

A review of Returned and Services League venues operating electronic gambling machines in Victoria, Australia and the level of funding contributed to veterans

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Abstract

Objective: Globally, funding ‘good causes’ is a legitimisation tactic for gambling operations. This research aimed to determine if an Australian system allowing tax concessions to not-for-profits (NFPs) meets its primary intention of funding community purpose.

Methods: Not-for-profit (NFP) venues operating electronic gaming machines (EGMs) in the state of Victoria must submit records to the gambling regulator showing contribution to community purposes. The community benefit statements (CBS) of licensed Returned and Services League (RSL) venues were analysed, with an initial survey of the years 2010-19 and a more detailed analysis of the years 2017-19.

Results: Veteran support constituted less than 10% of the total community contributions claimed, or 1.5% of electronic gaming machine (EGM) user losses. On average, business expenses exceeded the claims for veteran support by 12:1. Contributions for addressing gambling-related harm represented less than 0.002% of recorded claims.

Conclusions & Implications for public health: This research demonstrates that the provision of charitable services derived from gambling revenue is very modest amongst Australia’s principal veteran’s organisation. Deficiencies in harm prevention and minimisation reinforce the need for changes to community benefit schemes. Regulatory reforms emphasising the vulnerability of veterans to gambling harm are required to ensure that this population is better protected.

Key words: gambling regulation, electronic gambling machines, community benefit schemes, veterans, public health

Introduction

For more than a decade, Australia’s total annual gambling expenditure has surpassed \$20 bn, peaking at \$31.46 bn in the 2022-2023 reporting period.¹ High-risk gambling is associated with illegal substance misuse and depressive tendencies, homelessness, financial difficulties, and family violence.²⁻⁷ Despite the far-reaching social and financial costs, gambling products are promoted as a legitimate entertainment pastime.⁸ However, as currently regulated, the associated harms of gambling arguably exceed the perceived benefits, rendering improved regulation of gambling a public health imperative.⁹⁻¹³

The gambling industry, governments and others with a vested interest have been successful in legitimising gambling’s continued accessibility and expansion, establishing roadblocks to improved regulatory control.^{8,14-17} Apparent acts of philanthropy and support of ‘good causes’ are utilised to divert attention away from the adverse aspects of this harmful product.^{10,17,18} Such diversionary tactics, evident with other harmful consumption products, including alcohol and highly processed foods, support normalising their sale and consumption.¹⁷ This is a global phenomenon. For example, operators of electronic gambling machines (EGMs) in New Zealand must be non-commercial entities directing gambling proceeds to community or other mandated causes.¹⁹ In Norway, the government uses

Abbreviations

CBS, Community Benefit Statements; EGM, Electronic Gambling Machines; NFP, Not for Profit; RSL, Returned and Services League.

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proceeds from gambling to support not-for-profit (NFP) organisations.²⁰ There is danger that such arrangements induce dependency by charitable organisations and other community groups on commercial gambling activity.²¹ Such dependency may hinder public health reform efforts, impose reputational or ethical damage on affected charities or 'good causes', or undermine the original purposes for which such organisations may have been established.²²

Some NFP organisations in certain Australian jurisdictions have integrated various forms of gambling into their operations. Subject to regulation and appropriate licensing, EGMs may operate at certain NFP venues. Currently, about half of Australia's annual gambling losses are from EGMs, and between 51% and 57% of gambling problems are associated with these.²³ Regulatory requirements commonly mandate community donations, which effectively serves to normalise and support the credibility of gambling operators.^{10,24}

In some jurisdictions, licensed NFP venues are eligible for tax exemptions or deductions subject to allocating a prescribed amount of the venue's net gambling revenue to community purposes. Legislated community benefit schemes (CBS) generally set broad guidelines and parameters specifying purposes and activities that constitute such community benefits. Venue operators determine recipients of their contributions, and thus determine their own priorities. Like Australian schemes, the New Zealand community benefit scheme linked to gambling societies operates on a similar premise.¹⁹ Previous research has identified that a modest proportion of the amounts recorded via the CBS go directly to charitable purposes.^{10,25} For example, a review of records of a cross-section of licensed venues in the state of Victoria determined that 4.5% of claims of expenditure ('claims') were attributable to charitable and philanthropic purposes, while more than 75% was allotted to operational expenses under the scheme.¹⁰ This sharp contrast could be in part because the scheme does not prescribe how venues allocate their contributions between direct contributions to the community and indirect contributions such as business costs. That research was limited to licensed sports-focused venues. Excluded from the review were NFPs focused on community-based cultural or social opportunities, such as Returned and Services League (RSL) venues.

Returned and Services League

Support for the provision of health and welfare services to returned service personnel has been in part provided via the establishment of private clubs. Established during the first world war, now known as the Returned and Services League (RSL), these clubs are incorporated under an act of parliament in each Australian state. While other ex-service organisations (ESOs) operate in Australia, RSLs are identified as the country's leading veterans' organisation. As a widely respected charity, RSLs are honoured for the important role they are perceived to play in the community, particularly for their support of ex-services personnel and their families.²⁶

In 2021, the RSL national executive reported that more than \$13.3 m was expended on veteran welfare services; more than 66,000 hours of support, community and wellbeing services via a network of 1,135 sub-branches; and more than 370,500 work hours advocating for veteran compensations.²⁷ In the same period, RSLs conducted more than 2,500 commemorative events. In some Australian jurisdictions, in addition to performing the required obligations for an RSL, some

clubs trading under the RSL brand have diversified into commercial hospitality operations including gambling. Many venues incorporated under the RSL banner boast major hospitality developments, operating the equivalent of mini casinos.²⁵ The RSL has a complex structure, with RSL Australia noting that in relation to licensed venues:

Some RSL clubs are directly linked to the League and some are not. This differs from state to state—for example, most RSL clubs in New South Wales do not 'belong' to the RSL but are separate entities, whereas in Victoria all RSL clubs are licensed RSL sub-branches, owned by the RSL.²⁷

In comparison to the general population, Australian veterans record higher rates of problematic gambling.²⁸ Regardless of the divergent connections the licensed clubs may have with the RSL, there is an argument that any ties to gambling, and more specifically high-risk EGMs, run counter to their position as a benchmark ESO holding a critical role in supporting veteran health and well-being.²⁹

The RSL's constitutional standards require that most of their community support be directed to the ex-services community.³⁰ According to RSL Victoria, gambling activity has 'enabled the RSL to undertake very extensive welfare activities across its RSL sub-branch network'.^{31(p7)} There is, however, debate about the extent to which some licensed RSLs adequately support veteran welfare. Using a New South Wales (NSW) RSL as a case study, Simpson-Young discussed the diminishing importance placed on initiatives supporting veterans and the 'loosening connection' with the club as veterans grow older and a focus on corporate operations, such as gambling, takes hold.^{32(p115)} Previous investigations have also questioned the charitable claims of licensed venues affiliated with RSLs, including a predominance of contributions that commemorate fallen over living veterans.²⁹ Support to veterans, both financial and social, is now, according to Brown, overshadowed by allocating significant funding to memorials that perpetually evoke the memory of enlisted personnel long since departed.²⁹

Multiple examples of compliance breaches and acts of misconduct by officers within the RSL network across multiple jurisdictions also exist. For example, separate investigations into compliance issues of RSL charitable operations in multiple Australian states have been initiated in recent years. Reports of significant compliance breaches of RSL executive branches in New South Wales, Queensland, South Australia, and Victoria, have now been documented.^{33–38} Reports of malpractice related to patron duty of care are also recorded.³⁹

Notwithstanding these criticisms, the RSL's constitutional standards and the 'assumption of their intrinsic contributions to the community', suggests RSLs are steadfast funders of the veteran community.^{40(p74)} On that basis, we hypothesised that extensive community support would be reflected in the CBS records of RSL venues operating EGMs in Victoria, Australia.

The research we report in this study seeks to determine the extent of direct contributions to the veteran community evident in records submitted by licensed RSL clubs to a government regulator. This research extends analysis reported in Francis and Livingstone and aims to determine if criticisms noted in other findings remain relevant.^{10,25,29} Specifically, we sought to identify answers to the following questions as they relate to the CBS records published by RSL-licensed clubs in Victoria:

1. What level of contributions are attributed to supporting the health and well-being of living veterans and their families?

2. What level of contributions are attributed to commemorating fallen veterans?
3. What level of contributions are attributed to services addressing gambling-related harm.
4. Do findings of minimal direct contributions, such as those of sports-focused NFP licensed venues,¹⁰ also apply to contributions of RSL EGM venues?

Claiming that gambling is a source of significant community support is a global practice. It is used frequently to justify or legitimise gambling operations.^{41–43} From a public health perspective, such legitimisation tactics can impede attempts to adequately address gambling and its adverse health impacts. This study focuses on the specifics of an Australian system for funding community support. However, policy and decision-makers in other jurisdictions are likely to find this research useful in consideration of analogous or alternate approaches to the issue of community support via legalised gambling. For example, New Zealand's equivalent of the RSL, the RSA (The Royal New Zealand Returned and Services Association) similarly have veteran organisations within its network operating EGMs and making decisions on community grant recipients.¹⁹

Methods

Research context

With a population of just over 6.9 million, Victoria is the second smallest state in terms of land size but the second most populated of Australia's eight states and territories. The majority of Australia's gambling is regulated at a state level. EGMs were introduced into the state in 1992. In the first year of EGMs operating in clubs and hotels, total gambling losses surpassed \$1bn. By 2018–2019 (pre-COVID-19 restrictions) EGM losses reached \$2.74bn, representing 21.2% of Australia's total non-casino EGM gambling losses.¹ Victoria operates about 16% of Australia's EGMs, after New South Wales (NSW) (48%) and Queensland (24%).¹ The majority (70%, 26,209) of the Victoria's EGMs operating in licensed clubs and hotels are in metropolitan venues.⁴⁴ By international standards, EGM density, a measure of the machines' saturation within the adult population is extremely high in Australia.^{45,46} Victoria's EGM density ranks 4th in Australia with 5.2 EGMs per 1,000 Victorian adults.⁴⁷ Victoria currently has 235 NFP clubs operating EGMs, with 22% of those RSL sub-branches.⁴⁴ A single-licensed club venue cannot have more than 105 EGM entitlements attached to its venue.⁴⁸ Further, a single club operating multiple venues cannot hold more than 840 EGM entitlements.⁴⁸

Data source

To be eligible for a tax concession, all Victorian NFP licensed club venues record community support claims via completion of a report, lodged annually and published on the regulator's website.⁴⁹ The annual reporting cycle aligns to the Australian taxation reporting period, 1st July to 30th June.

A comprehensive list of items can be claimed as community benefit via the CBS. The scheme divides 24 types of claims across three classifications.⁵⁰ The two principal classifications include various benevolent endeavours, identified as 'direct' benefits (16 claim types), and business operating expenses, identified as 'indirect' benefits (5 claim types). The claims allowable in the first classification include any donations, gifts or sponsorships made to residents of Victoria. Under

the second classification, the allowable purposes include business operating costs.

Venue operators record the total amount for any of the 24 types of claims applicable to their business. If there are multiple amounts of expenditure attributable within a claim type, the combined total is recorded on the CBS. To provide clarity on the specific nature and the intended beneficiaries of claims, a description of the purpose for each individual claim is recorded on an attached schedule.

Data analysis

For this research, analysis was undertaken in two parts. Initial analysis focused on records across a ten-year timeframe. Data for the period 2009 to 2019 were adjusted for inflation (2018–2019 values), using the weighted average of eight capital cities consumer price index (CPI).⁵¹ In this first round of analysis, we aggregated amounts recorded against the three principal classifications of claims to determine the distribution of contributions between classifications.

To allow for a more thorough review of the types of claims recorded, specifically the evidence of veteran support, we undertook more detailed analysis of a three-year time series of the CBS records from all licensed Victorian RSL sub-branches. The years selected were 2016–17 to 2018–19, inclusive. These years were chosen because they were representative of the patterns of contribution and revenue observed in the ten-year series, were relatively contemporary, and to avoid disruption caused by pandemic restrictions after 2019. Fifty-eight venues operated in the 2016–17 reporting period and 57 venues in the two subsequent years. This principal analysis is the focus of this paper.

For the principal analysis, the type and value of claims of community contributions were determined for each licensed RSL that submitted a statement in the three years under review. This involved the adoption of a four-stage coding process, completed manually in a Microsoft Excel spreadsheet (see Table 1).

Individual lines of data across the three years of CBS schedules were reviewed and allocated an initial identifier based on the claim's main purpose. The initial coding by the first author produced 124 specific identifiers with the final review, allocating each line of data to one of eight codes. The second author conducted a reliability check of the initial identifiers and the final codes. This final coding framework, similar to that adopted in Francis and Livingstone¹⁰ included *donations; gambling expenses; gambling related harm measures; business operating costs, subsidised goods and services and volunteers*. The final two codes were unique codes aligned to RSLs: *commemorative* and *veteran/welfare* Support. The iterative coding process allowed for a granular record of the types of claims and the opportunity to isolate and break down the specific types of expenditure within the final group of codes.

Results

The first round of analysis focused on the ten-year period 2009–2019. In that period, \$579.5 m. in real terms was recorded as community contributions, representing 27.6% of the combined net gambling revenue (i.e. losses incurred by EGM users) of \$2,097 m. for that period. The greatest proportion of contributions (79%) claimed were business operating expenses, classified as 'indirect' community contributions. Claims classified as 'direct' contributions (i.e. claims of donations, sponsorships, or other types of support to veterans or the

Table 1: Example of coding framework.

CBS Purpose ^a	CBS schedule description ^b	1st review code	2nd review code	Consolidated code	Final code
Advice, support and services provided by the RSL.	Welfare bus	Veteran/welfare transport support	Veteran/welfare transport support	Veteran/welfare transport support	Veteran/welfare support
	Welfare officer	Veteran/welfare administration	Veteran/welfare administration	Veteran/welfare administration	Veteran/welfare support
	Funeral expenses	Funerals & wakes	Funerals & wakes	Funerals & wakes	Veteran/welfare support
The cost of any subsidy for the provision of goods and services (excluding alcohol).	Room hire subsidy to local communities	Room hire	Room hire	Subsidised goods & services	Subsidised goods & services
(Donation) any educational purpose	Donations / gifts / sponsorships	Donation education	Donation education	Donations	Donations
(Donation) the provision of services and assistance for young people	Projects for under privilege youth	Donation youth	Donation youth	Donations	Donations
Operating costs	Bar expenses	Bar expenses	Bar & bistro supplies & expenses	Operating costs	Operating costs
	Funeral expenses	Funerals & wakes	Funerals & wakes	Funerals & wakes	Veteran/welfare support
	Rent	Rent	Rent	Administration	Operating costs
	Welfare/charitable expenses	Veteran/welfare administration	Veteran/welfare administration	Veteran/welfare administration	Veteran/welfare support
	Accounting fees	Accounting fees	Professional & consulting fees	Administration	Operating costs

CBS, community benefit statements; RSL, Returned and Services League.

^aCBS Purpose is directly related to the 24 allowable purposes for the expenditure claim listed on the official community benefit scheme documentation.

^bThe free text description recorded on the CBS schedule by the venue operator as it relates to one of the 24 purposes.

wider community) amounted to \$120.6 m., 21% of all community benefit claims.

The focus of this report is the primary analysis of three years of detailed data. This targeted analysis of CBS schedules for the period 2016-17 to 2018-19 inclusive showed that the overall pattern of claims was similar to the ten-year series, with business operating costs representing 77% and veteran-related purposes (i.e. veteran welfare and commemorative initiatives) accounting for 7.5% of the claims recorded. Reported below is a summary of the results as they relate to the claims attributed to the support of living veterans and claims for gambling-related harm prevention.

Claims attributed to support of living veterans

In the three-year period to June 2019, \$178.5 m. was recorded as community contributions. In the same period, expenditure on EGMs in licensed RSLs totalled \$627.6 m. Table 2 shows the total record of claims by RSL clubs as per the 24 assigned categories. Despite two of the 24 officially allowable claim types specifically dedicated to claims supporting veteran welfare; veteran-related claims are commonly recorded across multiple categories. The free text detail on the CBS schedules should clarify the specific purposes and /or beneficiaries of the recorded claims. With some venues failing to record any additional information or recording ambiguous data, the identification of support for veteran related purposes is further complicated.

The total claims against the two RSL-specific categories totalled \$4.7 m., representing 2.6% of community contributions claimed by RSLs and 0.17% of gambling expenditure. However, closer analysis of the CBS schedules identified that this \$4.7 m. did not represent all

expenditure allocated to veteran support. Veteran-related support, including, for example, venues subsidising the costs of funerals and wakes, providing welfare support through home and hospital visits, or undertaking home and garden maintenance was identified across several CBS categories. Table 3 provides a summary of the breakdown of the veteran and non-veteran claims. Accounting for records outside of the specific RSL categories, the detailed analysis of the CBS schedules identified that nearly \$10 m. could be attributable to veteran-related support. This higher amount represented 5.5% of the overall contributions claimed and 1.6% of total gambler losses across the three years reviewed.

Over the three-year period, on average, 27 out of 50 licensed RSL sub-branches recorded amounts totalling less than \$50,000 annually for initiatives supporting veteran causes. A further breakdown identified that, of those 27 venues, 70% (19 venues) attributed, on average, less than \$30,000 annually to veteran-related causes. Claims attributed to venue operating costs exceeded veteran support by a factor of 14.

For nearly 30% of venues, annual operating costs claimed were between \$1 m. and \$4 m. In one case, in the 2018-19 reporting period and RSL recorded \$66,000 for veteran-related support and \$950 on claims for commemorative purposes while claiming \$3.3 m. in operating costs. In another example, one RSL's operating costs of over \$4.1 m. across the three years reviewed, represented 86.2% of total recorded claims. For this RSL, funds related to veterans represented less than 1% of its total claims of community contributions.

The aggregate amount that could be attributed to direct donations supporting veterans across all the licensed RSL venues in the three years reviewed totalled \$423,265. For a large proportion (88%) of these donations, the beneficiary or the specific purpose of the

Table 2: Total claims by RSL licensed clubs as per 24 CBS categories assigned by the VGCCC (2016-2019).

	2016-2017 \$	2017-2018 \$	2018-2019 \$	TOTAL \$	3 Year total %
Business operational expenditure^b	43,873,680	45,990,561	47,994,796	137,859,037	77.22%
Operating costs (e.g. wages, admin expenses, cleaning)	42,000,869	44,145,517	46,493,459	132,639,845	74.30%
Financing costs (including principal and interest)	1,246,437	1,348,206	919,358	3,514,001	1.97%
Capital expenditure	615,210	259,388	272,335	1,146,933	0.64%
Buildings, plant or equipment (> \$10,000 per item)	11,164	218,095	286,830	516,090	0.29%
Retained earnings accumulated during the year	-	19,353	22,814	42,167	0.02%
Subsidised goods and services (excluding alcohol)^c	5,408,486	5,808,399	6,466,386	17,683,271	9.91%
Volunteer related claims^b	3,726,235	3,366,064	3,422,867	10,515,166	5.89%
Voluntary services provided by club to another person in the community (rate of \$20ph)	3,602,643	3,275,556	3,318,861	10,197,060	5.71%
Reimbursement of expenses incurred by volunteers.	123,592	90,509	104,006	318,106	0.18%
Donations, gifts and sponsorships^b	2,194,359	2,172,601	2,421,768	6,848,515	3.80%
Sporting or recreational purposes	745,347	987,854	1,151,428	2,884,629	1.62%
Services and assistance for the aged	516,488	390,121	437,162	1,343,771	0.75%
Other philanthropic or benevolent purpose	383,777	307,840	356,628	1,048,245	0.59%
Educational purposes	286,762	264,321	236,764	787,847	0.44%
Services and assistance for young people	88,229	116,427	120,801	325,457	0.18%
Health services or care	87,812	69,973	57,737	215,522	0.12%
Housing assistance for disadvantaged persons	39,814	35,191	40,750	115,755	0.06%
Protection and preservation of the environment	46,129	874	20,498	67,501	0.04%
Assistance to relieve distress caused by natural or other disasters	5,512	1,020	26,537	33,069	0.02%
Relief of poverty	8,190	8,275	9,429	25,894	0.01%
Prevention & treatment of problem gambling and drug and alcohol addictions	416	408	-	824	0.00%
Advice, support & services provided by the RSL to ex-service personnel, carers, families^{b,d}	1,358,347	1,444,742	1,938,324	4,741,413	2.66%
The cost of providing and maintaining sporting facilities for use by club members^b	175,471	343,190	117,824	636,485	0.36%
CBS preparation and auditing expenses (maximum value of \$3,000)^b	78,389	74,821	77,872	231,082	0.13%
Responsible gambling measures and activities (excluding those required by law)^b	-	-	2,676	2,676	0.00%
Total	56,814,967	59,200,379	62,442,513	178,517,645	100%

CBS, community benefit statements; RSL, Returned and Services League.

^aVictorian Gambling and Casino Control Commission (VGCCC).

^bIndirect contribution.

^cDirect contributions.

^dRepresents aggregate of the two CBS categories claims by or for RSL purposes Source: VGCCC CBS and Expenditure data 2016-17 to 2018-2019 reporting periods.^{58,59}

donations was not detailed. In the same period, donations distributed to the general community exceeded the claims for which veterans were beneficiaries by 77%. Funds distributed to the general community included, for example, donations to local netball, football, cricket, and bowling clubs and school and university scholarships.

Claims for gambling related harm prevention

Two of the CBS categories specifically relate to harm prevention measures. One applies to any form of donation for the treatment of 'problem gambling' and drug and alcohol addictions, while the second is specific to 'responsible gambling' measures other than those mandated by legislation. An example of measures required by law include the requirement of all venue staff to undertake Responsible Service of Gaming (RSG) training. Any costs associated with the delivery of this training cannot be claimed within the CBS scheme. Four RSL clubs (out of an annualised average of 57 clubs) made claims under the category of harm prevention measures across the three years reviewed. An aggregate of \$3,500 was recorded across the two harm prevention categories, representing less than 0.002% of the total of all claims across the CBS. The amounts pertained to venues discounting the cost of venue hire for third-party providers to

conduct gambling counselling meetings. We found no other claims for support for alcohol or other addictions.

Following interrogation of the descriptions on the CBS schedule, the amount of \$3,500 was adjusted to \$2,735. The minor adjustment was a result of categorisation errors. For example, one venue incorrectly recorded auditing costs of \$1,400 under the category of harm minimisation, while other minor claims related to the venue's recording the subsidising of room hire for gambling counselling meetings by third parties under different categories.

The CBS scheme guidelines prohibit claims related to the promotion or delivery of any form of gambling. TABs (Totaliser Agency Board) operate in each Australian state, facilitating off-course totalisator betting on racing and sports betting. In Western Australia the TAB is owned by the state government. While states such as Victoria have privatised its TAB operations. Some RSL sub branches operate betting options under the TAB brand at the venue. This review found an aggregate \$211,000 for gambling-related expenses. An aggregate of \$85,000 was claimed for TAB expenses by two venues, while the balance (\$126,000) was claimed by four venues for bingo-related expenses. Expenses related to the delivery of these gambling

Table 3: Summary of beneficiaries based on review of CBS schedule (2016-2019) with relevance to RSL licensed clubs.

	2016-17 \$m	2017-18 \$m	2018-19 \$m	3 Year Total	% of CBS (3 yr total)	% of User losses (3 yr Total)
Total CBS	56.8	59.2	62.5	178.5		
Total user losses	205.8	210.0	211.8	627.6		
Total RSL clubs	58	57	57			
Total RSL EGMs	2922	2893	2911			
Summary of CBS claims						
Operating costs	44.0	45.9	48.0	138.0	77.3%	22.0%
Non-veteran beneficiaries						
Subsidised goods & services	5.1	6.0	6.4	17.4	9.8%	2.8%
Donations	2.0	1.8	2.5	6.2	3.0%	0.9%
Volunteer related claims	1.7	1.5	2.1	5.4	2.3%	0.6%
Veteran beneficiaries						
Veteran/welfare support claims	3.5	3.3	3.1	9.9	5.5%	1.6%
Commemorative related claims	0.5	0.6	0.3	1.4	2.0%	0.6%
Gambling related claims						
Gambling expense (e.g. TAB, bingo)	0.0	0.1	0.1	0.2	0.1%	0.0%
Gambling related harm measures	0.0	0.0	0.0	0.0	0.0%	0.0%
Total	56.8	59.2	62.5	178.5	100%	

CBS, community benefit statements; RSL, Returned and Services League; EGMs, electronic gambling machines.

Source: VGCCC CBS and Expenditure 2016-17 to 2018-2019 reporting periods^{58,59}

activities surpassed the total claims for gambling harm prevention measures by a factor of 80.

Discussion

Central to this research was scrutiny of the community benefit records of a specialist group of licensed club venues in Victoria, Australia, to determine if a tax exemption scheme designed for licensed charitable clubs to report expenditure on community benefits is focused on direct community giving. The RSL network in Australia is a largely charitable organisation. In some jurisdictions the RSL lends its reputation to a product (EGM gambling) that is harmful to the public's health. Veterans are known to be susceptible to addictive behaviours, often as a consequence of their traumatic and stressful service histories.⁵² Operating EGMs creates an alibi for making money out of addiction and harm.¹⁰ The rationale for extending the RSLs operations to include highly addictive EGMs is that increased benefits can be provided to the veteran community. The specific focus on the records of licensed RSL venues aimed to determine the degree to which RSLs use this scheme to claim contributions attributed to returned veterans' welfare as prescribed in their constitutional Objects.³¹ Further, given the harms associated with gambling and particularly EGMs, also critical was determining the level of support for services aimed at preventing or treating harm from gambling, and what types of measures addressing gambling related harm (denoted in the CBS guidelines as 'responsible gambling' measures). As with results from the study of sports-affiliated clubs,¹⁰ operating costs constituted most claims by RSLs. On average, business expenses exceeded the claims for veteran support by 12:1. Veteran support constituted less than 10% of the total community contributions claimed, or 1.5% of net gambling revenue. Similar to claims reviewed of licensed NFP sports clubs, contributions for addressing gambling-related harm were minimal, representing less than 0.002% of recorded claims.

In the ten-year period from 2009 to 2019, EGM expenditure in the licensed RSL network in Victoria totalled \$2.097 bn. Even allowing for

licensed club tax requirements, the money generated from gambling for these clubs provides a significant opportunity to fund welfare activities beyond that tabled via the scheme. This study demonstrates that, for one of Australia's most revered charities, the provision of charitable services derived from gambling revenue is relatively modest.

Notwithstanding the significant work undertaken in the veteran community since its inception, criticisms have more recently been levelled at the RSL network, its ties to gambling, and more specifically to EGMs.^{53–55} These criticisms suggest that a focus on gambling may undermine the ability of some RSL sub-branches to provide adequate levels of support for veterans and the wider community.

This analysis of the Victorian scheme included a detailed examination of data over three reporting periods. While this review determined that licensed RSL Sub-Branches do fund various veteran-focused causes, the commitment to the veteran community falls well short of what might be expected from an organisation primarily established to support veterans. Brown's interrogation of the NSW licensed RSL network reached a similar conclusion.²⁹

Research analysing the EGM licensing decisions by Victoria's gambling regulator demonstrated the extent to which RSL gambling license applications were granted based on an almost unquestioned reputation for charitable works.⁴⁰ The CBS records we analysed showed that the claims for venue operating costs overwhelmingly exceeded support for veterans and the community. Further, the extent and nature of recorded operating costs in many instances do not appear to be aligned to the delivery of the RSLs intended charitable purposes, veteran support. Establishing benchmarks for reasonable operating costs for community groups can be difficult given the varying nature of the sector.⁵⁶ The difficulty too lies in the fact that some community organisations, such as RSL sub-branches have adjusted their operational focus towards hospitality and gambling as opposed to charitable endeavours.

As with other licensed NFP venues, charity status affords licensed RSL sub-branches significant tax exemptions. This research has shown that these clubs are claiming venue operating expenses at levels well above expenditure on welfare support to veterans and other community causes. This significantly undermines claims of an overwhelming charitable purpose.

The RSL's constitution stipulates it exists '... for the principal purpose of promoting the interests and welfare of serving and ex-serving men and women of the Australian Defence Force and their dependants...'.³⁰ Following incidents of malpractice, the Australian Charities and Not for Profit Commission (ACNC) has provided regulatory guidance to RSLs.⁵⁷ The ACNC has reinforced that expenses should support delivery of the RSL's stated charitable purposes, regardless of the source of funds. A core issue is that the Victorian Government's scheme guidelines permit venue operators to benefit from a tax reduction simply by claiming capital and operating costs as a predominant form of community contribution. Removing the ability to claim capital and business operating costs, or at the very least limiting the total amount that can be claimed, could be addressed administratively rather than via a complete overhaul of the legislation.¹⁰

Because the propensity for veterans to engage in health harming behaviours is high, organisations established to support them should ensure that such risks are minimised or eliminated. Coping mechanisms to address issues with assimilation post-military service may include alcohol and drug misuse, unsafe sexual practices and high-risk gambling.^{52,58–60} For some military personal and veterans, gambling is a means to dull the consequences of service.⁵² The prevalence and adverse impact of gambling among veterans was identified as a key data gap in a 2018 report profiling Australian veterans.⁶¹ Given this, it would be reasonable to expect licensed RSLs sub-branches to pursue active public health-focused programs aimed at preventing harm or to provide support to those experiencing harm from gambling and other addictions such as alcohol and drugs. Yet, in the reviewed CBS, the paucity of support in relation to harmful addictions is notable. In a submission to a government commissioned report into gambling, the Victorian RSL branch stated that 'In a regulatory sense, RSL sub-branches have always been proactive and at the forefront of best practice in harm minimisation and responsible gaming initiatives'.^{31(p.1)} Support of this claim was not evident in the CBS records of Victoria's licensed RSLs.

Targeted measures to prevent veterans from succumbing to gambling-related harm and treatment services for those already engaging in at-risk gambling behaviours, should be critical inclusions of any relevant health and welfare programs. Venues operating EGMs are required by law to address 'responsible gambling' measures such as staff training or in-venue harm prevention messaging. Victoria's community benefit scheme provides opportunity for venues to demonstrate a commitment to harm prevention beyond the mandated requirements. In the CBS reviewed there was no evidence that licensed RSL venues are conducting harm prevention actions beyond their legal requirements.

This research identified a single RSL claim of \$2,179 for supplying lollies (candy, sweets) for hospital visits, which was only marginally less than the *aggregate* amount recorded for supporting gambling-related harm initiatives across the venues reviewed. Further, the recorded amounts were limited to the act of subsidising venue space for external service providers holding support meetings for gamblers.

The limited support of harm prevention measures is consistent with earlier research highlighting the paucity of such measures across licensed community clubs generally.¹⁰ In recent research investigating veterans transitioning from active service and concerns with gambling problems and suicidality, researchers noted the omnipresence of gambling, including veterans' exposure to EGMs in RSL venues, as a concern.⁶² Rather than helping to combat the possible adverse consequences arising from active service, on the basis of this research, some licensed RSLs are abetting the potential emergence, or exacerbation, of diminished health and wellbeing for its veteran community through the continued operation of EGMs.

Licensed clubs typically record similar types of claims across multiple categories.¹⁰ The descriptions in the CBS schedule should present a clearer view of the specific nature of claims and the funding beneficiaries. However, because schedules often provide limited meaningful detail, grouping multiple types of claims and omitting some information, such clarity is not always achieved. Gaps in the level of meaningful recorded data represents a significant flaw in the scheme.¹⁰ The presence of categorisation errors and amounts claimed for excluding specific purposes, reinforces the lack of oversight by many of the external auditors engaged in preparing and checking the CBS paperwork. The regulator's failure to identify such errors before submission to the public record indicates an absence of an appropriate level of inspection, undermining the overall integrity of the scheme.

The RSL argues that licensing RSL clubs to operate EGMs allows them to better support the health and welfare of veterans. Given this, revenues from EGMs should be primarily expended to accomplish this goal. Victoria's CBS scheme provides an important opportunity for licensed RSL sub-branches to document their commitment to veterans. Having given a balanced assessment of the evidence, this research shows that the overall level of veteran support is much less than ideal and substantially below what should be possible given the gambling revenue available. The scheme also allows an opportunity for validation of the RSL's stated commitment to 'best practice' harm minimisation. Evidence of this was also absent from the records.

The Victorian RSL has recently acknowledged neglect of the welfare needs of more recent veterans and articulated a vision of effecting greater engagement with veterans from the past three decades, including encouraging more participation in RSL activities from veterans serving since 1975.⁶³ To increase levels of veteran support, mandating minimum levels of meaningful contributions directed towards the veteran cohort as part of the CBS guidelines could greatly assist the RSL in meeting this objective and support a public health agenda for improved veteran welfare.

Strengths and limitations

Despite a level of transparency unmatched in other Australian state community contribution schemes, there remain serious flaws with the Victorian scheme. While some of the schedules remained void of detail, constraining attempts to categorise the true purpose of certain claims, every effort has been made to ensure this review depicts an accurate account of the CBS records of RSL sub-branches. However, this study reviewed multiple years of CBS claims across all licensed RSL venues operating EGMs in one Australian state. It reveals regular and consistent patterns of community benefit claims. The data are the best and most detailed available in any Australian jurisdiction.

Conclusion

Community benefit scheme arrangements function as justification or legitimisation for gambling's ongoing and ubiquitous presence. They provide a counter to perceptions of significant harm visited on communities by widespread gambling opportunities.

This review of the licensed RSL network reinforces the systemic failings of community contribution schemes linked to EGMs identified in previous research. Further, this review confirms such schemes represent an excessively inefficient approach to funding community initiatives and causes. If the intended purpose of community support is to be fully realised across all such schemes or arrangements, it is increasingly evident that significant reform is required. As suggested by Francis and Livingstone,¹⁰ reviewing tax arrangements, limiting unwarranted expenditure claims and improving transparency and scrutiny should significantly enhance the effectiveness of this scheme. Further, regulatory requirements mandating effective harm prevention and minimisation initiatives derived from public health principles would assist in improving veteran welfare and reducing gambling-related community harm. Reforms may also help to ensure the overall integrity of the RSL, and other charities dependent on gambling revenue is not further compromised.

Of significant concern for the focus and viability of charitable organisations is the likelihood that managing commercial aspects of gambling operations may assume a priority. This may have an adverse impact on the ability of NFPs to deliver on their core objectives. In the specific case of RSL sub-branches, it may further undermine the ability to adequately deliver on the RSL's constitutional -Objects.

The justification for EGMs operating in RSLs is the ability to better support the veteran community. Yet the evidence outlined in this paper indicates that licensed RSL sub-branches are disbursing modest funding to support the RSL's avowed purposes. As a result, licensed RSLs are failing to adequately meet the high standards with which they are held in the community. This creates a predicament that may cause damage to its reputation and ethical standing. A dependence on gambling revenues for charities and other 'good causes' globally, undermines their original purpose and potentially risks their reputational standing.

Authors' note

All dollar values are in Australian dollars.

Gambling expenditure is defined as the "net amount lost or the amount wagered less the amount won".¹ In the context of this article, the use of the term 'gambling losses', 'EGM losses' or 'losses' equates to total gambling expenditure.

Ethics statement

This study did not require ethics approval as it used publicly available, administrative data.

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Conflicts of interest

The authors declare the following financial interests/personal relationships which may be considered as potential competing interests: LF has contributed to projects that have received funding from non-government organisations for research into multiple aspects of electronic gambling machines, other gambling forms, regulatory reform and existing harm minimisation practices. In 2020 LF was employed as a Gambling and Harm Minimisation Officer at Wyndham City Council, Victoria Australia. LF worked on a project funded by Healthway researching the impact of exposure to gambling marketing on young people in Western Australia. CL has received funding support from the (former) Victorian Responsible Gambling Foundation, the (former) Victorian Gambling Research Panel, and the South Australian Independent Gambling Authority (the funds for which were derived from hypothecation of gambling tax revenue to research purposes), from the Australian and New Zealand School of Government and the Foundation for Alcohol Research and Education, and from non-government organisations for research into multiple aspects of poker machine gambling, including regulatory reform, existing harm minimisation practices, and technical characteristics of gambling forms. He has received travel and co-operation grants from the Alberta Problem Gambling Research Institute, the Finnish Institute for Public Health, the Finnish Alcohol Research Foundation, the Ontario Problem Gambling Research Committee, the Turkish Green Crescent Society, and the Problem Gambling Foundation of New Zealand. He was a Chief Investigator on an Australian Research Council funded project researching mechanisms of influence on government by the tobacco, alcohol and gambling industries. He has undertaken consultancy research for local governments and non-government organisations in Australia and the UK seeking to restrict or reduce the concentration of poker machines and gambling impacts, and was a member of the Australian government's Ministerial Expert Advisory Group on Gambling in 2010-11. He is a member of the Lancet Public Health Commission into gambling, and of the World Health Organization expert group on gambling and gambling harm.

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