New research on gambling theory research and practice. *Journal of Business Research*, 66(9), 1587-1590. <https://doi.org/10.1016/j.jbusres.2012.12.001>
- Orford, J. (2020). *The Gambling Establishment: Challenging the Power of the Modern Gambling Industry and its Allies*. Routledge. <https://doi.org/10.4324/9780367085711>
- Philander, K. S., & MacKay, T.-L. (2014). Online gambling participation and problem gambling severity: Is there a causal relationship? *International Gambling Studies*, 14(2), 214-227. <https://doi.org/10.1080/14459795.2014.893585>
- Prentice, C., & Cotte, J. (2015). Multiple Ps' effects on gambling, drinking and smoking: Advancing theory and evidence. *Journal of Business Research*, 68(10), 2045-2048.
<https://doi.org/10.1016/j.jbusres.2015.03.001>
- Purvis, B., Mao, Y. & Robinson, D. (2019). Three pillars of sustainability: In search of conceptual origins. *Sustainability Science*, 14, 681-695.
<https://doi.org/10.1007/s11625-018-0627-5>
- Reast, J., Maon, F., Lindgreen A., & Vanhamme, J. (2013). Legitimacy-seeking organizational strategies in controversial industries: A case study analysis and a bidimensional model, *Journal of Business Ethics*, 118(1), 139-153. <https://doi.org/10.1007/s10551-012-1571-4>
- Reyneke, M., Pitt, L., & Berthon, P. R. (2011). Luxury wine brand visibility in social media: an exploratory study.

- International Journal of Wine Business Research*, 23(1), 21-35. <https://doi.org/10.1108/17511061111121380>
- Robson, K., Farshid, M., Bredican, J., & Humphrey, S. (2013). Making sense of online consumer reviews: A methodology. *International Journal of Market Research*, 55(4), 521-537. <https://doi.org/10.2501/IJMR-2013-046>
- Rose, I. N., & Owens, M. D. (2009). Regulation of online gambling outside the United States. In I. N. Rose & M. D. Owens (Eds.), *Internet Gaming Law Second Edition* (pp. 157-197). Mary Ann Liebert, Inc. <https://doi.org/10.1089/9781934854006.157>
- Roukka, T. & Salonen, A. H. (2020). The winners and the losers: Tax incidence of gambling in Finland. *Journal of Gambling Studies*, 36(4), 1183-1204. <https://doi.org/10.1007/s10899-019-09899-0>
- Rousseau, G. G., & Venter, D. J. L. (2002). Measuring consumer attitudes towards gambling. *Journal of Industrial Psychology*, 28(2), 87-92. <https://doi.org/10.4102/sajip.v28i2.50>
- Scott, W. R. (1991). Unpacking institutional arguments. In W. W. Powell & P. J. DiMaggio (Eds.), *The new institutionalism in organizational analysis*, (pp. 164-182). University of Chicago Press.
- Scott, W. R. (2008). *Institutions and Organizations: Ideas and Interests*. Sage Publications.
- Shaik Vadla, M. K., Suresh, M. A., & Viswanathan, V. K. (2024). Enhancing Product Design through AI-Driven Sentiment Analysis of Amazon Reviews Using BERT. *Algorithms*, 17(2), 59. <https://doi.org/10.3390/a17020059>
- Srikanth, V., & Mattamana, A. B. (2011). Regulating online gambling: The Indian perspective. *Computer Law & Security Review*, 27(2), 180-188. <https://doi.org/10.1016/j.clsr.2011.01.002>
- Suchman, M. C. (1995). Managing Legitimacy: Strategic and institutional approaches. *Academy of Management Review*, 20(3), 571-610. <https://doi.org/10.2307/258788>
- Sutton, R., & Griffiths, M. D. (2008). The Casino Attitudes Scale: The development of a new brief psychometric instrument. *International Journal of Mental Health and Addiction*, 6(2), 244-248. <https://doi.org/10.1007/s11469-007-9127-z>
- Sweeney, L., & Coughlan, J. (2008). Do different industries report corporate social responsibility differently? An investigation through the lens of stakeholder theory. *Journal of Marketing Communications*, 14(2), 113-124. <https://doi.org/10.1080/13527260701856657>
- Tame, A., Neukam, S., Seltzer, K., Logan, R., Kuczynski, H., Gartner, E., Ahmed, T., Zimmardi, A., Purdie, M., Vuttaluru, S., & Pinzon, J. L. (2022, July 1). *State lotteries transfer wealth out of needy communities*. Howard Center for Investigative Journalism. <https://cnsmarland.org/2022/07/01/state-lotteries-transfer-wealth/>
- Tseng, C., Wu, B., Morrison, A. M., Zhang, J., & Chen, Y. C. (2015). Travel blogs on China as a destination image formation agent: A qualitative analysis using Leximancer. *Tourism Management*, 46, 347-358. <https://doi.org/10.1016/j.tourman.2014.07.012>
- United Nations. (1987). *Report of the World Commission on Environment and Development*. <https://digitallibrary.un.org/record/139811?v=pdf>
- United Nations Global Compact. (2004). *Who cares wins: Connecting financial markets to a changing world*. <https://documents1.worldbank.org/curated/en/280911488968799581/pdf/113237-WP-WhoCaresWins-2004.pdf>
- van der Maas, M., Cho, S. R., & Nower, L. (2022). Problem gambling message board activity and the legalization of sports betting in the US: A mixed methods approach. *Computers in Human Behavior*, 128, 107133. <https://doi.org/10.1016/j.chb.2021.107133>
- van Duyne, P.C. (2003). Money laundering policy: Fears and facts. In P.C. van Duyne, K. Von Lampe, & J. Newell (Eds.), *Criminal Finances and Organising Crime in Europe* (pp. 67-104). Wolf Legal Publishers.
- Veikkaus. (2021). *2021 Annual and Sustainability Report*. https://cms.veikkaus.fi/sites/default/files/content/assets/vuosikertomus/2021/annual-and-sustainability-report_2021.pdf
- Veikkaus. (2022). *2022 Annual and Sustainability Report*. https://cms.veikkaus.fi/sites/default/files/content/assets/vuosikertomus/2022/veikkaus_annual_and_sustainability_report_2022.pdf
- Wardle, H., Moody, A., Griffiths, M., Orford, J., & Volberg, R. (2011). Defining the online gambler and patterns of behaviour integration: evidence from the British Gambling Prevalence Survey 2010. *International Gambling Studies*, 11(3), 339-356. <https://doi.org/10.1080/14459795.2011.628684>
- Watson, M., Smith, A., & Watter, S. (2005). Leximancer concept mapping of patient case studies. In R. Khosla, R. J. Howlett, & L. C. Jain (Eds.), *Knowledge-Based Intelligent Information and Engineering Systems, part III* (pp. 1232-1238). Springer Berlin Heidelberg.
- Williams, R. J., Belanger, Y. D., Leonard, C. A., Stevens, R. M. G., Christensen, D. R., el-Guebaly, N., Hodgins, D. C. & McGrath, D. S. (2022). Indigenous gambling and problem gambling in Canada. *Journal of Gambling Studies*, 38(1), 67-85. <https://doi.org/10.1007/s10899-021-10022-5>
- Wilson, A. & West, C. (1981). The marketing of "unmentionables." *Harvard Business Review*, 59(1), 91-102.
- Wisman, J. D. (2006). State lotteries: Using state power to fleece the poor. *Journal of Economic Issues*, 40(4), 955-966. <https://doi.org/10.1080/00213624.2006.11506969>
- Wolff, R. (2011). Lotteries as disguised, regressive and counterproductive taxes. *International Journal of Mental*

Health and Addiction, 9(2), 136-139.

<https://doi.org/10.1007/s11469-010-9269-2>

Xi, Z., Chen, W., Guo, X., He, W., Ding, Y., Hong, B., Zhang, M., Wang, J., Jin, S., Zhou, E., Zheng, R., Fan, X., Wang, X., Xiong, L., Zhou, Y., Wang, W., Jiang, C., Zou, Y., Liu, X., Yin, Z., Dou, S., Weng, R., Cheng, W., Zhang, Q., Qin, W., Zheng, Y., Qiu, X., Huang, X., & Gui, T. (2023). The rise and potential of large language model based agents: A survey. arXiv preprint, arXiv:2309.07864v3.

<https://doi.org/10.48550/arXiv.2309.07864>

Zou, P., Wang, Q., Xie, J., & Zhou, C. (2020). Does doing good lead to doing better in emerging markets? Stock market responses to the SRI index announcements in Brazil, China, and South Africa. *Journal of the Academy of Marketing Science*, 48(5), 966–986.

<https://doi.org/10.1007/s11747-019-00651-z>

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Responsibilities for harm reduction and prevention in online gambling: Evidence from newly regulated license-based markets

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Abstract: Gambling harm prevention and reduction consists of a range of upstream and downstream solutions. Responsibilities for implementing and ensuring these tasks falls across a range of actors, including policymakers, regulators, health professionals and industry. Increased harms caused by online gambling necessitate new regulatory measures, and potentially new responsibilities for their implementation. The current study uses key informant interview data (N=10) conducted in four jurisdictions that have recently introduced a license-based online gambling market (Germany, the Netherlands, Sweden, Ontario). Our aim was to identify what kind of responsibilities for harm prevention and reduction emerge in competitive online markets, to whom responsibility for these tasks is assigned, and what kind of barriers to harm prevention exist across responsibilities. Our analysis shows that most universal responsibilities are assigned to policy makers and regulators. Selective measures aiming at those who gamble, are largely implemented in collaboration between regulators and industry. Indicated and treatment-focused measures are the shared responsibility of treatment professionals, regulators and industry. The main barriers to effective harm prevention related to conflicting interests, industry power, lacking harm prevention resources, lacking centralisation and offshore provision. We argue that improved harm prevention would require balancing existing asymmetries that relate to power, responsibilities and prioritisations.

Keywords: gambling, harm prevention, harm reduction, licensing, responsibilities

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Introduction

The prevention and reduction of gambling harm involves different stakeholders and actors. A mapping study on responsibilities in harm prevention (Akçayır et al. 2022) found six different groups that were perceived to have responsibilities in gambling harm prevention: consumers, gambling industry operators, policymakers, health services, families and educational institutions. Other stakeholders can also include researchers, lobbyists, digital platforms, payment services or even artificial intelligence solutions (Parker et al., 2024; Marionneau et al., 2023; Gray et al., 2021b). Assigned responsibilities can vary depending on

how gambling harm is defined. The so-called “responsible gambling” (RG) approach focuses on promoting the role of individual responsibility and industry-led solutions. In contrast, a public health approach to gambling harm acknowledges wider system-level responsibilities and upstream determinants of harm, targeting full populations (Wardle et al., 2024; Reynolds et al., 2020; Livingstone & Rintoul, 2020; Livingstone, 2023).

Responsibilities for preventing and reducing gambling harm can also differ between regulatory systems and types of gambling offers. The emergence of online gambling, in particular, has challenged existing regulatory practices and, potentially, responsibilities. In comparison to land-based gambling, online gambling

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environments are characterised by wider availability, data-driven marketing and complex ecosystems of provision (Marionneau et al., 2023). In recent years, countries across the world have regulated online gambling to reduce associated harms and raise revenue for governments (Ukhova et al., 2024). Competitive licensing systems, in which operators can apply for a license to provide online gambling in a regulated jurisdiction, have become a particularly common model for regulating online gambling globally (Goedecke et al., 2023). This article therefore focuses on responsibilities in preventing and reducing gambling harm in recently established license-based systems for online gambling.

Who Assigns Responsibility to Whom?

Most existing research into responsibilities for gambling harm prevention and reduction has focused on the perceptions of individuals who gamble. Overall, studies have shown that individuals engaging in gambling allocate the main responsibility to themselves. Two survey studies (Gray et al., 2021a; 2021b) conducted in the United States focused on perceptions of responsibility amongst individuals with a loyalty card to a local operator. These studies found that less than 10 percent of those surveyed considered any other stakeholder to be responsible, besides themselves. However, those who experienced problem gambling were more likely to attribute responsibility to other actors, such as industry employees, regulators, and public safety officials (Gray et al., 2021a; 2021b). Another study, conducted in Australia (Marko et al., 2022), similarly found that individuals assigned responsibility to themselves. Individual-level responsibilities included maintaining rational behaviour and seeking help when needed. Government responsibility, according to participants, was limited to public education that supports individuals in their self-control (Marko et al., 2022).

Less research has focused on the perceptions of responsibility amongst other stakeholders,

such as regulators, researchers, health professionals or industry. Some evidence suggests that industry, government and health care actors may also stress the role of individuals (Forsström & Cisneros Önrberg, 2019; Alexius, 2017; Miller et al., 2016). Governments may also rely on the gambling industry to self-regulate and provide solutions for harm prevention and reduction (Livingstone & Rintoul, 2020).

Responsibilities Across Different Harm Prevention and Reduction Measures

Views on responsibility vary across concrete harm prevention measures. The review study by Akçayır et al. (2022) compared stakeholder responsibilities for different harm prevention and reduction actions. Findings showed that most concrete measures were perceived as the responsibility of health professionals, but in collaboration with other stakeholder groups such as industry and policymakers (Akçayır et al. 2022).

Downstream harm prevention and reduction measures that align with RG discourses and individualistic framings of gambling harm (Livingstone, 2023) fall under the responsibility of industry or individuals. Measures focusing on industry responsibility include, for example, displaying signage to “gamble responsibly”, providing personalised feedback on patterns of consumption, providing voluntary limit-setting tools, implementing behavioural algorithms to identify those at risk of harm, and developing interventions with individuals who appear to be experiencing gambling problems (Akçayır et al. 2022; Livingstone & Rintoul, 2020; Ukhova et al., 2024). In many jurisdictions, industry actors draft voluntary codes of conduct that set out recommendations on RG measures (Casey, 2024).

Following the RG discourse, informed individuals who gamble are expected to assume responsibility for any harm (see Livingstone & Rintoul, 2020; Livingstone, 2023; Marko et al., 2022). Concrete harm reduction measures that focus on individual responsibility include, for example, adherence to voluntary limit-setting

policies or self-exclusions, maintaining consumption to set limits, seeking help, and employing strategies of self-help (Akçayır et al. 2022; Ukhova et al., 2024). These measures are in line with wider “consumer responsabilisation” techniques identified across different markets (Bankel & Sóler, 2025).

At a systemic level, policymakers, regulators and public service providers can be seen responsible for upstream harm prevention. Policymakers and regulators can mandate binding limit-setting policies, reduce gambling availability, limit the nature and extent of advertising, regulate product design, or use taxation to direct consumption (Ukhova et al., 2024; Akçayır et al. 2022). Policymakers are also responsible for adequate resourcing of health care and population-level harm prevention. If properly resourced and empowered, health professionals and other public service providers can assume responsibility for screening for comorbid gambling problems, providing access to and ensuring availability of treatment services, running public health interventions and educational efforts to minimise harm, and providing financial counselling (Akçayır et al. 2022; Ukhova et al., 2024).

The Current Study

This study focuses on responsibilities for gambling harm prevention and reduction in jurisdictions that have recently opened their online gambling markets to licensed operators (Germany, the Netherlands, Sweden and Ontario, Canada). The choice to focus on these jurisdictions is motivated by the prevalence of this regulatory model for online gambling. Furthermore, as these four jurisdictions have recently introduced a license-based model, their experiences are expected to shed light on current practices in harm prevention and reduction.

Using interview data collected amongst key informants (N=10), we ask what kind of responsibilities for harm prevention and reduction emerge in competitive online markets,

to whom responsibility for these tasks is assigned, and what kind of barriers to harm prevention exist across responsibilities. In line with a public health approach to gambling (Wardle et al., 2024), our aim is to understand how jurisdictions with licensed online gambling markets divide responsibilities for multi-level harm prevention and reduction measures. In addition, we investigate views on optimal harm prevention and factors that may be preventing effective interventions (also Livingstone, 2023).

Methods

Data Collection

We interviewed 10 key informants between December 2023 and January 2024 as part of a larger project aiming at gathering insight on experiences on licensing systems in online gambling. We focused our data collection on four jurisdictions that had regulated their online gambling markets with a licensing configuration after 2018 (Germany, the Netherlands, Sweden, Ontario). The jurisdictions were chosen based on a global gambling policy analysis conducted by Ukhova et al (2024) that mapped major legislative and regulatory changes globally between 2018-2022. The study identified Germany, the Netherlands, Sweden and Ontario as examples of jurisdictions that had recently introduced competitive licensed online markets. In Sweden and Ontario, licensed online markets were introduced to replace monopoly systems. In the Netherlands and Germany, licensed markets were created. In Germany, the Netherlands and Sweden, legislation on online gambling is national. In Ontario, legislation is state-specific.

Participants were recruited via existing contacts in each country, snowballing, and directly contacting relevant stakeholders. We included

academics with no stated industry connections², regulators, representatives of non-governmental organisations (NGOs) and representatives of industry who were knowledgeable about online gambling regulation and harm prevention. All participants were recruited due to their expertise in understanding harm prevention and reduction in the license-based system for gambling. The choice to recruit only academics without industry connections was motivated by our desire to have an impartial view. We included several interviewees from each country to have a broader picture and to cross-verify the veracity of statements. We were also able to include one representative of industry. As some of the participants wished to remain anonymous in this study, we anonymised all participants and refer to them using stakeholder type. A list of participants is presented in Table 1.

Interview Protocol

The interviews were conducted by a trained research assistant and a member of the author team (VM). The interview protocol was based on a thematic interview grid that included four distinct themes: (1) background on national gambling policy and the choice to implement a licensing system; (2) national gambling harm prevention strategy and practices; (3) changes in gambling harm prevention practices after the introduction of a licensing system; (4) views and expectations on the future of gambling harm prevention. As the interviews were semi-structured, we also elaborated on other themes that were brought up in the interviews.

Most interviews were conducted online, individually and in English. One interview was conducted with two participants at the same time (Ontario regulators). One interview was conducted via email in German following the request of the interviewee due to language

Table 1. List of participating key informants

Country	Stakeholder Type
Germany (GER)	Researcher Regulator
Netherlands (NL)	Researcher Regulator Industry responsibility representative
Ontario, Canada (ON)	Researcher Regulator 1 Regulator 2
Sweden (SE)	Researcher NGO representative

fluency (Germany regulator). Interviews lasted between 40 and 60 minutes. All interviews were transcribed verbatim. The interview conducted in German was translated into English using online translation software.

Analysis Methods

We analysed the interview data using an inductive content analytical approach (Kyngäs, 2019). The method consists of abstracting data to study a phenomenon conceptually or categorically. The choice to use an inductive rather than theory-driven approach was based on the overall paucity of existing literature on the topic and our desire to understand emerging patterns that may have become apparent under the new licensing system configurations.

All members of the research team first read through the material after which observations and potential codes were discussed in the research group. We then built a guideline for the analytical framework focusing on (1) responsibilities for harm prevention or reduction

² We included only academics who declared no conflicts of interest, including collaborations with the industry or funding from sources with industry connections.

(2) to whom these responsibilities were assigned and by whom, and (3) barriers for effective harm prevention. The coding framework was refined

during the final qualitative coding, with the inclusion of further sub-codes. Initial coding was performed by MK. VM and NK double-checked codes, and all disagreements were discussed and resolved in the full research group.

When the coding was finalised, we combined codes and sub-codes into conceptual categories (Kyngäs, 2019). Although our interviews initially focused on gambling harm prevention, many concrete responsibilities that were discussed in interviews were more in line with harm reduction approaches. Therefore, we combined these perspectives in our reporting. We also cross-verified results within national contexts across respondents and found that responses were consistent. Interviewees from the same context listed similar harm prevention and reduction measures, although perceived responsibilities for these varied depending on the position of the interviewee.

Research Ethics

Following the guidelines of the Finnish National Board on Research Integrity, no ethics permission was required for this study. All participants were provided information about the aims of the study during recruitment and during the interview. All participants gave informed consent to participate. All participants were also informed that they could withdraw from the study at any time and that they could choose not to answer any questions during the interview. We gave participants the possibility to appear anonymously in the study and following the request of some participants, results are reported anonymously. We also provided participants with the possibility to verify any direct quotes we use from their interviews.

Results

Table 2 presents an overview of different measures and responsibilities for gambling harm prevention and reduction in competitive online license-based systems. The table lists all measures and responsibilities that were mentioned in our dataset, irrespective of jurisdiction, to provide a

Table 2. Allocation of responsibilities for gambling harm prevention and reduction measures

Measure	Primary Responsibility
Public information, awareness campaigns, research and education	Polymakers, health professionals, researchers, industry, NGOs
Restricting advertising	Polymakers, regulators, industry, NGOs
Restricting availability and product design	Polymakers
Pre-commitment strategies and self-exclusions	Polymakers, regulators, industry, individuals
Duty of care policies	Polymakers, regulators, industry
Informing about risk and signposting to support	Industry
Provision of and access to support and treatment	Polymakers, individuals, health professionals, NGOs
Proactive interventions	Industry, regulators

summary of the scope of discussion. The qualitative detail and most important themes are discussed below. Primary responsibilities listed in Table 1 reflect how interviewees perceive the current division of responsibilities in harm prevention and reduction. Many respondents also shared views on how responsibilities should ideally be divided. These critiques are further discussed in the section regarding barriers to responsibility.

Overall, we found that policymakers, regulators and industry were seen to carry the primary burden of responsibility for most harm prevention and reduction measures. We have separated policymakers and regulators due to their different overall role: policymakers refer to legislators who set frameworks for gambling policy; regulators refer to agencies in charge of overseeing the implementation of these policies. Some responsibilities were also allocated to other actors, such as health services (including health and social care workers and public health agencies), NGOs, researchers, or individuals who gamble.

We also found some mentions of other potential stakeholders that could be held responsible for gambling harm prevention or reduction. Banks and internet service providers were seen as potential future partners in preventing offshore gambling. In addition, media companies were identified as potentially responsible for raising awareness of gambling harms and reporting on harmful company practices. However, these actors did not have specific current responsibilities.

We found some divergence amongst our interviewees in terms of who was considered to hold primary responsibility for specific measures. The interviewee representing industry highlighted the role of industry across various measures, including universal measures such as public information and restricting advertising. Regulators highlighted the responsibility of policymakers and regulators across domains. Regulators also highlighted the importance of

collaborative action between regulators and industry. Measures such as duty of care and pre-commitment were considered best implemented if industry and regulators work together.

In the following, we review the identified harm prevention or reduction measures in terms of who is seen to have primary responsibility. The results are presented depending on the level of gambling harm prevention or reduction measures (universal, selective, targeted), as summarised in Wardle et al. (2024) and Marionneau et al. (2023).

Universal Harm Prevention Measures

Public Information, Awareness, Research and Education

Most interviewees perceived public information, awareness, research and education to be the responsibility of policymakers and state officials. Across the four jurisdictions, our interviewees identified different local and national agencies and other state actors that should carry part of the responsibility. These included gambling regulators, public health institutes (Sweden, the Netherlands), state-level consulting centres (Landesfachstelle, Germany), and a research funding agency (the Netherlands). As described by one interviewee, “everyone has to do something” (NL regulator). These actors were expected to produce information sheets, educational materials, and to fund independent research into gambling:

We have a—governmental institute that funds research at universities and academic institutes, and they have set up a program on gambling research. [...] The idea here is that you want the polluter to pay. [...] So it's a way of having them pay for it, but it's not that they can influence how it's being spent. (NL regulator)

Some assigned part of the responsibility to NGOs, usually in collaboration with state agencies. NGOs consisting of individuals with

lived experience of gambling harm were considered highly impactful within the field.

The industry representative also highlighted the role of industry. According to this interviewee, public campaigns on the risks of gambling have been few and far between. This has left space for the industry to develop its own initiatives to raise awareness:

There haven't been any governmental campaigns about educating people about the risks of gambling. [...] It's now all just done by operators. So, it's like some campaigns, some quotes like: "Be aware you don't spend too much. (NL industry).

Restricting Advertising

Policymakers and regulators were assigned primary responsibility for regulating and restricting gambling advertising. Regulators and policymakers had the responsibility to set legal frameworks that govern advertising and for enforcing these rules. The responsibility of operators was limited to following regulations. For example, in the case of Ontario, "if you or if I had chosen to self-exclude from i-gaming, an operator has responsibility, for example, to make sure that they're not constantly bombarding me with offers." (ON regulator 1)

Several interviewees discussed cases where newly licensed companies had not followed advertising regulations and limitations, such as not targeting young people or those who have self-excluded. Whilst the gambling industry was described to have a responsibility to follow rules, misconduct had been encountered across jurisdictions. Identifying and fining companies for breaches was primarily the responsibility of regulators.

In the first year, there were several cases of companies actually targeting younger people and also, they had products that included players that were under the age of 18. But they got fined for it and you know they got a warning that "you will

lose your license if you continue to do this. And you have to change this immediately." (SE NGO)

The role of NGOs or researchers was to nudge policymakers and regulators to take a stricter approach to gambling advertising. These groups did not have a responsibility with regard to advertising regulation, per se, but they did have a responsibility to raise public and political awareness about the harms caused by gambling advertising. This type of approach was particularly exemplified in Germany where one interviewee described how "we have that alliance against sports betting advertisement, not sports betting in general. [...] You have a very similar approach in England, with the coalition against gambling ads." (GER researcher)

Product Design and Availability

Responsibilities to reduce harm by intervening in product design and availability were discussed in a few interviews only. Online gambling is always available and restricting availability is therefore not a key policy lever, unlike for land-based gambling. Discussions on limiting availability focused on restricting access to the unlicensed offshore market or restricting access to the most harmful forms of gambling. Some also discussed limiting harmful product characteristics. Product and availability measures were conceptualised as the responsibility of policymakers and regulatory frameworks:

Also, for example, autoplay options are not allowed in the Netherlands. So autoplay, so when you gamble well, usually you push a button to gamble. But when you say you can do it automatically, that's not allowed. (NL regulator)

Selective Measures

Precommitment Strategies and Self-Exclusions

Each included jurisdiction had implemented limit-setting policies in the licensing system. Self-exclusion registers were established in all jurisdictions except Ontario. Policymakers were

seen as responsible for drafting legislative frameworks and their concrete parameters, whilst operators had the responsibility for implementing them. Particularly in Ontario, the regulator had the responsibility for setting a framework of outcomes that operators need to attain, but the industry had significant responsibility in designing how these outcomes can be best achieved:

There's no... again, prescriptive rules. They're more outcomes based. We say that, yes, you're required to have time based and financial limits. And the onus again is on the operator to meet that whatever way they see best (ON regulator 1)

Regulators had the primary responsibility for maintaining self-exclusion systems. Self-exclusion registers were highlighted by many as a unique advantage of the licensing system and as a successful policy. The role of operators in self-exclusion policies was to abide by rules related to self-exclusions, under the supervisory responsibility of regulators.

[All companies] have to follow these regulations on self-exclusion. It is a fact that you cannot give out any kind of player bonuses, cashbacks, etc. [...] You have to have a self-exclusion [register]. And that's, of course, something that has helped the players. (SE NGO)

Discourses on individual responsibility differed across contexts. In Ontario, where no mandatory limit-setting system was implemented, the interviewed regulators considered individuals to be largely responsible for setting limits that were appropriate to them and their own financial situation. The role of the industry was to provide these tools, but it was the responsibility of the individual to use them:

We do prescribe the framework for the limit setting. We just don't say it's this limit or it's this loss. Like that's really up

to the player to know their own financial situation. (ON regulator 2)

In the European context where limit-setting is mandatory, many respondents were critical of RG discourses that highlight individual responsibility in limit setting. Placing responsibility on the individual was considered a poor policy choice, particularly when online gambling products are designed in a way that encourages loss of control:

When it comes to responsible gaming or gambling, they place the responsibility back with you. And a key example here would be that you need to set your own limits. But first of all, you're nudged in the direction of bad limits with dark patterns. And secondly, how would people even make such a decision, right? They're rushing through a procedure to get their bonus. (NL researcher)

Duty of Care Policies

Duty of care policies refer to a legal mandate on gambling operators to track customer behaviours and to intervene when they detect potential problems (Hancock et al., 2008). In our dataset, these types of policies were discussed in each jurisdiction (Germany, the Netherlands, Sweden, Ontario). Overall responsibility for duty of care policies was split between policymakers, regulators and operators. Policymakers and regulators were expected to define and set concrete rules and instructions on how duty of care policies should be implemented. Operators had responsibility to follow these instructions by tracking gambling behaviours and by initiating interventions with individuals who had been flagged.

Operators also have to have in place in their system the ability to identify, detect and address situations where players are experiencing harm and intervene. (ON regulator 2)

When we look at someone who gambles, of course they gamble at the operator. So, the operator has a primary responsibility [...] to protect and to intervene to make sure when someone shows problematic patterns of gambling, that they maybe contact the player. And of course... the regulators, the legislators... We are also trying to sharpen the rules on this. [...] There's quite a lot of freedom for companies at this moment to fill in how they make the policy on preventing addictions. (NL regulator)

The split responsibilities had led to some misunderstandings or differing interpretations of what is expected of whom. The industry representative highlighted that industry actors would prefer more prescriptive rules on how to implement their duty of care. Without clear guidance, "all operators can interpret this duty of care in their own way" (NL industry). Similarly, in Germany, "every online gambling provider is responsible for its platform and can implement its own early warning system" (GER researcher).

The lack of guidance places further responsibilities on regulators to control operator actions from company data, issue fines in cases of breaches, and to regularly update and specify instructions:

"Of course, we have had to make some stricter rules on this that they really have to do [...] 24/7 monitoring and also the interventions. (NL regulator)

The [operators] get guidance and everything, they get these decisions very clearly, what we expect, and then they still say "we don't know, we don't understand." I think that is kind of a mantra from the industry to do as little as possible. It's pretty clear what we expect from them. (SE researcher)

Informing About Risks and Signposting to Support

Operators had the main responsibility for informing their customers about risks and signposting to support or treatment. The role of regulators was to mandate these practices and to ensure that all licensed operators provide informational resources such as information on helplines and self-exclusion registers or personalised feedback on consumption patterns:

The online venues have information on the sites, it's again regulated by the Ontario government so that the providers of Internet gambling have to have minimum requirements for information on their sites. (ON researcher)

Some interviewees also described encountering misconduct in terms of operator responsibility. If the regulations and rules are not prescriptive and clear, operators can misinterpret them in a way that is advantageous to them:

And then another blatant example is that people need to be warned about, you know, the risks of gambling [...]. The way they present [it] right now is 12 pages down in small nonvisible grey letter typed at the bottom of the sites. (NL researcher)

Targeted Measures

Proactive Interventions

Duty of care policies should lead to proactive interventions. Interviewees from each context described these interventions as mainly industry led. In Sweden, gambling companies are expected to "have the software that detects problematic gambling and then it's up to them to actually approach" (SE NGO). In the Netherlands, the industry representative described having "seven people in my organisation that have been trained to do these phone calls" (NL industry).

The Dutch gambling industry had clear guidelines from the regulator on how to implement proactive interventions in a stepwise manner, starting with a phone call, but allowing further action such as the operator setting additional limits or even requesting an exclusion to the customer. In other countries, interventions were not as defined:

The gambling state treaty does not define what to do when the flag is red or [...] what it is about in terms of intervention. A telephone call? Just a note: 'Well, look at your gambling behaviour'? And so that means that it is more or less... It lies in the hands of the gambling providers. What to implement and what to do. (GER researcher)

The role of the individual under these configurations is to decide whether to be receptive to the intervention or not. Most interviewees believed that the interventions had little overall effect. Operators were unlikely to intervene in other cases than those that were the most obvious. In addition, even during an intervention, a customer was unlikely to respond in a positive way or change their behaviour:

If I'm addicted and I bet away all my money and I am taking huge loans, and my family and my life is crashing. It doesn't help me really if somebody's calling and say, hey, do you have a problem? The first reaction from any player is to lock themselves into their bubble and you know... it's this thing about approaching players. It might work. One out of 100, but the other 99 they don't want to hear it because they're not ready, they don't know how to get out of this bubble. (SE NGO)

Provision of and Access to Support and Treatment

Health professionals and NGOs share responsibility for the provision of support and treatment services. As treatment services are primarily funded by government or the gambling industry via a levy, policy makers and operators are also indirectly involved in service provision:

[Operators] have to pay a levy to the authorities. So, we as the authorities are being financed and there is a special levy for an addiction prevention fund, which we use, for example to fund 24/7 helpline, anonymous treatment of gambling addictions and research as well, and some awareness campaigning. (NL regulator)

In many cases, the state outsourced part of this research work to independent associations or NGOs. For example, in Ontario, an organisation called the Responsible Gambling Council of Ontario was funded by government to run gambling help centres at land-based casinos. These help centres refer people towards services. Other organisations such as Gamblers Anonymous and nonprofit service providers complemented state-sponsored services and also helped advise state services:

And then you have NGOs like ourselves, there are three different organisations in Sweden that actually work like a nonprofit organisation to organise help, you know, self-help meetings. (SE NGO)

We have an organisation from former addicts who.... It's comparable with Anonymous Alcoholics who have their well, their groups want to speak about addiction and help people to ... they do their activities as well. They advise the government as well, of course, and us as well. (NL regulator)

Individuals were seen as responsible for seeking help. Whilst governments and NGOs provided the services, the individual was still expected to seek these services and keep attending sessions:

The only way to get out of an addiction is to, you know, talk about it. Go to self-help meetings. Go to talk to psychiatrists. Find out who you are. If you, you know, if you don't find out who you are, you'll never be able to handle your addiction right. (SE NGO)

Barriers to Harm Prevention Responsibilities

We looked at potential or existing barriers to assigned responsibilities in harm prevention. We identified five main barriers: competing interests, industry power, lack of funding and resources, lack of centralisation and cooperation, and offshore operations. In the following sections, we review these barriers in detail.

Competing Interests

Several interviewees discussed the inherent conflict of interest that industry actors have between their harm prevention or reduction duties and profit-oriented goals. Participants noted that any effective harm prevention measure will inevitably affect company profits:

That's the fundamental flaw with gambling as a [...] revenue generating stream, the best customers are the ones who lose control and gamble away their life savings. Not the people who go in once a week and bet \$20, they're not going to make money out of those people. So, there's such a conflict of interest between the profit motive and the responsible gambling motive. And that's difficult to resolve. (ON researcher)

According to some, competing interest can be even stronger for smaller companies. Large international companies may be able to afford some harm prevention measures and may even

benefit from complying with all regulatory requirements in terms of a favourable reputation. However, smaller companies exist in a much more competitive environment.

Competitive environments, according to one participant, encourage "rivalry [which] is not ideal for preventive activities." (GER researcher). The rivalry was described as particularly strong during the early years of a new licensing system:

The majority of the companies that have a license in Sweden, they don't have the manpower, and they don't have the real will. They're trying to survive in a very competitive market where there's another 80 online casinos available. If they start limiting their MVPs [most valuable players], they're out of business. That's that simple. (SE NGO)

Industry Power

While industry had wide-ranging responsibilities in harm prevention and reduction, several of our respondents noted that the industry was falling short of expectations. The gambling industry was described as having the power to shift societal debate and downplay its own responsibilities. Industry power was connected to a wider hegemony of the RG discourse and individualistic framings of gambling problems that promote ineffective regulation:

Well, I mean, the challenges are that we end up or retain a landscape where people are guided by industry discourse and lobbying... to remain in a situation where ineffective measures are promoted and where you have the famous story about the emperor with the new clothes, and everybody's afraid to say that he's actually naked. To a large degree, that's what's happening in the Netherlands. (NL researcher)

Industry actors engaged in widespread lobbying for regulations that were beneficial to them. Even when regulations are put in place to limit industry actions, companies were described as either uncaring or not caring enough to understand. In many cases, policymakers were described as complicit in promoting industry interests. Industry actors have strong lobbying power and arguments that often appeal to policymakers:

The gambling industry will always have one strong argument, and that is the argument of money. I don't have that argument. Well, we can talk about social costs, and [...] say, well, there are costs in the future. Well, politicians don't care about the future. They want to be elected now. And that's it. But my hope is that the negative part of the story is also more or less heard by politicians, by the public, and other stakeholder groups. (GER researcher)

Lack of Funding and Resources

Participants described how regulators and harm prevention professionals lacked funding and resources. In contrast, the industry was described as having significant resources. Researchers in particular noted that there was very little funding available for research on the effects of the new licensing market:

So, the provincial government that brought in all this gambling... didn't bring in research to explore the effect which bothers me. I mean they should have. They should have actually put in money and said OK, we're going to track this. We want to know what kind of impact this has [...] and they didn't do that. (ON researcher)

Gambling regulators were also under-resourced for all the new tasks that the licensing system has introduced. Within the harm

prevention realm, the main responsibility of regulators was to draft clear guidance to operators and to enforce these rules. Lacking resources made some of these tasks difficult which, in turn, increased industry power and weakened harm reduction efforts. As described by an interviewee in Sweden, "[the companies] have estimated that the chance of getting caught in this net is small." (SE researcher).

Lack of Centralisation and Cooperation

Regulatory powers were further undermined by dispersed responsibilities. Many participants highlighted the need for further collaboration between regulators internationally. Online gambling companies are global, but regulations are local. This creates an asymmetry between those regulated and those regulating. In Germany, interviewees also described how a federal system where regulation takes place at multiple levels, makes it difficult to coordinate harm reduction efforts:

So, because of this very complicated system, you have so many loopholes for example. For gambling providers as well, and that is what makes really effective public health strategy, I would not say impossible, but very difficult to implement. (GER researcher)

A lack of centralisation regarding control over operators was also felt. Several jurisdictions in this study had replaced an online gambling monopoly system with a licensing system. This had created a situation where all regulated online gambling used to take place on one platform but now was dispersed across multiple operators. In particular, operator-specific pre-commitment made it difficult to track consumption across operators and implement effective duty of care measures as customers could easily move to another operator:

People have to set their own playing limits. Well, there is not really a limit because it can be up to 99,000. And they

can do it at any operator. So, what we see quite often, [...] we say, 'well we lower your limit because we're a bit worried about your behaviour.' Very often we don't see these players afterwards. I'm not really sure that they've actually stopped playing. More likely they just moved to another operator. (NL industry)

Offshore Operations

A few participants discussed offshore operations as a potential barrier to effective harm prevention and reduction. Despite the introduction of licensing systems, offshore gambling remained available in national markets. Offshore gambling was described as harmful to consumers. In addition, offshore gambling eroded many effective harm reduction measures, such as national self-exclusion registers:

Even if you've banned yourself from gambling at any of the 100 Swedish gambling sites, you can actually find a way to get abroad if you just know what you're doing. (SE NGO)

Offshore gambling operates in borderless online environments. This has made effective regulation difficult, if not impossible. Furthermore, as one interviewee highlighted, licensed operators use the offshore market as a tool to lobby for less regulation:

The gambling providers always maintain that the illegal market is growing and accounts for a large part of the total market, so we want to have more products or more freedom in the design of existing products. We want to set more incentives. We want to have less regulation. (GER researcher)

Discussion

This paper has analysed responsibilities for harm prevention and reduction in four competitive, license-based online markets. We

have looked at actors to whom responsibilities for different harm prevention and reduction measures are assigned. We have also analysed barriers to harm prevention across responsibilities. Our results have shown that in competitive online markets, harm prevention takes place at multiple levels, using multiple measures, and in collaboration across different stakeholders and actors. We also identified five barriers to harm prevention and reduction: competing interests, industry power, lack of resources, lack of centralisation and cooperation, and offshore gambling.

Responsibilities Among Different Stakeholders

Our results align with other public health-oriented evidence that supports the need for multi-level harm reduction and harm prevention across universal, indicated, and selective measures (Velasco et al., 2021; Marionneau et al., 2023; Wardle et al., 2024). Our results have shown that a range of measures on all levels have been implemented in newly licensed markets, including provision of public information, restricting advertising, restricting availability and product design, pre-commitment and self-exclusion systems, duty of care policies, proactive interventions, information about support, and providing treatment. These findings are supported by the legislative texts regulating the licensed markets in these countries, as reviewed in Ukhova et al. (2024): the study found legislative provisions for the same measures in the included countries.

Responsibility for setting the framework for most measures was with policymakers. Without legal frameworks, most harm prevention and reduction measures would not be implemented or enforced. The overall responsibility therefore lies with the legislator. This finding is in line with emerging literature on legal determinants of health in the regulation of gambling (Wardle et al., 2024): law sets the aims and goals of any regulatory framework. If harm prevention measures are required by law, these premises

should, at least in principle, be implemented and enforced as concrete policy action.

Alongside policymakers, gambling industry actors and regulators had important responsibilities. Responsibilities assigned to these actors varied across different measures. For universal measures, regulators were seen to have primary responsibility with the help of health professionals and, in some cases, industry. For selective measures, regulators and industry were expected to collaborate closely, with regulators first setting concrete parameters, industry implementing these in practice, and regulators then verifying that rules have been followed. For targeted interventions, industry was expected to collaborate with health professionals or NGOs by referring individuals to treatment.

Our results somewhat contradict the results of a prior mapping review (Akçayır et al. 2022) that identified health service providers as holding primary responsibility for most gambling harm minimisation measures. These differences can be explained by several factors. The dataset used by Akçayır et al. was derived from a large database of academic literature on gambling over three decades prior to the online gambling revolution, while our sample was based on a qualitative key informant approach focusing on online gambling specifically. Online gambling and competitive online markets, in particular, involve distinct regulatory challenges that also affect how harm prevention and reduction can be achieved (Marionneau et al., 2023). In addition, our primary interest was on harm prevention rather than harm minimisation. Finally, the mapping review by Akçayır et al. (2022) focused on Anglo-American contexts while our focus was mostly on European contexts where public health-oriented, system level policies are somewhat more established (Ukhova et al., 2024).

Unlike previous research into responsibilities, our analysis also showed very little emphasis on individuals. Individuals were seen to have some responsibility in adhering to their gambling limits or seeking help. However, even in these cases,

individual responsibility was conceptualised within the framework of harm prevention and reduction measures implemented by other actors. Previous studies, conducted amongst individuals who gamble (Grey et al., 2021a; 2021b; Marko et al., 2022), have found that few attribute responsibility to any stakeholders other than themselves, including governments or industry. This difference can partly emanate from our focus on mostly European contexts. Furthermore, the difference can relate to methodological choices. Previous research has focused on perspectives of individuals while our approach focused on other stakeholders. In our study, regulators and industry representatives highlighted their own responsibilities in gambling harm prevention and reduction. It is possible that the emphasis on individual responsibility in previous literature is also partly a factor of participants viewing the question from their own perspective. From an external perspective, the emphasis on individuals may be less pronounced.

It is also interesting to note what kind of stakeholders were not assigned responsibility for harm prevention or reduction in our study. The banking sector, internet service providers and media companies were briefly mentioned in a few interviews, but these actors had no specific responsibilities under current configurations. Digital platforms and payment intermediaries have been described as a legal blind spot in the gambling field (Parker et al., 2024), yet, digital platforms could, for example, be tasked with blocking unauthorised gambling advertising. Similarly, payment intermediaries could be tasked with overseeing and preventing payments (Parker et al., 2024; Marionneau et al., 2023). Going forward, these actors should be integrated in harm prevention efforts, particularly in online environments.

Barriers and Asymmetries in Gambling Harm Prevention and Reduction

Our results showed five barriers to effective harm prevention: competing interests, industry

power, resourcing, centralisation and cooperation, and offshore gambling. As also argued by Livingstone (2023) as well as The Lancet Public Health Commission on Gambling (Wardle et al., 2024), effective prevention of gambling harms is possible. However, existing orthodoxies and framings continue to promote ineffective regulations and interventions. Based on our results, at least three types of asymmetries appear to promote and perpetuate ineffective harm prevention.

First, we found an asymmetry of power between industry actors and other stakeholders. The power imbalance was most clearly visible in industry influence over policy and discourses. RG discourses emphasise partnerships with the industry as part of the solution for improved control (Reynolds et al., 2020; Livingstone & Rintoul, 2020; Hancock & Smith, 2017). RG discourses have become established amongst industry actors, to the point where no alternatives are considered (Forsström & Cisneros Örnberg, 2019). Similarly, in our study, collaboration with industry and employing industry-led solutions were described by many participants, leading to competing interests and overall reliance on industry due to poor resourcing of other actors.

Second, our results suggest an asymmetry of responsibilities. Industry actors have conflicting responsibilities and face conflicting expectations (also Fiedler et al., 2021; Borrell, 2008). Regulators and policymakers assign industry actors with responsibilities to prevent, detect, and intervene with gambling harms. At the same time, privately owned gambling operators have a responsibility to their investors and shareholders to produce profit and value (Berret et al., 2024). This asymmetry likely explains some of the industry misconduct identified by our respondents. At the same time, revenue interests amongst state actors may similarly prevent effective regulatory action (Livingstone, 2023).

Third, our results suggest that there may be an asymmetry between gambling harm prevention and gambling harm reduction. Our study initially

focused on gambling harm prevention in newly licensed online markets. However, most discourses in our interviews focused on harm reduction. Although the finding needs to be further explored in future studies, our study suggests a potential mixing of harm prevention with harm reduction. This may result from industry power. As described by Livingstone and Rintoul (2020), RG discourses, endorsed by industry, imply that harm prevention is impossible, as some degree of harm will inevitably result from 'irresponsible' gambling. Following this logic, the focus of regulation should instead be placed on harm reduction or harm minimisation. Similarly, in our study, even when asked about harm prevention directly, most interviewees discussed harm reduction as these types of interventions were more commonly available.

Policy Implications

Our results have implications for harm prevention and reduction responsibilities in the future. While our results have shown that some form of collaboration is needed across different actors, industry involvement should not be a key component in designing concrete measures. Policymakers and regulators should define standards and actively enforce these. Regulators are also needed to centralise actions across operators. This requires significant improvement of regulatory resources and powers (also Rintoul, 2019). When industry is involved in harm prevention and reduction, this should take place within clear frameworks that leave little room for interpretation. More symmetrical roles in harm prevention and reduction are in the interests of all stakeholders, including industry, as this can reduce misunderstandings and potential enforcement action (Gray et al., 2021a).

In addition to responsibilities in harm prevention and reduction, it is important to consider responsibilities in harm creation. Borrell (2008) has argued for a public accountability approach to gambling. Such an approach would

focus on identifying and acknowledging responsibilities in harm production. A step in this direction would involve a systematic application of the precautionary principle (Borrell, 2008; Wardle et al., 2024). Currently, industry actors across jurisdictions do not have the burden of proof to show that their products are not harmful before releasing them in the community. This is the inverse of, for example, pharmaceutical products (Borrell, 2008). In addition, reducing asymmetries of responsibilities, power, and perceptions of harm prevention could help prevent harmful practices before they cause damage to individuals.

Limitations and Further Studies

Our study is limited by a small sample (N=10). The small sample size did not allow for more systematic comparisons between stakeholder groups. We interviewed only one industry representative due to difficulties in recruiting more participants. Our results should therefore be considered as exploratory. Further research should look at stakeholder perceptions of responsibilities with larger sample sizes. In addition, our data were collected in four countries representing European and North American contexts. The results may not be applicable to other emerging gambling markets, notably in the Global South.

Conclusion

Gambling harm prevention and reduction takes place at several levels and requires collaboration across different stakeholders. This study has investigated responsibilities and potential barriers within this field. Our results have shown that while policymakers have the overall responsibility in drafting legislative frameworks and resourcing different actors in harm prevention, industry and regulators share most of the responsibility for implementation. The role of health professionals and NGOs is largely limited to providing treatment. Individuals are expected to have responsibility for maintaining their

consumption to set limits and for seeking treatment when needed. We identified five barriers to responsibilities in effective harm prevention—competing interests, industry power, resourcing, centralisation and cooperation, and offshore gambling. To improve gambling harm prevention in the future, it is crucial to address asymmetries that emerge from these barriers. These include asymmetries of power between industry and regulators, asymmetries of responsibility, and asymmetries of prioritisation between harm prevention and harm reduction.

References

- Akçayır, M., Nicoll, F., Baxter, D. G., & Palmer, Z. S. (2022). Whose responsibility is it to prevent or reduce gambling harm? A mapping review of current empirical research. *International Journal of Mental Health and Addiction*, 20(3), 1516-1536. <https://doi.org/10.1007/s11469-020-00459-x>
- Alexius, S. (2017). Assigning responsibility for gambling-related harm: scrutinizing processes of direct and indirect consumer responsabilization of gamblers in Sweden. *Addiction Research & Theory*, 25(6), 462-475. <https://doi.org/10.1080/16066359.2017.1321739>
- Bankel, R., & Solér, C. (2025). Embedded-embodied consumer experiences and the limits of responsabilization theory. *Social Responsibility Journal*, 21(4), 793-808. <https://doi.org/10.1108/SRJ-04-2024-0252>
- Berret, S., Marionneau, V., Sievänen, R., & Nikkinen, J. (2024). Institutional investment in addictive industries: an important commercial determinant of health. *Frontiers in public health*, 12, 1409648. <https://doi.org/10.3389/fpubh.2024.1409648>
- Borrell, J. (2008). The 'Public Accountability Approach': suggestions for a framework to characterise, compare, inform and evaluate gambling regulation. *International Journal of Mental Health and Addiction*, 6(2), 265-281. <https://doi.org/10.1007/s11469-007-9131-3>
- Casey, D. (2024). Reproducing responsible gambling through codes of conduct: the role of trade associations and codes of conduct in shaping risk regulation. *European Journal of Risk Regulation*, 15(2), 447-464. <https://doi.org/10.1017/err.2023.50>
- Fiedler, I., Kairouz, S., & Reynolds, J. (2021). Corporate social responsibility vs. financial interests: The case of responsible gambling programs. *Journal of Public Health*, 29(4), 993-1000. <https://doi.org/10.1007/s10389-020-01219-w>
- Forsström, D., & Cisneros Örnberg, J. (2018). Responsible gambling in practice: A case study of views and practices

- of Swedish oriented gambling companies. *Nordic Studies on Alcohol and Drugs*, 36(2), 91-107. <https://doi.org/10.1177/1455072518802492>
- Goedecke, K., Spångberg, J., Svensson, J. (2023). License to Gamble: Discursive Perspectives on the 2019 Reregulation of the Swedish Gambling Market. *Critical Gambling Studies*, 4(2), 16-29. <https://doi.org/10.29173/cgs157>
- Gray, H. M., LaPlante, D. A., Abarbanel, B., & Bernhard, B. J. (2021a). Gamblers' perceptions of stakeholder responsibility for minimizing gambling harm. *International Journal of Mental Health and Addiction*, 19(4), 891-907. <https://doi.org/10.1007/s11469-019-0056-4>
- Gray, H. M., Louderback, E. R., LaPlante, D. A., Abarbanel, B., & Bernhard, B. J. (2021b). Gamblers' beliefs about responsibility for minimizing gambling harm: Associations with problem gambling screening and gambling involvement. *Addictive Behaviors*, 114, 106660. <https://doi.org/10.1016/j.addbeh.2020.106660>
- Hancock L., Schellinck T., & Schrans T. (2008). Gambling and corporate social responsibility (CSR): Re-defining industry and state roles on duty of care, host responsibility and risk management. *Policy and Society*, 27(1), 55-68. <https://doi.org/10.1016/j.polsoc.2008.07.005>
- Hancock, L., & Smith, G. (2017a). Critiquing the Reno model i-iv international influence on regulators and governments (2004–2015)—the distorted reality of 'responsible gambling'. *International Journal of Mental Health and Addiction*, 15(6), 1151–1176. <https://doi.org/10.1007/s11469-017-9746-y>.
- Kyngäs, H. (2019). Inductive content analysis. In H. Kyngäs, K. Mikkonen & M. Kääriäinen (Eds.), *The application of content analysis in nursing science research* (pp. 13-21). Springer International Publishing. https://doi.org/10.1007/978-3-030-30199-6_2
- Livingstone, C., & Rintoul, A. (2020). Moving on from responsible gambling: a new discourse is needed to prevent and minimise harm from gambling. *Public Health*, 184, 107-112. <https://doi.org/10.1016/j.puhe.2020.03.018>
- Livingstone, C. (2023). The End of 'Responsible Gambling': Reinvigorating Gambling Studies. *Critical Gambling Studies*, 4(2), 1-14. <https://doi.org/10.29173/cgs164>
- Marionneau, V., Ruohio, H., & Karlsson, N. (2023). Gambling harm prevention and harm reduction in online environments: a call for action. *Harm Reduction Journal*, 20, 92. <https://doi.org/10.1186/s12954-023-00828-4>
- Marko, S., Thomas, S. L., Robinson, K., & Daube, M. (2022). Gamblers' perceptions of responsibility for gambling harm: a critical qualitative inquiry. *BMC Public Health*, 22, 725. <https://doi.org/10.1186/s12889-022-13109-9>
- Miller, H. E., Thomas, S. L., Smith, K. M., & Robinson, P. (2015). Surveillance, responsibility and control: an analysis of government and industry discourses about "problem" and "responsible" gambling. *Addiction Research & Theory*, 24(2), 163-176. <https://doi.org/10.3109/16066359.2015.1094060>
- Parker, C., Albarrán-Torres, C., Briggs, C., Burgess, J., Carah, N., Andrejevic, M., Angus, D., & Obeid, A. (2024). Addressing the accountability gap: gambling advertising and social media platform responsibilities. *Addiction Research & Theory*, 32(4), 312-318. <https://doi.org/10.1080/16066359.2023.2269852>
- Reynolds, J., Kairouz, S., Ilacqua, S., & French, M. (2020). Responsible gambling: a scoping review. *Critical Gambling Studies*, 1(1), 23-39. <https://doi.org/10.29173/cgs42>
- Rintoul, A. (2019). *Modernising harm prevention for gambling in Australia: International lessons for public health policy and improved regulation of gambling*. Churchill Fellowship. <https://doi.org/10.13140/RG.2.2.22616.52480>
- Ukhova, D., Marionneau, V., Nikkinen, J., & Wardle, H. (2024). Public health approaches to gambling: a global review of legislative trends. *The Lancet Public Health*, 9(1), e57-e67. [https://doi.org/10.1016/S2468-2667\(23\)00221-9](https://doi.org/10.1016/S2468-2667(23)00221-9)
- Velasco, V., Scattola, P., Gavazzeni, L., Marchesi, L., Nita, I. E., & Giudici, G. (2021). Prevention and harm reduction interventions for adult gambling at the local level: an umbrella review of empirical evidence. *International journal of environmental research and public health*, 18(18), 9484. <https://doi.org/10.3390/ijerph18189484>
- Wardle, H., Degenhardt, L., Marionneau, V., Reith, G., Livingstone, C., Sparrow, M., Trans, L.T., Biggar, B., Bunn, C., Farrell, M., & Saxena, S. (2024). The Lancet Public Health commission on gambling. *The Lancet Public Health*, 9(11), e950-e994. [https://doi.org/10.1016/S2468-2667\(24\)00167-1](https://doi.org/10.1016/S2468-2667(24)00167-1)

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ORIGINAL RESEARCH ARTICLE

Why, by Whom and How? Representations of gambling problems and their solutions in Swedish general administrative court cases

Johanna Korfitsen, Eva Samuelsson, David Forsström, Jenny Cisneros Örnberg

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Why, by whom and how? Representations of gambling problems and their solutions in Swedish general administrative court cases

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Abstract: To strengthen the right to support for people with gambling problems in Sweden, legislative changes were enacted in 2018. This study aims to critically examine how problems and solutions are represented in 69 appeals concerning gambling treatment within the general administrative court (2014–2022) and to assess how these representations have evolved following the legal amendments. The study employs Bacchi's WPR approach to scrutinize court judgments. The results reveal that gambling problems are unequivocally recognized as severe issues requiring intervention, with both explicit and implicit notions of the problem rooted in the concept of loss of control. Prior to the legal amendments, rulings primarily focused on identifying the responsible actor for providing care, often framed within a medical discourse. Post-amendment, the focus shifted to how treatment needs should be met, emphasizing an evidence-based discourse. These varying representations produce discursive, subjectifying, and material consequences, significantly affecting access to different welfare interventions. The new legislation has solidified the responsibility of social services to provide treatment for gambling problems. However, as the study demonstrates, responsabilization of gamblers occurs not only in policy and treatment frameworks, but also within the court system.

Keywords: gambling problems, problematization, treatment, law, Bacchi

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Introduction

Despite its high prevalence in marginalized groups and connection to other psychosocial issues, gambling problems have long been overlooked in social work legislation, research, and practice (Rogers, 2013; Manthorpe et al., 2018). In 2018, Swedish law was revised to clarify municipalities' responsibility to provide support and treatment for gambling problems (Prop. 2016/17:85). These changes, prompted by concerns about limited access to care for gamblers and affected others (Ds 2015:48), equated gambling with alcohol and other drugs (National Board of Health and Welfare [NBHW],

2018). This reform marks a shift in societal responses to gambling problems, potentially expanding individuals' right to treatment. This study examines how the right to treatment has been represented in Swedish administrative court verdicts over time.

Both regulators (Prop. 2016/17:85) and scholars (Heiskanen & Egerer, 2018; Rogers, 2013) have noted the lack of support and treatment for gambling problems, emphasizing the need for greater attention. Several reasons for this neglect have been suggested, including the lower priority given to gambling compared to substance use, the lack of evidence-based treatment methods, and the assumption that few people need or seek

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help for gambling problems (Manthorpe et al., 2018). Treatment-seeking rates among those with gambling problems internationally are estimated at around 20 percent (Bijker et al., 2022). Barriers to seeking help include problem denial, lack of awareness, stigma, but also external factors such as costs, waiting times, and low trust in treatment quality (Loy et al., 2018).

The terminology of gambling problems has varied in Swedish political debate, indicating the phenomenon is subject to negotiation in relation to the available solutions (Edman & Berndt, 2017). Comprehended as a public health issue, gambling problems are characterized by substantial harms for the individual, affected others and society at large (Hofmarcher et al., 2020). In Sweden's welfare system, regional healthcare and municipal social services share the responsibility to offer support and treatment for alcohol and other drugs. Healthcare, responsible for medical prevention, examination and treatment of diseases (SFS, 2017), has been assigned to treat gambling disorder as a psychiatric condition since the classification of "pathological gambling" as a disease in 1980 (NBHW, 2017). Social services have the responsibility to offer psychosocial support and treatment (Stenius & Storbjörk, 2021), initially only for substance use. A 2015 government inquiry called for improved collaboration between these sectors to strengthen gambling support and treatment (Ds 2015:48). As of January 1, 2018, both healthcare and social services are jointly responsible for gambling support and treatment, required to collaborate locally to tailor interventions to personal needs (Prop. 2016/17:85). One of the challenges in the implementation of the reform was that insufficient resources had been allocated to municipalities and regions to ensure access to treatment (Forsström & Samuelsson, 2018). While access to support has generally increased since the 2018 reforms, it remains unclear if the interventions offered can meet the needs of gamblers and their affected others (Forsström & Samuelsson, 2020).

Since Swedish law allows citizens to appeal when denied treatment, the judiciary ultimately shapes the boundaries of welfare. The 2018 legal amendments offer a chance to examine how court proceedings, guided by regulations and political directives, construct assumptions about gambling problems and their management. This study aims to critically analyze how gambling problems and their proposed solutions are represented in gambling treatment appeals within the general administrative courts, and how these representations may have changed following the 2018 legislative amendments. In addition, the underlying assumptions embedded in these representations are examined and discussed in relation to the potential consequences for those concerned.

Discourses on Gambling Problems

Gambling has long been controversial, characterized by moral judgments, conflicting interests, and unclear responsibilities (Alexius, 2017; Reith, 2007). While overall gambling rates are decreasing, those with gambling problems face more severe consequences (Abbott et al., 2018). Since the 1970s, technological and economic developments, influenced by the gambling industry (Reith, 2007), have led to legal adaptations and individual-focused explanations (Edman & Berndt, 2017). According to Livingstone and Rintoul (2020), placing responsibility on individual gamblers discourages effective measures to prevent gambling harm. Instead of addressing structural factors, such as regulating the gambling market or limiting marketing, the burden is largely placed on individuals to manage their gambling through responsible gambling tools (Alexius, 2017; Hancock & Smith, 2017; Livingstone & Rintoul, 2020; Selin, 2015). Gamblers who fail to self-regulate are pathologized (Reith, 2007). The medicalization of gambling as a disease promotes individual treatment measures over broader policy interventions (Edman & Berndt, 2017; Rossol, 2001). This responsabilization extends to

the treatment system, where common approaches like cognitive behavioral therapy and motivational interviewing focus on strengthening individual self-control (Alexius, 2017). Although medicalization is intended to reduce shame and guilt, it can reinforce stigmatization by internalizing compulsory traits and promoting a homogenized view of gambling problem experiences (Fraser, 2016; Rossol, 2001).

Swedish Social Work Law and Regulation

Social work relies heavily on legislation that regulates individual rights and the authority of the Social Welfare Committee (henceforth "committee")—the municipality's formal decision-making body. Anyone unable to meet their needs independently is entitled to assistance from social services (SFS, 2001, 4:1). These measures, such as financial aid, housing, psychosocial support, and treatment, aim to ensure a reasonable standard of living and promote independent living. Decisions must be based on individual assessments of the person's overall life situation (NBHW, 2021), and the committee is responsible for providing the necessary support to help people recover from "abuse" (SFS, 2001, 5:9). Interventions should be planned in agreement with the applicant, based on the best available knowledge, and tailored to individual needs and self-determination, following evidence-based practice (EBP) (NBHW, 2021). EBP, modeled on medical practice, integrates 1) the best research evidence, ideally from randomized control trials, with 2) clinical expertise, and 3) client values, including preferences and expectations, to inform practice decisions (Sackett et al., 2000). Social services officials are thus expected to consider research, professional knowledge, and the help-seeker's needs when making intervention decisions.

When the committee rejects an application, the individual has the right to appeal, a key aspect of upholding the rule of law (Fridström Montoya, 2022). The appeal must present reasons for changing the decision. The committee can review

the case, but if the decision remains, the appeal is forwarded to the administrative court. The Swedish legal system has three levels of administrative courts: the Administrative Court ("district court"), which handles disputes between individuals and authorities, including social services appeals; the Administrative Court of Appeals ("court of appeal"), which reviews district court cases with a permit; and the Supreme Administrative Court, which rarely grants review permits and primarily addresses cases that set legal precedents (Swedish Courts, 2020).

Verdicts from the higher court of appeal can shape future legal applications, unlike those from the lower-level district court (Fridström Montoya, 2022). However, district court verdicts may still have prejudicial effects by legitimizing certain decisions in social work practice and guiding municipalities in how they can and should act in similar cases. Courts can overturn committee decisions and set precedents, influencing social work practices by shaping the reasoning behind decisions and intervention designs (Fridström Montoya, 2022). Legal reasoning also reflects societal norms and values, helping to define and address social problems through recommended interventions (Hydén, 2002). Thus, legal discourse plays a role in shaping and reinforcing notions of gambling problems.

Theoretical Framework

The representations presented in court cases can be understood as social constructions, where claims of truth (Burr, 2015) directly and indirectly shape the societal handling of gambling problems and determine people's access to support and treatment. Inspired by Bacchi's (2009) "*What's the Problem Represented to Be*" (WPR) approach, we critically analyze how gambling problems and their solutions are constructed and managed in legal cases. This approach highlights how governing discourses define the problems they aim to solve (Bacchi & Goodwin, 2016). Bacchi (2009:35) defines discourses as "forms of social knowledge that

make it difficult to speak outside the terms of reference they establish for thinking about people and social relations". While setting the stage for what is possible to say and think, the discourses of an issue in court shape public understanding and drive political action, promoting certain solutions while excluding others. As expressions of political governance, they have real consequences for those involved (Bacchi, 2009).

The judiciary plays a central role in producing and reinforcing societal problems. Thus, the assumptions and constructions in legal discourses can be critiqued similarly to political documents (Seear & Fraser, 2014). Political initiatives often follow and are shaped by legal system representations, influencing how problems are framed. Dichotomies, or *binary oppositions*, simplify complex issues and maintain certain representations, privileging one side over the other in hierarchical orders (Bacchi, 2009).

Court cases also engage in the process of *subjectification*, where people are assigned certain characteristics and expectations, creating hierarchical oppositions (e.g., the "sick" gambler versus the "not sick" gambler). These subject positions shape how people perceive themselves and limit their potential actions (Bacchi & Goodwin, 2016). By labeling people as "in need" or "responsible", these subject positions influence the legal process and the solutions offered. Analyzing these subject positions in court reasoning reveals how assumptions about individuals are constructed and legitimized.

Methods

Material

The data for this study is based on Swedish general administrative court cases concerning appeals of gambling treatment decisions from 2014 to 2022. The timeframe was chosen to encompass a significant period both preceding and following the legal amendments in 2018. Official verdicts were sourced from the JUNO and Infotorg databases using Swedish terms for

"gambling addiction", "gambling abuse", and "gambling problem" (N=633). The first step in the sampling process was to narrow the focus to verdicts addressing the right to assistance for gambling treatment under the Social Services Act (SFS, 2001, 4:1), leaving 293 relevant cases. Verdicts concerning other issues, such as child protection or assistance for people with disabilities, were excluded (N=340).

In the second step, 208 additional verdicts were excluded because they concerned the right to economic assistance for household and daily living expenses (e.g., housing, electricity, food) rather than specific treatment measures. The third step entailed a detailed review of the remaining 85 verdicts, resulting in the exclusion of 16 cases in which gambling was mentioned only briefly – for instance, in relation to computer gaming concerns or as a complicating circumstance – while the primary focus of these cases was treatment for substance use problems or criminality. This left 69 verdicts specifically focused on appeals for gambling treatment. Of these, 32 cases occurred between 2014 and 2017 (before the legal amendments), and 37 cases occurred between 2018 and 2022. Only 3 of the 69 verdicts were from the higher-level court of appeal.

The verdicts analyzed range from 3 to 10 pages, with an average length of 5 pages (345 pages in total). Each document begins with information about the appellant and the opposing party, followed by a background description that includes the decision made by the committee. The appellant's claims and arguments for why the court should overturn the committee's decision are then presented. The judgment section refers to relevant laws, government bills, and precedent cases, synthesizing documentation such as social service investigations, the appellant's claims, and medical certificates. The verdict concludes with the court's ruling, rationale, and final decision.

Although these documents are publicly accessible, the study underwent ethical review by

the Swedish Ethical Review Authority (no 2018/2021-31/5, 2023-01349-02) due to the sensitive personal data involved. Confidentiality was maintained throughout the analysis, with all personal details removed. Excerpts used in the study were translated from Swedish to English, ensuring the core meaning of the text was preserved.

Coding and Analysis

Following a procedure similar to Stoor et al. (2021), the coding and analysis process was guided by an interpretative approach inspired by Bacchi's (2009) *What's the Problem Represented to Be?* (WPR) framework, in combination with thematic categorization. Coding and analysis were conducted in Word iteratively by the first author and refined over time. The material was initially reviewed both chronologically and comparatively, distinguishing court judgments issued before and after the legal reform. WPR questions 1 and 2 directly informed the coding process, while questions 2, 4, and 5 supported the theoretical operationalization. Due to the limitations in the scope of the material, questions 3 and 6—which address the genealogy and dissemination of problem representations—were excluded from the analysis. The first question—*What is the problem represented to be?*—was applied to explore how gambling problems and their proposed solutions were described and understood in the court cases. The second question—*What assumptions underlie these representations?*—was used to uncover the presuppositions that lent these representations legitimacy and made them appear as taken-for-granted "truths." The fourth question—*What is left unproblematic in these representations?*—helped identify what was omitted or silenced in the court cases, thereby excluding alternative explanations or perspectives. Additionally, the fifth question—*What effects are produced by these representations?*—enabled analysis of how such representations constructed subject positions with particular expectations and responsibilities,

especially in relation to eligibility for social welfare interventions. This analytical procedure enabled the identification of both manifest content—what is explicitly stated—and latent meanings embedded in the court cases. In an effort to critically reflect on and mitigate potential biases in the selection of excerpts and the interpretation of data, the first and second authors engaged in ongoing collaborative discussions throughout the analytical process. Final codes were labeled and organized by the first and second authors into three overarching themes centered around the reasons for gambling problems represented as problematic (*why*), the actor considered responsible to solve it (*by whom*), and with which solutions (*how*).

Since court documents are not designed for research, it is important to critically reflect on their specific characteristics and limitations. These documents aim to legitimize rulings, potentially omitting key nuances in the court's reasoning. The verdicts concern cases preceded by a social investigation and appealed by the applicant. The decision to appeal may be tied to certain resources, meaning the cases in this study are not necessarily representative of how social services handle gambling treatment in general. Additionally, the court may have access to investigation documents not included in the materials available for this study, which is important to consider when interpreting the results. The focus of the analysis was directed towards the representations produced by the courts in the included verdicts, to display how different truth claims are created, expressed and influential in the legal process.

Description of Court Cases

Before the 2018 legal amendments, residential care was the most common intervention requested in 27 of the 32 cases. The other five cases involved either external outpatient care or financial aid for treatment costs. The primary reason for rejection by the committee was that the responsibility for support fell under regional

healthcare (19 cases, see Table 1). Other reasons for rejection included the applicant having an economic surplus above reasonable standard of living or the committee deeming the individual's needs already sufficiently met. The court ruled in favor of the appellant in only two cases, while in seven cases, the court annulled the committee's decision, citing inadequate documentation and requiring further investigation.

After the 2018 legal amendments, residential care remained the most common intervention in 26 of the 37 cases. The other 11 cases involved external outpatient care or financial aid for treatment costs. In 28 cases, the committee's main reason for rejection was that municipal outpatient services had not been fully utilized, or that the individual's needs could be met through outpatient care. Only two rejections cited regional healthcare responsibility. The court ruled in favor of the appellant in five cases, annulled two, and rejected 30 (see Table 1).

This comparison highlights a shift in the grounds for rejection after the 2018 amendments, with a reduced focus on transferring responsibility to regional health care and an increased emphasis on exhausting outpatient services before considering residential care.

Findings

The following section presents our findings, organized around the three central themes identified in the analysis. The first theme—An indisputable problem of economy and loss of control—presents why gambling is represented as problematic in the verdicts, revealing relatively consistent representations over time. The subsequent themes display how arguments lead to different solutions and responsibilities before and after the gambling reform. The second theme—Before the legal amendments—a medical discourse discerning care responsibility—centers around who is responsible to solve the problem. In the third theme—After the legal amendments: an evidence-based discourse—the focus is on how the problem should be solved. Excerpts from the verdicts are included to illustrate the analysis, specifying the actor (appellant, committee, or court), court level (district court or court of appeal), year (2014–2022), and case number.

An Indisputable Problem of Economy and Loss of Control

Problem representations are not neutral or self-evident; they are shaped by how the issue is

Table 1. Overview of court rulings and reasons for rejection

	Court cases 2014-2017		Court cases 2018-2022	
	N	%	N	%
Verdict by the court				
Rejection	23	72	30	81
Approval	2	6	5	14
Annulment	7	22	2	5
Reason for rejection by the committee				
Responsibility of regional healthcare	19	59	2	5
Need already satisfied	3	9	7	19
Need can be satisfied through outpatient care	3	9	19	51
Other measures not exhausted	3	9	9	24
Economic means above reasonable standard of living	3	9	0	0
Case not possible to investigate	1	3	0	0
Total	32	100	37	100

understood and addressed (Bacchi, 2009). Most appeals argue for gambling-specific residential or outpatient care due to the severe economic, social, and relational consequences of long-term gambling. In the verdicts, the appellant's gambling is framed as evidently problematic, with both the committee and courts affirming the appellant's claims, using terms like "indisputable", "ascertained", or "not questioned". For instance:

It is indisputable that [the appellant] suffers from gambling abuse and is in need of care. (Court, district court, 2014, 12370-14)

The gambling behavior is portrayed as severe, with far-reaching negative consequences that legitimizes the need for intervention. Both the court and the committee share the appellant's representation of the problem and need for care, presenting a more or less homogenous view. The verdicts highlight the economic toll of gambling problems, describing unmet basic needs, evictions, and excessive debt that strain social relationships. Economic aspects are framed as both the consequence and cause of the problem.

Another basic assumption in the verdicts is the implicit and explicit connection between the problem and loss of control, described as a compulsory behavior and lack of capacity to self-regulate.

From the administrative court's point of view, it is clear that [the appellant] lacks the capacity to stop the abuse on [their] own despite having the honest will to do so. (Court, district court, 2019, 4583-19)

Here, the appellant's "honest will" emphasizes that the issue is not lack of motivation but loss of control. This narrative of irrationality and inability to stop gambling appears in both the court's and appellant's representations, justifying the need for treatment. The portrayal of gambling as a problem of control positions individuals as lacking accountability and self-regulation. Appellants often describe themselves as

incapable, which, as Bacchi (2009) suggests, creates a subjectification effect. By adopting such subject positions, individuals can legitimize their need for support. The verdicts reveal that this subject position is not only assigned but internalized by appellants to qualify for assistance.

These depictions of gambling problems remain consistent over time, but as we will demonstrate, they often conflict with court expectations about individuals' ability to resolve their issues. In contrast, representations of solutions shift significantly over time, shaped by changes in legislation and legal interpretations.

Before the Legal Amendments: A Medical Discourse Discerning Care Responsibility

Before the 2018 legal amendments, the core issue in court cases is not whether the gambling problems were severe but who was responsible for providing care. The most common reason for the committee to reject care requests is that responsibility falls to regional healthcare. This distinction between the responsibilities of social services and healthcare shapes the understanding of gambling problems and assigns accountability based on whether gambling problems are considered similar to substance use problems. The committee frequently argues that, unlike substance use problems, gambling problems are not their responsibility since no legal mandate at the time existed to prevent or treat it. By framing gambling problems within a medical discourse as a disease, the committee places responsibility on healthcare, creating a circular argument where the problem (a disease) defines the solution (medical care), and vice versa.

The responsibility to care for, investigate and treat diseases accrues to the regional healthcare according to the law. Gambling addiction is regarded as a disease (in line with the verdict of the court of appeal in [city]). (Court, district court, 2015, 8843-15)

This medical discourse shows the legal proceedings' capacity to reproduce previous reasoning and judgments, lending legitimacy to new verdicts. Other actors, such as medical doctors through their certificates, also shape these representations:

According to [medical doctor], gambling addiction should be regarded as other addictions. The social welfare committee does not share the doctor's opinion that treatment of gambling abuse should be equated with other addictions. (Court, court of appeal, 2015, 3477-14)

Different assumptions about gambling problems thus coexist, leading to varying ways of understanding and addressing it. These discrepancies demonstrate that the nature of gambling problems is open to interpretation and subject to negotiation. However, the adequacy of each actor to meet the needs of the target group—whether in terms of resources, prerequisites, or competence—remains an invisible concern in the parties' claims. This suggests that the categorization itself, rather than individual needs, is the primary focus.

The court's formative role in the construction of gambling problems is evident in the importance placed on the presence of a diagnosis. In some cases, representing gambling problems as a disease is sufficient to determine responsibility, while in others, judicial judgment is also required. A diagnosis is then considered necessary to hold regional healthcare accountable.

To be able to attribute care responsibility requires that the gambler has such an advanced consumption of gambling that he or she can be diagnosed as sick. (Court, court of appeal, 2014, 3358-13)

This is particularly evident when the court annulled a committee decision due to the absence of a diagnosis, ruling that the referral of care responsibility to regional healthcare was

unfounded. The case was remanded to the committee for reassessment of whether the municipality or the individual gambler should bear the financial responsibility for treatment.

For a social welfare committee to have the right to deny economic support for gambling addiction treatment by claiming that regional healthcare should bear the responsibility, the investigation must demonstrate that the individual's gambling addiction has been diagnosed as a disease (Court, district court, 2014, 1725-14)

Thus, a diagnosis is framed as a prerequisite for determining care responsibility. The dominance of medical discourse in shaping and understanding gambling problems is also reflected in the evaluation of professional judgments.

In the social welfare committee investigation, it is stated that [the appellant] according to diagnostic criteria can be regarded as a gambling addict and thereby have the right to care according to the law. The diagnosis however seems to have been made by a case worker without medical expertise. The information should thereby not be accorded importance to in the case. [The doctor] reports in a letter that the clinic does not have the mission or task to treat gambling addiction and that [the appellant] instead should turn to the municipality. [The doctor's] opinion can, according to the court, be seen as a confirmation of that the clinic has not assessed [their] gambling addiction as a disease, which is what the regional healthcare according to the law has the responsibility to investigate and treat. (Court, district court, 2014, 1725-14)

The excerpt illustrates the privileged status of medical professionals, where a doctor's diagnosis

is considered more legitimate than a social worker's assessment. This reflects how discourses establish hierarchies that influence the distribution of rights and privileges (Bacchi & Goodwin, 2016). A diagnosis distinguishes the "sick" gambler—compulsive, pathological, and diagnosed—from the "problematic" but undiagnosed gambler. The "sick" gambler is portrayed as passive and in need of treatment and control, often involving medical care and additional measures like appointing a fiduciary, trustee, or legal representative.

In court cases lacking a diagnosis or adequate healthcare, the individual's right to social assistance becomes central to the legal assessment. According to law, anyone unable to meet their own needs, either independently or through other means, is entitled to support from social services (SFS, 2001). Thus, people with gambling problems could qualify for assistance even before the 2018 legislation established the right to treatment. However, this right depends on meeting the general requirements for economic assistance.

Unlike treatment for substance abuse, assistance for gambling addiction is contingent upon the individual's inability to meet their needs independently or through other means (Court, district court, 2017, 11914-16).

The distinction between gambling problems and substance use problems at the time reflects different lines of argument. For gambling, the requirement for economic assistance places greater responsibility on individuals to meet their own needs, including the ability to pay for treatment. This leads to discussions about whether individuals have sufficient financial resources to cover treatment costs themselves.

[The appellant] can with the study allowance pay for the ongoing treatment, since [they have] economic surplus relative to the national standard benefit.

Therefore, the need for assistance is considered as met. (Court, district court, 2017, 741-17)

Paradoxically, although treatment needs are often driven by debts and financial hardship, individual capacity is assessed by the committee based on the assumption that the person should have the financial means for treatment, even if they may not actually have them. Another court requirement is that people must actively demonstrate they have exhausted all other support options to qualify for assistance. The ongoing division of responsibility between social services and healthcare often leads to people being referred back and forth due to unclear roles and assignments.

[The appellant] was referred to psychiatric care after receiving two CBT sessions from their employer, but was denied help and referred to municipal outpatient care. From there, [they were] sent to social services, which in turn referred [them] to district healthcare, only to be sent back to psychiatric care, leaving [them] without assistance. Despite repeated attempts, [the appellant] has not yet secured an appointment at the time of appeal. However, this does not indicate that healthcare has refused to assess [their] treatment needs or provide care in line with the law. Therefore, [the appellant] has not demonstrated that all possible avenues for treatment, aside from economic aid through social services, has been exhausted (Court, district court, 2017, 11914-16).

It is argued (as in other cases, e.g., 3477-14) that the focus is not on whether social services or healthcare is responsible for treatment, but rather on whether the appellant has demonstrated the unwillingness or incapacity of the relevant actor to meet the need. The appellant must provide

sufficient evidence that regional healthcare has evaded its responsibility, in line with the administrative law principle requiring applicants to prove their eligibility. Consequently, the burden of proof that support was requested but not provided falls heavily on the individual. The help-seeker must actively seek treatment, present their case, and prove that healthcare has denied responsibility. Thus, gambling problems are framed as an individual problem, placing the responsibility on the individual to either fund their treatment or demonstrate negligence on the part of the care system. This creates a subject position in which the individual is portrayed as a responsible agent, based on the assumption that they have the capacity to demand their rights. The individual's ability to meet these demands and expectations directly impacts their right to assistance.

After the Legal Amendments: An Evidence-Based Discourse

Following the 2018 legislative changes, medical discourse largely vanishes from court arguments. The amendments solidify the responsibility of social services to provide support and treatment for gambling problems, leading to a decrease in court rejections based on referrals to regional healthcare. Additionally, demands for individuals to cover the economic costs of treatment also diminish in verdicts. The next section presents the evidence-based discourse that has emerged alongside, and is now more prominent than, the medical discourse in post-2018 verdicts.

In the medical discourse, gambling problems were compared to substance use problems to determine responsibility (who is accountable?), while the evidence-based discourse emphasizes treatment choices (how should treatment be delivered?). Appellants often seek residential care for specialized gambling treatment to escape their everyday lives filled with hardships and loss of control. They frame gambling problems as distinct from substance use problems regarding needs and experiences, asserting that recovery

requires intensive, gambling-specific care in a community of like-minded peers—something that outpatient care provided by social services cannot adequately address.

In contrast, following the legal amendments, the committee now equates gambling problems with substance use problems, suggesting that specialized care is unnecessary. Individuals are referred to "addiction treatment that all addicts can participate in" (12370-14). The definition of "gambling-specific care" varies and is left to the discretion of the local committee. When gambling-specific care is outside the purview of social services, the responsibility shifts to the appellant to seek treatment through referrals to other providers:

[The appellant] has been offered certain outpatient care measures and has participated in meetings with alcohol and drug counselors. However, [the appellant] has not attempted the interventions proposed by the committee, such as the Gambling Helpline or online distance treatment (Committee, district court, 2020, 8340-20).

The committee equates long-term residential care with short-term online or telephone support, failing to address the scope or focus of these services. Other individual needs, such as the desire to spend time away from home and escape everyday triggers, are overlooked. Gambling problems are framed as either distinct from or equivalent to substance use problems, depending on the proposed solutions and the parties involved. Regardless, the solution presented by the court most commonly defaults to outpatient care.

The verdicts legitimize certain solutions through evidence-based discourse, particularly by contrasting objective (scientific) knowledge with subjective (individual experience) knowledge. Despite the heterogeneous individual needs, varying conditions, and the importance of

respecting self-determination in assessments (SFS, 2001), outpatient care is presented as the sole solution, with gambling problems assumed to not require intensive measures. This reasoning relies on the assumption that the least intensive intervention should be preferred, as articulated by the court, which cites "scientific studies and international experiences" referring to a government-commissioned inquiry (Ds 2015:48). Additionally, assumptions are made about the inability of residential care to foster sustainable change.

The social welfare committee contends that placement in residential care may be unsuitable due to the risk of [the appellant] relapsing into gambling abuse once the treatment period concludes (Court, district court, 2020, 8340-20).

At the same time, the potential risk of relapse associated with outpatient treatment is not critically examined. The portrayal of outpatient care as the preferred solution is legitimized by referencing evidence (e.g., "evidence-based and recommended by the NBHW", 2346-20), regardless of whether such evidence is available or absent. In contrast, the lack of available evidence for the residential care sought by the applicant is used to argue against its suitability.

The residential care that provides treatment for gambling addiction has not been evaluated by independent researchers, leaving the effectiveness of the treatment unclear (Court, district court, 2016, 1424-16).

The use of evidence in the court argumentation does not necessarily imply that it is considered legitimate enough to guide the committee assessments. In the verdict below, the appellant cited research reports supporting the effectiveness of group treatment for gambling. However, the committee counters this by arguing that group treatment is not a prerequisite for achieving effective results.

There is nothing that confirms that participation in group treatment should be a demand for successful treatment. The municipal outpatient care can offer a manual-based treatment program based on cognitive behavioral therapy (Committee, district court, 2022, 2020-22)

Thus, various forms of evidence are used to legitimize certain arguments, but their value is contingent on the actor's position. The basis for these assessments is often unspecified, rendering 'evidence' a self-evident concept that is frequently taken for granted.

Another tension arises between the appellant's request for a specific intervention and the municipality's emphasis on cost efficiency. The importance of involving the "addict" in treatment decisions is underscored by citing legal precedents.

In rulings from the Supreme Administrative Court, it is emphasized that it is crucial for addicts to have the ability to choose among different treatment options in accordance with law. When the individual's preference conflicts with that of the committee, all relevant factors should be considered, including the suitability of the proposed care intervention, the costs relative to other options, and the individual's specific requests regarding a particular type of care (Court, district court, 2022, 343-22).

In cases of differing opinions, factors such as suitability and costs should thus be considered. In the verdicts, outpatient treatment is framed as evidence-based, often prioritizing costs over individual choice. The individual's preference is typically acknowledged only after other options have been exhausted. However, in two exceptional cases, the individual's choice was explicitly cited as the basis for overturning

previous committee decisions and approving residential care applications.

The district court assesses that treatment within supported housing combined with outpatient care does not appear more suitable than residential care. Considerations of costs are lacking, and the social welfare committee has not argued that residential care should be unmotivated with regard to costs. [Their] preference for the intervention must also be taken into account. (Court, district court, 2018, 13117-18)

The court emphasized the ineffectiveness of previous outpatient care and the individual's motivation to participate. However, the final reason for the judgment was the absence of cost considerations in the committee's argumentation. Thus, outpatient care is not necessarily regarded as more suitable than residential care; rather, residential care is framed as "unnecessary", while outpatient care is considered "good enough." This framing suggests that outpatient care is supported not only by evidence-based assumptions but also by economic incentives, with little or no regard to the intention of the law to tailor interventions to individual needs and self-determination.

Evidence both producing and maintaining "the truth" about outpatient care concurrently excludes other possible solutions. To qualify for alternative treatments, people must first attempt and fail with outpatient care. However, it remains unclear how long or to what extent they must engage with outpatient care before it is deemed exhausted. When appellants consider care inadequate, the committee frequently contends that the person has not adhered to the treatment plan, undermining their efforts and needs while placing the responsibility for failed treatment on them.

The social welfare committee assesses that [the appellant's] needs could be met

through outpatient care. However, [they have] previously chosen to terminate treatment before any results could be achieved, feeling that the treatment was insufficiently helpful. The committee argue that the planning could have been adjusted to [their] needs (Court, district court, 2022, 343-22).

When outpatient care is presented as the only suitable option for gambling problems, the shortcomings of inadequate care are rarely acknowledged. In one case, the appellant argued that two counseling sessions per week were insufficient to remedy the problem. The appellant had taken money from his father to continue gambling and lost his job due to theft from colleagues. The court responds:

[The appellant] participates in outpatient care, which has not been evaluated. It is not proven that the treatment [they have] begun is insufficient to the extent that it will ultimately prevent recovery from his abuse (Court, district court, 2019, 13719-18).

Thus, the appellant is held responsible not only for completing the inadequate counseling but also for demonstrating its general ineffectiveness. As noted earlier, the appellant frequently expresses a need for the limitations and control provided by the specific boundaries of residential care, citing the risk of further self-destructive behavior (7919-17). The court's representations do not address how the ongoing negative consequences should be handled. While acknowledging the problem's nature (loss of control), the court often fails to provide adequate solutions for addressing it.

Following the legal amendments, the focus on evidence in the verdicts reduces differences and nuances, aligning with the clarified obligations of social services to provide treatment. However, this results in a more explicit formalization of need and support. State governance, framed as

evidence in the verdicts, limits individual involvement in decision-making and excludes alternative measures. The marginalization of certain voices and the exclusion of experience-based knowledge are largely left unproblematic in the argumentation. Consequently, gambling problems are represented as homogeneous, with a single care solution deemed sufficient, ignoring individual variations in needs and conditions.

Discussion

This study aimed to critically analyze how gambling problems and their proposed solutions were represented in gambling treatment appeals within the Swedish general administrative courts from 2014 to 2022. Gambling problems were consistently portrayed as severe, marked by financial consequences and loss of control. Assumptions, both explicit and implicit, framed gambling problems as issues of compulsion, depicting the individual as lacking responsibility and self-control. Key similarities and notable differences in problem framings and solutions emerged before and after the 2018 legislative changes.

Before the legal amendments, cases focused on determining whether social services or regional healthcare should provide care. A medical discourse dominated, portraying gambling problems as a disease requiring medical or psychiatric care, often regulated through external control measures. This discourse framed individuals as passive, pathological, and compulsive, with courts using a diagnosis as the key criterion to assign care responsibility. Beyond labeling the need for care as "indisputable", courts distinguished between appellants as either "sick and in need of care" or "in need of care but not sick". In the absence of a diagnosis, individuals were assigned responsibility for managing their care independently, expected to act and prove their entitlement to support. By framing gambling as a medical issue, courts placed significant burden on those seeking help,

shaping their access to treatment and privileging specific solutions.

After the legal amendments, the medical discourse gave way to an evidence-based discourse, shifting the focus from who provides care to how care needs should be addressed. With social services' responsibility for support and treatment clarified, the emphasis moved from defining gambling problems to resolving them. In this evidence-based discourse, knowledge became central, with objective (scientific) knowledge prioritized over subjective (experience-based) knowledge, creating a hierarchical dichotomy. Gambling problems were now framed, based on available evidence, as treatable through less intensive outpatient care. Though presented as objective and true, the evidence is often vague and nonspecific.

Social services recipients are often categorized by care providers to align with prevailing norms (Järvinen & Andersson, 2009). Also, political initiatives and economic imperatives shape how substance use problems are constructed to fit available solutions (Moore & Fraser, 2013). Similarly, decision-making processes in authoritative bodies play a role in "doing" gambling problems. When gambling problems are treated as homogenous and solvable through a general solution, individual needs are overlooked. Outpatient care is portrayed as suitable, while failed treatment is attributed to the individual's lack of effort. Treated as responsible subjects, people are expected to comply and experience significant failure before alternative treatments are considered. When outpatient care is framed as the only viable option, supported by evidence or economic factors, the individual's self-determination is disregarded and alternative options excluded. This study highlights how access to necessary treatments is limited, showing how court discourses have material consequences for those affected.

Policy shapes the regulation of law, but courts must interpret laws in practice, defining problems and constructing solutions in line with societal

norms (Seear & Fraser, 2014). Legal discourse and its institutional application can have a significant impact on people's everyday lives (Finegan, 2012). The findings of this study underscore the fluid and pragmatic nature of court argumentation, wherein subjects are frequently assigned simultaneously contradictory characteristics. The shifts observed in how courts approached the relevant rulings before and after the 2018 legislative amendments are best understood in the context of how municipalities and other stakeholders engage with dominant discourses to manage shrinking public resources (cf. Björk, 2018). The allocation of resources to municipalities remains inadequate to ensure the provision of support required by people with gambling problems and their families (Forsström & Samuelsson, 2018). The findings also align with prior research showing that gambling problems remain subject to ongoing definitional processes (Edman & Berndt, 2017). This is evident in how gambling problems are either differentiated from or equated with substance use problems, often in contrast to the more established alcohol and other drugs discourse. In the court verdicts, gambling problems are compared to substance use problems not only in terms of rights but also in terms of need. Court arguments often appear arbitrary, echoing research on how social problems are constructed based on institutional conditions (cf. Moore & Fraser, 2013; Järvinen & Anderson, 2009). This arbitrariness is interpreted through the fluid nature of the phenomena (Reith & Dobbie, 2012), allowing actors to emphasize aspects that align with economic incentives and available solutions (Moore & Fraser, 2013).

The findings can also be contextualized within the broader framework of medicalization, where diverse behaviors are categorized and treated as similar phenomena (Edman & Berndt, 2017). Medicalization serves multiple functions: legitimizing problems, alleviating personal accountability, and appealing to public sympathy (Fraser, 2016; Edman & Berndt, 2017). Within this framework, gambling disorder is framed as

stemming from individual personality deficits rather than structural issues, such as gambling availability. This framing aligns with the interests of the gambling industry by placing responsibility on individual gamblers (Alexius, 2017; Livingstone & Rintoul, 2020; Samuelsson & Cisneros Örnberg, 2022; Selin, 2016). The study emphasizes the role of diagnosis in determining treatment eligibility, reinforcing a binary distinction: care for some, but not for others. Medicalization thus shapes access to care, implying that only those with a formal diagnosis are deemed deserving of societal support.

The medicalization of human behavior is closely tied to the implementation of EBP (Lancaster et al., 2017). This study demonstrates how these discourses are prominent in shaping the understanding and management of gambling problems, and to some extent, mutually enrich each other. While the medical discourse is used in court cases ontologically to reason what kind of problem gambling is (and hence who is responsible for solving it), the evidence-based discourse is used epistemologically to value certain knowledge claims that in effect warrant specific solutions in favor of others. By positioning certain knowledge as objective and unquestionable, the evidence-based discourse diminishes the value of lived experience (Lancaster et al. 2017). By framing evidence this way, individual needs are formalized and homogenized, limiting who can define problems and propose solutions (Bacchi & Goodwin, 2016). This contrasts with EBP's original goal of providing scientifically valid, personalized care (NBHW, 2021). In social services, EBP has often led to standardization rather than tailored, person-centered interventions (cf. Stenius & Storbjörk, 2021). In this study, evidence is invoked ambiguously but used to legitimize simplified categorizations of both individuals and treatments. This reliance on evidence obscures the complexity of individuals' needs and experiences. Thus, the governance of knowledge participates more in constructing problems than

addressing them, with courts prescribing "objective" solutions through a process of homogenization.

In the verdicts, almost all needs are seen as manageable through outpatient care, justified by the evidence-based discourse. The widespread recommendation of outpatient interventions, regardless of individual needs or professional assessments, has faced criticism from Swedish authorities (Health and Social Care Inspectorate, 2015) and is viewed in research as part of a broader trend of liberalization and responsabilization. In this approach, help-seekers are made increasingly responsible for their own care (Stenius & Storbjörk, 2021). This reflects a tension between neoliberal ideals of self-governing citizens and the medical discourse framing individuals as pathologically incapable of self-control (Samuelsson & Cisneros Örnberg, 2022). The paradox surfaces in verdicts that depict gambling problems as problems of loss of control, while simultaneously requiring people to prove that regional healthcare is inaccessible and that two counseling sessions per week are inadequate.

Outpatient care, typically short-term and based on cognitive behavioral therapy, is recommended by national guidelines (NBHW, 2018). However, people with gambling problems often face complex challenges, including higher risks of psychiatric disorders, substance use problems (Håkansson et al., 2018), suicide (Karlsson & Håkansson, 2018), debt (Håkansson & Widinghoff, 2020), and relational violence (Dowling et al., 2016). Expecting people to manage their recovery with minimal counseling is often seen as unrealistic by both help-seekers and their families. Moreover, interventions aimed at teaching gamblers to take responsibility reinforce the hegemonic idea of "responsible gambling" promoted by the gambling industry (Alexius, 2017).

Conclusion

Notions of gambling problems are shaped by societal norms, available solutions, and economic interests. The 2018 legal amendments aimed at strengthening individual rights to support and treatment in Sweden have further solidified social services' responsibility. However, individuals still bear significant responsibility to prove the inadequacy of the interventions provided. This responsabilization of gamblers occurs not only in gambling policy, prevention, and treatment, as noted in previous research, but also in how gambling problems are addressed in the court system.

The verdicts are not formed in a judicial vacuum but are influenced by ideological notions that shift responsibility from the welfare system and the gambling industry to the individual gambler. The state's role in shaping the conditions for gambling problems in society is controversial. Despite gambling generating substantial revenue for the state (USD 7.3 million in 2020, The Swedish Agency for Public Management, 2021), people with gambling problems continue to face challenges in accessing necessary support and treatment. The findings of this study, along with the state's financial interest in the gambling market, highlight the need for ongoing critical scrutiny of how society manages gambling problems.

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References

- Abbott, M., Romild, U., & Volberg, R. (2017). The prevalence, incidence, and gender and age-specific incidence of problem gambling: Results of the Swedish longitudinal gambling study (Swelogs). *Addiction*, 113(4), 699–707. <https://doi.org/10.1111/add.14083>
- Alexius, S. (2017). Assigning responsibility for gambling-related harm: scrutinizing processes of direct and indirect consumer responsabilization of gamblers in Sweden.

- Addiction Research & Theory*, 25(6), 462–475.
<https://doi.org/10.1080/16066359.2017.1321739>
- Bacchi, C. (2009). *Analyzing Policy: What's the problem represented to be?* Pearson.
- Bacchi, C. & Goodwin, S. (2016). *Poststructural Policy Analysis: A Guide to Practice*. Palgrave Macmillan.
<https://doi.org/10.1057/978-1-349-96134-4>
- Bijker, R., Booth, N., Merkouris, S. S., Dowling, N. A., & Rodda, S. N. (2022). Global prevalence of help-seeking for problem gambling: A systematic review and meta-analysis. *Addiction*, 117(12), 2972–2985.
<https://doi.org/10.1111/add.15952>
- Björk, A. (2018). Reconsidering critical appraisal in social work: choice, care and organization in real-time treatment decisions. *Nordic Social Work Research*, 9(1), 42–54.
<https://doi.org/10.1080/2156857X.2018.1475299>
- Burr, V. (2015). *Social constructionism* (3rd ed.). Routledge.
<https://doi.org/10.4324/9781315715421>
- Dowling, N., Suomi, A., Jackson, A., Lavis, T., Patford, J., Cockman, S., Thomas, S., Bellringer, M., Koziol-McLain, J., Battersby, M., Harvey, P., & Abbott, M. (2014). Problem gambling and intimate partner violence: A systematic review and meta-analysis. *Trauma, Violence, & Abuse*, 17(1), 43–61. <https://doi.org/10.1177/1524838014561269>
- Ds 2015:48. *Förebyggande och behandling av spelmissbruk* [Prevention and treatment of gambling problems].
<https://www.regeringen.se/rattsliga-dokument/departementsserien-och-promemorior/2015/10/ds-201548/>
- Edman, J., & Berndt, J. (2017). From boredom to dependence: The medicalisation of the Swedish gambling problem. *Nordic Studies on Alcohol & Drugs*, 33(1), 81–110.
<https://doi.org/10.1515/nsad-2016-0006>
- Finegan, E. (2012). Discourses in the language of the law. In Handford, M., & Gee, J.P. (Eds.). (2012). *The Routledge Handbook of Discourse Analysis* (1st ed.) (pp. 482–493). Routledge. <https://doi.org/10.4324/9780203809068>
- Forsström, D. & Samuelsson, E. (2018). *Utbud av stöd och behandling för spelproblem. En studie om utmaningar inför förtydligt ansvar i lagstiftningen*. [Support and treatment for gambling problems. A study on the challenges of clarifying responsibility in the Swedish legislation.] Research Reports in Public Health Sciences, Stockholm University, 2018:1.
<https://doi.org/10.17045/sthlmuni.6015458.v1>
- Forsström, D. & Samuelsson, E. (2020). *Utbud av stöd och behandling för spelproblem. Uppföljning av förtydligt ansvar i lagstiftningen*. [Support and treatment for gambling problems. A follow-up report of clarified responsibility in the Swedish legislation.] Research Reports in Public Health Sciences, Stockholm University, 2020:1.
<https://doi.org/10.17045/sthlmuni.12497396>
- Fraser, S. (2016). Articulating addiction in alcohol and other drug policy: A multiverse of habits. *International Journal of Drug Policy*, 31, 6–14.
<http://dx.doi.org/10.1016/j.drugpo.2015.10.014>
- Fridström Montoya, T. (Ed). (2022). *Juridik för socialt arbete* [Social Work Law] (4th ed.). Gleerups.
- Håkansson, A., Karlsson, A. & Widinghoff, C. (2018). Primary and secondary diagnoses of gambling disorder and psychiatric comorbidity in the Swedish health care system—A nationwide register study. *Frontiers in Psychiatry*, 9, 426.
<https://doi.org/10.3389/fpsy.2018.00426>
- Håkansson, A. & Widinghoff, C. (2020). Over-indebtedness and problem gambling in a general population sample of online gamblers. *Frontiers in Psychiatry*, 11, 7.
<https://doi.org/10.3389/fpsy.2020.00007>
- Hancock, L., & Smith, G. (2017). Critiquing the Reno Model I-IV international influence on regulators and governments (2004–2015) – the distorted reality of “responsible gambling”. *International Journal of Mental Health and Addiction*, 15(6), 1151–1176.
<https://doi.org/10.1007/s11469-017-9746-y>
- The Health and Social Care Inspectorate (2015). *Tillsynsrapport. De viktigaste iakttagelserna inom tillsyn och tillståndsprövning verksamhetsåret 2015* [Inspection report. The most important observations within supervision and permit evaluation for the fiscal year 2015].
<https://www.ivo.se/globalassets/dokument/publikationer/rapporter/rapporter-2016/tillsynsrapport-de-viktigaste-iakttagelserna-inom-tillsyn-och-tillstandsprovning-verksamhetsaret-2015-rapport.pdf>
- Heiskanen, M. & Egerer, M. (2018). The conceptualisation of problem gambling in social services. *Nordic Social Work Research*, 9(1), 29–41.
<https://doi.org/10.1080/2156857X.2018.1426625>
- Hofmarcher, T., Romild, U., Spångberg, J., Persson, U., & Håkansson, A. (2020). The societal costs of problem gambling in Sweden. *BMC Public Health* 20, 1921.
<https://doi.org/10.1186/s12889-020-10008-9>
- Hydén, H. (2002). *Rättssociologi som rättsvetenskap* [Sociology of law as jurisprudence]. Studentlitteratur.
- Järvinen, M., & Andersson, D. (2009). The making of the chronic addict. *Substance Use & Misuse*, 44(6), 865–885.
<https://doi.org/10.1080/10826080802486103>
- Karlsson, A., & Håkansson, A. (2018). Gambling disorder, increased mortality, suicidality, and associated comorbidity: A longitudinal nationwide register study. *Journal of Behavioral Addictions*, 7(4), 1091–1099.
<https://doi.org/10.1556/2006.7.2018.112>
- Lancaster, K., Treloar, C., & Ritter, A. (2017). ‘Naloxone works’: The politics of knowledge in ‘evidence-based’ drug policy.

- Health, 21(3), 278–294.
<https://doi.org/10.1177/1363459316688520>
- Livingstone, C., & Rintoul, A. (2020). Moving on from responsible gambling: A new discourse is needed to prevent and minimise harm from gambling. *Public Health*, 184, 107–112. <https://doi.org/10.1016/j.puhe.2020.03.018>
- Loy, J. K., Grüne, B., Braun, B., Samuelsson, E., & Kraus, L. (2018). Help-seeking behaviour of problem gamblers: a narrative review. *SUCHT*, 64(5–6), 259–272.
<https://doi.org/10.1024/0939-5911/a000560>
- Manthorpe, J., Norrie, C., & Bramley, S. (2018). Gambling-related harms and social work practice: Findings from a scoping review. *Practice*, 30(3), 187–202.
<https://doi.org/10.1080/09503153.2017.1404563>
- Moore, D., & Fraser, S. (2013). Producing the “problem” of addiction in drug treatment. *Qualitative Health Research*, 23(7), 916–923.
<https://doi.org/10.1177/1049732313487027>
- National Board of Health and Welfare [NBHW] (2017). *Socialtjänstens och hälso- och sjukvårdens ansvar vid spelmissbruk* [Social services and healthcare responsibilities for gambling problems].
<https://www.socialstyrelsen.se/publikationer/socialtjanstns-och-halso--och-sjukvardens-ansvar-vid-spelmissbruk--meddelandeblad-2017-10-32/>
- National Board of Health and Welfare [NBHW] (2018). *Behandling av spelmissbruk och spelberoende* [Treatment of gambling abuse and addiction].
<https://www.socialstyrelsen.se/publikationer/behandling-av-spelmissbruk-och-spelberoende--kunskapsstod-med-rekommendationer-till-halso--och-sjukvarden-och-socialtjansten-2018-12-5/>
- National Board of Health and Welfare [NBHW] (2021). *Handläggning och dokumentation – handbok för socialtjänsten* [Administration and documentation – manual for social services].
<https://www.socialstyrelsen.se/publikationer/handlaggnig-och-dokumentation--handbok-for-socialtjansten-2021-12-7658/>
- Prop. 2016/17:85. *Samverkan om vård, stöd och behandling mot spelmissbruk* [Collaboration on care, support, and treatment for gambling problems].
<https://www.regeringen.se/rattsliga-dokument/proposition/2017/02/prop.-20161785>
- Reith, G. (2007). Gambling and the contradictions of consumption. A genealogy of the “pathological” subject. *American Behavioral Scientist*, 51(1), 33–55.
<https://doi.org/10.1177/0002764207304856>
- Reith, G. & Dobbie, F. (2012). Lost in the game: Narratives of addiction and identity in recovery from problem gambling. *Addiction Research & Theory*, 20(6), 511–521.
<https://doi.org/10.3109/16066359.2012.672599>
- Roger, J. (2013). Problem gambling: A suitable case for social work? *Practice*, 25(1), 41–60.
<https://doi.org/10.1080/09503153.2013.775234>
- Rossol, J. (2001). The medicalization of deviance as an interactive achievement: The construction of compulsive gambling. *Symbolic Interaction*, 24(3), 315–341.
<https://doi.org/10.1525/si.2001.24.3.315>
- Sackett, D.L., Strauss, S.E., Richardson, W.S., Rosenberg, W., & Haynes, R.B. (2000). *Evidence-based medicine: How to practice and teach EBM* (2nd ed.). Churchill Livingstone.
- Samuelsson, E. & Cisneros Örnberg, J. (2022). Sense or sensibility – Ideological dilemmas in gamblers’ notions of responsibilities for gambling problems. *Frontiers in Psychiatry*, 13, 953673.
<https://doi.org/10.3389/fpsy.2022.953673>
- Seear, K., & Fraser, S. (2014). The addict as victim: Producing the ‘problem’ of addiction in Australian victims of crime compensation laws. *International Journal of Drug Policy*, 25(5), 826–835.
<http://dx.doi.org/10.1016/j.drugpo.2014.02.016>
- Selin, J. (2016). From self-regulation to regulation – An analysis of gambling policy reform in Finland. *Addiction Research & Theory*, 24(3), 199–208.
<https://doi.org/10.3109/16066359.2015.1102894>
- SFS 2001:453. *Socialtjänstlag* [Social Services Act].
https://www.riksdagen.se/sv/dokument-och-lagar/dokument/svensk-forfattningssamling/socialtjanstlag-2001453_sfs-2001-453/
- SFS 2017:30. *Hälso- och sjukvårdslag* [Health and Medical Services Act]. https://www.riksdagen.se/sv/dokument-och-lagar/dokument/svensk-forfattningssamling/halso-och-sjukvardslag-201730_sfs-2017-30/n
- Stenius, K., & Storbjörk, J. (2021). When the organization is a problem: an empirical study of social work with substance use problems in more or less NPM-influenced Swedish municipalities. *Nordic Social Work Research*, 13(1), 36–49.
<https://doi.org/10.1080/2156857X.2021.1907613>
- Stoor, J.P.A., Eriksen, H.A. & Silviken, A.C. (2021). Mapping suicide prevention initiatives targeting Indigenous Sámi in Nordic countries. *BMC Public Health*, 21, 2035.
<https://doi.org/10.1186/s12889-021-12111-x>
- Swedish Courts (2020, November 20) Supreme Administrative Court. <https://www.domstol.se/other-languages/english/>
- Ringbom, T. (2022). *Utvärdering av omregleringen av spelmarknaden* [Evaluation of the reregulation of the gambling market]. The Swedish Agency for Public Management.
<https://www.statskontoret.se/publicerat/publikationer/publikationer-2022/utvardering-av-omregleringen-av-spelmarknaden--slutrapport/?publication=true>

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BOOK REVIEW

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Rob Aitken

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Book Review

Unger, Douglas. *Dream City*. Las Vegas: University of Nevada Press, 2024. 356 pp. ISBN:9781647791650

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The relationship between gambling and finance or, for that matter, between critical gambling studies and critical finance studies, feels at once foundational to both yet strangely relegated to the background. The role of gambling in finance has become, itself, something of what Marieke de Goede has described as the 'excess', a remainder that is both separate from finance (policed in legal and cultural lines that separate finance and gaming) and yet, it remains a ghost that continues to haunt. Despite efforts to contain it, the 'excess' of finance continues to rupture into the present and undermine any easy claim that the financial world has overcome the myriad threats to its sacred commitments of rationality, efficiency and technocratic managerialism. The 'excess,' de Goede argues (2009, p. 296), "is not properly part of the markets, but that which has crossed a certain line of normality, morality or rationality... when normal... financial markets morph into wild zones of irrationality, exuberance or... toxicity." (de Goede, 2009, 296)

The tension between finance and its threatening proximity to excessive 'wild zones of irrationality' takes centre stage in Douglas Unger's *Dream City*. Unger is most well-known for his Pulitzer-finalist *Leaving the Land* (1984), a novel about the corporate incursion into everyday

American farming lives, and the uneven struggle to resist that incursion. Like *Leaving the Land*, *Dream City* narrates an intimate sense of place, the rhythm and senses of an experience that can't be divided from the location it occupies. The places staged in both novels are not merely or even primarily geographical coordinates as much as complex mediations of space and ideas, affinities built around landscape and discourse. These are places that "can be imagined," as Doreen Massey puts it (1994, p. 154), "as articulated moments in networks of social relations and understandings." The social relations conjured in *Dream City* are found in Las Vegas; a place both textured and empty, dynamic—in constant flux—and yet, also knowable, at least as seen through the life and career of C.D. Reinhart, a failed actor, now fledgling executive with Pyramid Resorts, a casino operator that floats, like the city itself, on various waves of growth and retraction. Reinhart's career, and Pyramid's various efforts at transformation, are echoes of a city itself in complicated departure from its own insular ecosystem (legacy casinos fixed in the Las Vegas landscape, the power and idiosyncracies of local patriarchs) to a world of gambling dominated by investors with a global reach and inhabited by the impersonal calculative logic of Wall Street. Reinhart navigates

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this world of 'shifting social relations and understandings' in an arc that charts his ascendancy up Pyramid's executive chain, a grappling with marriage and children, and a never quite resolved ethical debate about what exactly Las Vegas is and how it relates to the world around it.

In lieu of answers, Reinhart moves between the different kinds of dreams that narrate the story of Las Vegas. This includes a variant of the generic 'American dream', a reference to the early moments of Reinhart's Las Vegas, an economy of recession and growth. This economy, Reinhart's nostalgia tells us, is a frontier of opportunity available to all. "Losers," Unger writes (p. 79), "were welcome here... Anyone who had failed elsewhere and could just *get* here could find a job in construction, the hotel and service industries or the professions." This part of the novel is a kind of working-class prism—it opens with the death of a construction worker at the site of an expansive new casino build—and gambling as a kind of distillation of these possibilities. Gambling, notes Reinhart in a memory of this earlier Las Vegas (p. 120) is "a reach for improbable hope," a kind of "luxury of hope" and a "focus on the game, for as long as it lasts, for a good long while, or so they hope."

This nostalgic dream is eventually supplanted by a larger one animated by a kind of financialization of Las Vegas and the gambling world it hosts. The older world of local bosses, construction unions and the grounded hope for the elusive payout is replaced by networks of global investors, large pools of faceless capital and a transformation of the city into something more generic, at least to Reinhart's eyes. As he narrates it, this transformation is a collision between finance and gambling and a confrontation between old and new. And in this collision, Las Vegas changes in ways that seem to take on the immateriality of finance, the sense that finance—ephemeral and fleeting—occupies a world of its own spectral making. As Wall Street cements its grip on Las Vegas, as the strip

becomes more disciplined and responsive to quarterly market calls, Las Vegas becomes deposited in a kind of unreality. Drawing on long-established ways of figuring finance as fictitious or fantastical, Unger conjures another kind of dream for the city, a fantasy of detachment and simulation. For Reinhart, the new unreal Las Vegas reaches its apex in the immediate wake of 9/11 when it becomes New York, a replica of the city whose financial power it now channels:

Overnight, in front of the New York-New York Hotel Casino, on the sidewalk and along a low wall, people lit votive candles lined up in rows ten deep along the sidewalk near the replica NYFD fireboat at the foot of the structural foam statue of Lady Liberty. Arrangements of flowers began to appear in great mounds under hand-painted banners reading: *We Miss you!*, and *9/11 Heroes!*... Cards and notes for the dead and missing from the Twin Towers and the Pentagon multiplied into a messy but impressive display...folks driving in from L.A., San Francisco, Denver, Albuquerque, one from as far away as Fargo, North Dakota, to lay wreaths in honor of the first responders and others who had died... as if that ersatz Manhattan skyline of a casino was as close to the real New York City as they could travel to or imagine... the growing memorial in front of the New York-New York... confirmed how much Las Vegas had succeeded in projecting its illusion more successfully than anyone had ever dreamed: representation had become reality. (p. 151-152)

Las Vegas is a site of excess—Reinhart's key interlocutor, Greta Olsson, a lone female executive in the changing corporate world, is energized by indulgence, alcohol, sex, risky and aggressive maneuvering. But in Unger's rendering, it also becomes the excess—and the echo—of New York; both its pretended contrast

and its most obvious substitute. In doing so, he raises questions about finance and gambling, about the excess that marks their point of connection and distinction. Is New York the source of Las Vegas' excessive indulgence or only its reflection? Is the casino the emblem of Las Vegas or a marker of the financialized economy writ large? Or both?

The dreams that make up the city are, in ultimate form, left ambiguous. If, as Massey teaches us, place is not so much a bounded area, but a an "open and porous network" (Massey 1994, p. 121), then Las Vegas is a place reshaped as ideas, capital, bodies of all kinds, hope and risk cross its porous edges. Las Vegas, at least as told by Unger, also gives us an agenda for thinking finance through gambling, not just as the 'excess' of/for each other but as conditions of possibility and worlds in constant porous collision.

References

- de Goede, M. (2009). Finance and the Excess. The Politics of Visibility in the Credit Crisis. *Zeitschrift Für Internationale Beziehungen*, 16(2), 299–310.
<http://www.jstor.org/stable/40844162>
- Massey, D. (1994). *Space, Place, and Gender* (NED-New edition). University of Minnesota Press.
<http://www.jstor.org/stable/10.5749/j.ctttw2z>

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