THE LAS VEGAS OF THE CARIBBEAN

PROBLEM AND DISORDERED GAMBLING

WHITE PAPER

An Analysis of the lack of Responsible Gambling and the Prevention of Addiction of St. Maarten Locals

Ministry of Public Health Social Development and Labor (VSA)

DEPT. SOCIAL DEVELOPMENT

September 2022 - July 2023

The Las Vegas of the Caribbean

Problem and Disordered Gambling

An analysis of the lack of Responsible Gambling and the Prevention of Addiction of St. Maarten Locals

White Paper

This publication belongs to the Department of Social Development of the Ministry of Public Health, Social Development, and Labor (VSA) of St. Maarten. Its contents are a compilation of various sources and serves as the bases that outlines and addresses problem and disordered gambling on St. Maarten. The opinions expressed in this document are of the Department of Social Development and do not reflect the view of or spoken on behalf of the government. If you wish to use copyrighted material from this document for purposes of your own, you must obtain permission from the copyrighted owner.

Gambling is a disease, an addiction…there is always a loser in the long run.

Executive Summary

The aim of this report is to assess and address the likelihood of problem and disordered gambling on Sint Maarten.

Problem gambling is non-addicted behavior that causes negative consequences for the gambler and others but does not meet the diagnostic criteria for a gambling addiction. **Disordered gambling** (gambling addiction or pathological gambling), on the other hand, is a mental disorder that involves the inability to control or stop gambling, continued gambling despite negative consequences, and experiencing withdrawal symptoms when attempting to reduce or stop gambling (DSM-5, 2022; Morasco et al., 2006).

Presently, as part of our country national package reform, a workgroup has been established and tasked with creating a St. Maarten Gaming Authority (SMGA). The Ministry of Public Health, Social Development, and Labor (VSA) is part of the SMGA-workgroup and provides its trifocal stance on the industry. Moreover, based on the ministry's National Healthcare Ordinance, it is our role to protect the public and those most vulnerable in society from harm. Moreover, VSA is making provisioning for mental health in which all types of addictions will be acknowledged and addressed in policy and legislation.

With this report, Ministry VSA provides nuance within the St. Maarten gambling industry by outlining past and current data in a contextual manner. The key takeaway from this report is that **(1)** gambling addiction is unlike other forms of addiction because its physically unnoticeable, has a secretive nature, and spans across many sectors; **(2)** the socioeconomic impact of gambling comes at a high cost to society, e.g., broken nuclear family, family dysfunction, domestic violence, depletion of household income, decreased work productivity, poverty, financial problems, bankruptcy, homelessness, and crime; **(3)** St. Maarten is not collecting its due from the industry and is losing money; **(4)** the island offers too many gambling opportunities per square capita and does not thoroughly provide responsible gambling and addiction prevention measures in policies and legislation; **(5)** our society consists of many multifaceted aspects that contribute to harmful gambling[1]; **(6)** the magnitude of severity and complexity of problems at hand locally needs to be tackled multisectoral for the sake of data, reform, and regulation.

[1] Harmful gambling is the pattern of gambling behavior that leads to negative consequences, causing harm to the individual and others around them.

Results

Worldwide, research attests that there are two main aspects that contribute to harmful gambling, general risk factors and gambling-specific factors. **General risk factors** are *biological* (age, gender, genetic hereditability, and vulnerability); *psychological* (personality, coping styles, judgement, self-perception, stressors, and trauma); *cultural* (ethnicity, immigrant groups, attitudes, religion, and beliefs); and *social* (status, neighborhood, work environment, etc.). **Gambling-specific factors** are gambling environments, exposure, proximity, participation, setting, types, resources, and interventions.

Our results illustrate that St. Maarten meets most areas that directly contributes to harmful gambling.

The islands' **most vulnerable** are women-headed households with children and sometimes elderly as codependents living on a single income, the youth (young professionals with low starter incomes), and the elderly. Research shows that youths and adult men participate and spend more on gambling than women, but the progression of gambling is more rapid in women especially when problems occur in their lives (Abbott et al., 2018).

Our country's old age dependency ratio is on the rise and **elderly** live on meagre pensions or no income, suffer from chronic diseases, poor nutrition, and live in substandard housing. Abbott et al. 2018 & Riley 2017 explain that seniors gamble due to expanding gambling legalizations, availability of leisure time, loneliness, limited financial resources, disposable income, and decreased cognitive functioning.

Locally, **unemployment is high amongst the ages 25 – 60** due to low educational levels of job seekers, slow (tourism) season, and no jobs in desired industries. **Women are also more unemployed than men** (63.4 % vs. 36.6%), and **overall country-wide educational level is low**. Island wide, the difference in educational levels of the employed versus the unemployed is not significant; 3.5% vs. 3% completed no formal education, 25.3% vs. 34.8% only have primary education, 42.4% vs. 42.9% only have secondary education, 8.4 vs. 7.4% has post-secondary non-tertiary education, and 19.9% vs. 12% has tertiary education.

Studies LaPlante et al. 2011 and Volberg et al. 2010 attest that socioeconomic[2] factors such as limited employment opportunities and social support combined with low educational achievement contributed to increased vulnerability and likelihood of engaging in problem gambling behaviors in adolescents ages 12 – 17, young adults up to 25, and adults.

[2] Socioeconomic: A way of describing people based on their education, income, and type of job.

The **emigration of locals causes workforce brain drain** that positively stimulates the influx of unskilled or semi-skilled **immigrants** who live consciously in poverty. Forty-eight-point-seven percent (48.7%) of the employed population consists of mainly unskilled occupations. Studies have found that immigrant groups have higher rates of gambling due to culture and traditions of their country of origin, post-immigration hardships (e.g., unemployment, language barriers, social isolation, etc.). When ethnicity is considered, Black, Asians, and Hispanics are at higher risk of being disordered gamblers than other ethnicities (Alegria et al., 2009). Additionally, gambling rates increase with at-risk and problem gamblers in professions such as taxi and bus drivers, blue-collar workers, having flexible work hours, those with little physical supervision, and those with access to gambling facilities (Abbott et al., 2018).

Locals are also faced with strenuous social standings. The **housing market is tense**[3] and bifurcated[4], informal rental markets are on the rise, and utilities are expensive. Literature attests that long-lasting housing insecurity contributes to a person's involvement in gambling and other addictive behaviors (Abbott et al., 2018). **Income levels are low and exceed monthly expenses**. Seventy-four percent (74%) of households have a combined income of ± USD 2,777, of which **1 in 5 people** (or 5%) **have no income** at all. Additionally, for 4 consecutive years (2017 – 2021) the St. Maarten population has experienced **stressors** and **traumatic events** of Hurricane Irma, the COVID-19 Pandemic, and economic challenges which has affected their health (physical and mentally) and social standing. Research has shown that gambling increases during periods of natural disasters, high stress, depressive episodes, and or during substance use or abstinence. Stressors such as physical, mental, and economic challenges alter a person's behavior and cognitive processing (Abbott et al., 2018, Riley, 2017). Even non-traumatic experiences such as job loss and discrimination of race or gender, for instance, play a role.

Studies have shown that on a macroeconomic[5] level gambling positively impacts the economy and property prices (Abbott et al., 2018, Clotfelter 1990 & Cotti 2008). However, lottery taxes for instance, disproportionately affect the poor as they spend more of their income on lotteries. When it comes to employment, research shows that casinos either have a moderately positive impact or the impact is considered a short-term success. The microeconomic[6] social cost of gambling is bankruptcy, crime, unpaid debts, decreased work productivity, treatment, and stress on personal relationships.

[3] High demand for (social) housing and but there is limited supply.

[4] Bifurcated: luxury real estate (wealthy foreigners) on one end and low + middle class real estate on the other.

[5] Macroeconomics relates to the branch of economics concerned with large-scale or general economic factors, such as interest rates and national productivity.

[6] Microeconomics relates to the branch of economics concerned with single factors and the effects of individual decisions.

Moreover, unlike other consumer products, socio-politically[7] legal gambling has been influenced by government decisions rather than economic need. Political and economic systems are extremely important in shaping where and how commercial gambling will be offered, as well as which groups are most likely to be labelled as problem gamblers.

It remains to be elucidated whether research or documentation has justified the economic benefits of introducing new gaming licenses to the country throughout the years. Our findings reveal that years of uncollected fees from industry shows that St. Maarten has not been benefiting in that regard. The gambling industry owes the government over NAF 22 million in casino and lottery fees (over 2017 – 2020 and continues to rise to date). It is unclear how much the online gambling industry owes the government. There is little to no data on the existence and operations of online gambling locally.

Since its introduction to the island in the 60s gambling has grown exponentially. Although policies and legislation have existed since inception, they are either not enforced, inconsistently adhered to, lack a thorough practical vision and execution, and have insufficient or no regard for responsible gambling[8] and the prevention of addiction[9]. Examples are the policy that states casinos are not to be located within 50 meters of sensitive buildings such as schools and churches, or the law that prohibits residents from entering casinos for a period of 1 year if they visit more than 6 days in a month. Also, although convenience gambling[10] locations are prohibited by law, they exist.

A local study done 27 years ago reported the presence of disordered gambling amongst St. Maarten residents. At the time, in 1996, when compared to competitive islands (i.e., Bahamas, Puerto Rico, Curaçao, and Aruba) St. Maarten had the highest resident generated Casino revenue of any island in the competitive set. *"The St. Maarten casino industry's reliance on resident-generated play was significant prior to Hurricane Luis, but increased from $203 per person prior to the storm, to $286 after the storm; a 32% percent increase. This was substantial in wake of a 40% decline in overall Casino revenue in the 12 months following the Hurricane."* Within a year (from 1994 to 1995) **resident share in the gambling industry went from 25% to 55% after Hurricane Luis.**

Presently, our finding reveal that **St. Maarten has 25 gambling licenses** (i.e., 15 Casino, 7 Lottery, and 3 Online) of which 23 are operational.

[7] Socio-political are factors that include security, poverty, inequality, national wealth, etc.

[8] Entails the right to be informed, the avoidance of gambling-related harm, continual monitoring for the early detection of problem and disordered gambling, and tools and support systems that support self-restraint.

[9] The way the gambling industry stakeholders should institute restrictions to prevent problem and disordered gambling.

[10] Convenience gambling are places outside of dedicated gambling location such as shops, bars, and restaurants.

However, when the number of gambling opportunities are combined locally, the island has 2,167 casino machinery[11], 75 table and card games, 15 lottery games, 361 lottery facilities (i.e., booths, mobile, resellers, etc.). **This totals to 2, 618 (accounted for) gambling opportunities on 16 square miles**. This report also highlights lotteries and online gambling as major underreported culprits of harmful gambling locally. Abbott et al. 2018 illustrates that an increased availability and location of gambling facilities are directly correlated to the frequency of harmful gambling. Exposure and participation are closely intertwined. Without opportunities to gamble, people are unable to do so.

Studies forewarningly indicate that the number of legal gambling venues is positively correlated to problem gambling (Welte et al., 2014; Abbott et al., 2018, General Audit Chamber, 2021). Persons living within a 10-mile radius of Casino facilities were twice as likely to develop a problem and or disordered gambling than persons living beyond a 10-mile radius. In 2021, the General Audit Chamber reported that young adolescents ages 18 – 21 years specifically have a 39% probability of developing gambling problems versus persons who never gambled, with every form of gambling facility operating in a location. Depending on the type of game, the risk of abuse behavior severely increases. Individuals who bet on sports or play cards, on average become addicted in 3½ years. While it takes slot players on average a little over 1 year (Breen & Zimmerman 2002; General Audit Chamber, 2021; Reilly & Smith, 2013).

In March of 2023, The Social Economic Council (SER) reported that lottery booths are of major concern for the island since they are in highly populated low-income areas with little to no supervision from the government. Seventy five percent **(75%) of the country's lottery booths are placed in the top 3 most populated areas** (i.e., Lower Princess Quarter, Cul-de-Sac, and Cole Bay) consisting of significantly more people stemming from lower income communities than other districts.

When compared to Curaçao (171 sq mi), with 2.11 lottery booth's locations per square mile, St. Maarten (16 sq mi) has 6.9 registered booths per square mile. However, if we consider the 361 lottery facilities, that's 22.6 lottery opportunities per square mile for St. Maarten. That is 10.7 times more lottery locations than Curaçao.

[11] Casino machinery entails slot machines, betting books, bingo, and master key machines.

Recent benchmarking results showed that when compared to other Caribbean countries[12], the amount gambling licenses St. Maarten has, it's population should be 32% (or approx. 1.38 million inhabitants) larger than what it is. St. Maarten surpasses St. Kitts, Bahamas, Curaçao and Aruba on the gambling license vs. estimated population ratio. As it pertains to the number of games compared to the estimated population, results depict that for amount of gambling games St. Maarten has; its population should be 29% (or approx. 1.28 million inhabitants) larger than what it is.

Discussion

Local, scientific, and benchmarking results offered an overview of known issues but also highlighted an array of concerns that previously were not pooled within the context of harm, problem, and disordered gambling. If anything, this report shows that there are in fact strong indicators of local gambling addiction data albeit fragmented.

Since casinos were first introduced to the island in the 60s, the market has rapidly evolved and expanded with little regard towards what that would mean for our society beyond an economic perspective. This has become apparent seeing how much the industry owes government as well as the revealed and unaddressed gambling addiction amongst St. Maarten residents revealed 27 years ago. Therefore, it can be deduced that with an inflated gaming market and with little to no regulatory oversight and regard for responsible gambling and the prevention of addiction, our shortcomings have left St. Maarten citizens exposed and susceptible to harmful gambling for over 6 decades.

Given the island's socio-economic climate (e.g., poverty, housing insecurity, educational level, blue-collar professions, etc.) of today we cannot ignore the cause-and-effect dilemma of offering gambling to our community. Too often the emphasis is only placed on the number of gambling licenses (25) we have rather than the number of opportunities (2,618) that comes along with those licenses. Besides land-based casinos, cause for concern lies especially with online gambling, lottery booths, and convenience gambling locations. This is apparent with the lack of documentation (i.e., thorough legislation, policies, reports, and sector revenue).

For our size, **St. Maarten simply offers way too many gambling opportunities per square capita**.

[12] Caribbean countries used for benchmarking were St. Kitts, Bahamas, Curaçao, Aruba, Jamaica, Barbados, Puerto Rico, and the Dominican Republic.

The way forward

Due to ongoing efforts to restructure and redefine the local gaming regime with the establishment of a gaming authority the Ministry of VSA, being part of the SMGA-workgroup, intends to aim its focus mainly on responsible gambling and the prevention of addiction. Both concepts are huge undertakings that span across many disciplines, sectors, and actors. Therefore, many aspects also fall outside of the scope of responsibility of the Ministry of VSA. Nevertheless, workable solutions are provided.

Based on research VSA is focusing on three aspects that structurally address and supports responsible gambling and prevention: **(1) consumer protection, (2) prevention of addiction, (3) prevention of fraud.**

With **consumer protection** the player (consumer) must be able to trust that the games of chance offered are fair and run reliably. This entails setting standards such as consumers' rights to be informed about the composition of games offered, odds of winning, payout percentage, etc. This also includes ensuring fair play with gaming equipment and prohibiting access to minors, and people who are intoxicated, for instance.

Prevention is tackled three-fold. *Primary Prevention* is the effort to avoid the general populace from becoming problem gamblers. *Secondary Prevention* is the effort to prevent the development of problem gambling in individuals with risk factors for the condition. Both primary and secondary preventions are done via *educational prevention initiatives* and *policy prevention initiatives* to inhibit the development or onset of problem gambling. *Tertiary Prevention* is an effort to stop and potentially reverse the problems occurring in existing problem gamblers via treatment. Lastly the **prevention of fraud** entails conducting customer due diligence, reporting unusual events and transactions, and taking precautionary measures to prevent interplay between visitors and employees.

Educational prevention initiatives entail information and awareness campaigns, mass media campaigns, social media marketing which are developed by gambling providers, government health, social services agencies, and schools. *Policy prevention initiatives* are the restriction on general availability of gambling, i.e., number of venues, harmful types, dedicated venues, locations. Also, restrictions on who can gamble and restrictions on alternations on how gambling is provided.

Our report has identified 6 groups within our society that are most susceptible to gambling harm and disordered gambling: youth, elderly, women, immigrants, the poor, and low educated individuals. Therefore, any attempts towards safeguarding our most vulnerable should be geared towards those

groups. However, although each group deserves equal attention regarding gambling prevention and protection, we must first prioritize those who have been studied to be most susceptible within a population, i.e., youths and young adults. Their exposure to gambling due to proximity, accessibility, and family and peer ties encourages gambling prematurely and can derail their future.

With gambling youths and young adults experience higher rates of depressive symptomatology, increased risk of suicide ideation and attempts, higher anxiety (Gupta & Derevensky, 1998), as well as an increased risk of alcohol and substance abuse disorders (Hardoon & Derevensky, 2002; Winters & Anderson, 2000). In addition, there are a multitude of negative behavioral, psychological, interpersonal, and academic problems associated with problem gambling. Among youths and young adults, problem gambling has been shown to result in increased delinquency and criminal behavior, poor academic performance, higher rates of school truancy and dropout, and disrupted familial and peer relationships (Hardoon et al., 2002; Wynne, Smith, & Jacobs, 1996).

Therefore, based on (1) the nature of the gambling industry, (2) utilitarianism ethical reasoning, (3) the developmental difference between an 18 and 21 year old, (4) life domains the industry infringes on, factors of harm, complexity of diagnosis and treatment, (5) our country civil book article 395a, and (6) the situational difference countries 3 – 200x our size, we see upping the gambling age from 18 – 21 more than a justifiable endeavor.

Lastly, the overall cost of gambling's social, health, and economic impact varies across countries and local contexts, making it hard to quantify. Intersectoral collaborations add complexity when things such as healthcare costs, policing, prosecution, and probation for gambling-related crime are considered. Also, costs related to child welfare within family gambling-related issues, gambling-related work problems that result in unemployment, welfare payments, and lost productivity. A 2018 study was able to indicate that as it relates to healthcare expenditure what the cost per gambler would be. The study considered individuals ≥18 years old that were in possession of healthcare insurance, diagnosed with problem gambling, and sought care. Costs ranged from $36,663 – $54, 329 over a 4-year period, per gambler (Rodriguez-Monguio et al., 2018). The healthcare expenditure included outpatient, inpatient, ER visits, and prescription drugs. If we considered only 20 gamblers in society with that exact scenario, the healthcare expenditure would range between $733,260 – $1,086,580 over a 4-year period, per gambler.

As a country if we do not begin to study the cost of gambling to our society beyond past justifications of tourism appeal and economic gain, we will continue to reap causal disruptions of what we have sown.

Conclusion

This paper concludes that St. Maarten has a high undeniable likelihood of gambling addiction. Evidence has shown that the island offers way too many gambling opportunities per square capita and the ancient justification that the gambling sector positively stimulates the economy whilst being a lucrative touristic attraction is primitive and is simply not the case locally.

Any attempts to address the strong likelihood of local problem and disordered gambling issues are vast, complexed, and not a simple matter to solve. Structural reform will entail a multi-ministerial and sectoral approach and commitment. The Ministry of VSA standpoint on gambling is that a paradigm shift that encompasses responsible gambling, consumer protection, enforced educational and policy prevention incentives (restrictions), and fraud prevention needs to occur expeditiously.

Workable Solutions for Government, Consumers and Operators (elucidation is provided in Chapter 14).

The Ministry VSA

- Develop an addiction policy.
- Develop addiction prevention legislation.
- Create a social healthcare fund.
- Set subsidy specific rules and guidelines for health and social care facilities that treat and support individuals with addiction.
- Create Public Health Awareness on gambling and addiction.
- Collaborate and support Problem Gambling Prevention and Treatment initiatives and programs.
- Collaborate with and support Social Welfare agencies.
- Monitor industry compliance pertaining to Labor Relations and Employment Practices.
- Collaborate with Regulatory Bodies for input, data, and information.

Ministry TEATT

- Revise and create gambling policies for casinos, lotteries and online.
- Collaborate with relevant stakeholders and Promote gambling as a Tourist attraction.
- Advocate for and collaborate with gambling policies and regulations with other relevant Ministries and regulatory authorities.
- Promote and support digital connectivity and innovation in the industry (supervision & monitoring).
- Collaborate with Regulatory Bodies.

The Ministry of Justice

- Involvement in policy and legislation development and revision related to gambling is key.
- Review and revise law enforcement policies and legislation related to gambling.
- Collect and report data on the gaming industry from regulatory bodies.
- Continual collaboration with regulatory bodies.
- Collaborate with relevant organizations on Player Protection.
- Continued International Cooperation and Collaboration.

The Ministry of Finance

- Update the current tax system.
- Seek to conduct research or commission studies into the introduction of a sin/hazard tax.
- Collect all outstanding fees from the gaming industry.
- Review and amend gambling taxation.
- Collaborate with regulatory bodies and law enforcement agencies for Financial Monitoring.
- Provision the allocation of Budget towards development, services, and programs.
- Conduct or commission studies on the Economic Impact of the gambling industry.
- Collaborate with Regulatory Bodies.

The Player

- Players must take responsibility for managing his/her own playing time and the amount of money spent on games of chance.
- Players must take initiative and responsibility to self-educate themselves on the dangers of games of chance. Both from self-initiatives and from public information about the dangers of addiction and the resources available for treatment.
- Players must take the initiative to self-exclude and or seek treatment at designated treatment facilities.
- Players also have the right to be informed on the odds and dangers of games of chance they engage in. It's the responsibility of the license holders to have that information on all devices, tickets, and platforms.

Games of Chance License and Permit Holders

- License and permit holders should be obligated to take measures and make necessary provisions for the prevention of addiction.
- It is essential to develop in-house policies and protocols on the detection and prevention of at-risk, problem, and disordered gamblers. This includes but is not limited to detection measures, intervention triggers, reporting standards, protocols, etc.
- The license and permit holders should have sufficient staff who are experts in the field of gambling addiction. Personnel must identify potentially risky gaming behavior and, where appropriate, inform the player concerned about their gaming behavior and the dangers thereof. It is the operator's responsibility to advise players about the available options to moderate their gaming behavior.
- It is essential to develop in-house staff training for the detection and prevention of problem and disordered gambling, and crime (e.g., fraud).
- Comply with standards, rules and regulations set by the government and a gaming authority pertaining to the gaming industry (taxes, annual fees, prevention measures, etc.)

A Gaming Authority

- An independent gaming authority (e.g., the SMGA) should be responsible for issuing licenses to gambling establishments and ensuring that the industry operators meet strict criteria for operation.
- The authority should also regularly review and advise the government to update regulations to adapt to changing industry trends and technologies.
- Authorized to enforce compliance with regulations, ensuring that operators adhere to legal requirements, including player protection, fair gaming practices, and responsible gambling measures. This can involve conducting regular audits, inspections, and investigations.
- Ensure that responsible gambling measures are in place and promote responsible gambling practices, including implementing player self-exclusion programs, age verification measures, and providing resources for gambling addiction treatment and support.
- Enable to support Anti-Money Laundering (AML) and Anti-Fraud Measures. The gaming authority should have robust mechanisms in place to support the prevention of money laundering, terrorist financing, and fraudulent activities within the gambling industry. This can include thorough

background checks on license applicants, transaction monitoring systems, and reporting suspicious activities.

- Encompasses a system where player protection, responsible gambling, and the prevention of addiction are centered within the industry. This can be done by ensuring that operators have appropriate mechanisms in place to handle customer complaints, disputes, and provide fair resolution processes. This can include establishing a dedicated player support unit within the control board.
- Transparency and Accountability. The control board should operate transparently, providing public access to relevant information such as licensing requirements, regulatory guidelines, and casino performance reports, etc. It should also be accountable for its actions and decisions, regularly reporting to the public and relevant authorities.
- Collaborate and cooperate with international regulatory bodies, industry stakeholders and law enforcement agencies to share best practices, exchange information, and address cross-border gambling issues.
- Set gaming standards, surveil, inspect, combat illegal games of chance, report industry developments, negligence, and crime. In this regard the authoritative body must have close ties with the Ministry of VSA and other relevant ministries and their extended branches so that individual and combined efforts, policies, and legislation are aligned.

Abbreviations

Abbreviation	Definition
aka	also known as
EMG	Electronic gaming machines
CFATF	Caribbean Financial Action Task Force
DR	Dominican Republic
DSM	Diagnostic and Statistical Manual of Mental Disorders
FATF	Financial Action Task Force
FR	France
GDP	Gross domestic product
ISP	Internet Service Provider
JA	Jamaica
NLD	The Netherlands
NCPG	National Council for Problem Gambling
Pop.	Population
RG	Responsible Gambling
SER	Social Economic Council
sqi mi	square miles
TEATT/ TEZVT	The Ministry of Tourism, Economic Affairs, Traffic and Telecommunications – *Het Ministerie van Toerisme, Economische Zaken, Verkeer en Telecommunicatie*
TWO	Temporary Work Organization
UNDP	United Nations Development Programme
VROMI	The Ministry of Public Housing, Spatial Planning, Environment and Infrastucture – *Het Ministerie van Volkshuisvesting Ruimtelijke Ordening, Milieu & Infrastructuur*
VSA	The Ministry of Public Health, Social Development, and Labor – *Het Ministerie van Volksgezondheid, Sociale ontwikkeling, en Arbeid (VSA)*
WHO	World Health Organization

Definitions

Adolescent	10 – 19 years of age
Land based casino	Traditional brick and mortar places where you can game and gamble.
Online based casino	Digital form of gaming and gambling. Also referred to offshore hazard games and online casinos throughout this document.
Gaming	the outcome is predominantly achieved through knowledge and skill and not only chance.
Gambling	involves wagering money on games with an uncertain outcome and involves a high degree of risk.
Gambling addiction	is synonymously and interchangeably used with **compulsive gambling**, **gambling disorder**, and **pathological gambling** and is mainly based around compulsion. It is characterized by an irresistible urge to gamble even when it has negative consequences for you, your loved ones, and when you know the odds are against you or you can't afford to lose.
Problem gambling	is gambling behavior which causes disruptions in any major area of life: psychological, physical, social, or vocational. It is not rooted in compulsion but rather chasing a desired outcome.
Responsible gambling	tools and approaches associated with gambling provision that have the potential to reduce harmful gambling. Or reducing the rate of the development of new cases of harm or disorder that is gambling related.
Youth	15 – 24 years of age
Young adult	20 – 24 years of age

Table of Contents

Table of Content II Figures and Tables

Chapter 1 Summary: Problem Gambling vs. Gambling Disorder

In accordance with article 3 and 4 of the Public Health Ordinance, The Ministry of Public Health, Social Development, and Labor Affairs (VSA) has a vested interest in the prevention and protection of public safety.

For over 30 years unresolved and uninvestigated discussions had been occurring on whether St. Maarten has a gambling addiction problem.

Sparse attempts have been made to regulate the gambling industry, but the country's weak regulatory framework and lack of oversight meant little has done.

The Ministry of VSA is seeking to take a clear stance on gambling sector for the prevention and protection of public harm and those most vulnerable in our society.

Problem gambling: *non-addictive behavior that is not entirely under control but affects and disrupts daily life.*

Gambling addiction: *a.k.a. compulsive gambling, disordered gambling, or pathological gambling.*

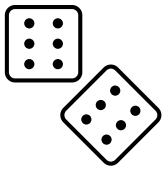
Disorder gambling: *reoccurring problematic gambling behavior that leads to impairment and distress. Individuals are preoccupied with "chasing" losses and continue gambling despite problems.*

Disordered gambling (gambling addiction) involves repeated problem gambling behavior.

Types of gambling: *commercial, private, recreational, professional, online, illegal and gaming*

1. Problem Gambling vs. Gambling Disorder

1.1 Introduction



Presently, ongoing discussions have resurfaced on whether **gambling addiction**[13] and or **problem gambling**[14] is a significant health, social, labor, and financial concern amongst the St. Maarten populace or not. These discussions have been happening for over thirty years with no longitudinal investigation or true resolve. Over the years there has been sparse remarks made on the importance of balancing resident participation and consumer protection when drafting policies and legislation for the **gaming industry**[15], but the country's weak regulatory framework and lack of oversight meant that attempts made has done little facilitate those sentiments (PWC, 2013; GLI, 2022).

Although little to no data has been collected on the local impact of gaming and gambling, it is a shared communal feeling amongst residents and healthcare professionals that gambling addiction and problem gambling is a 'big unaddressed concern'. Investigative research with key stakeholders has revealed that ***resident play***[16] *has grown exponentially since Casinos were first introduced to the island in the 60s* (Coopers & Lybrand 1996; TEZVT Casino Policy, 2011; HPS Consulting 2013); *young adults ages 18 – 30 appear to be gambling more and make use of free alcohol beverages within Casinos at alarming rates*[17]*; mental illness, alcohol addiction, and substance abuse has drastically increased over the years, especially after Hurricane Irma and the COVID-19 pandemic*[18] *; there are currently no guidelines or regulations on gaming and gambling advertisements or premises standards for institutions to protect the local populace.*

[13] **Gambling addiction:** also referred to as compulsive gambling, a gambling disorder, or pathological gambling is mainly based around compulsion. This is characterized by an irresistible urge to behave in a certain way.
[14] **Problem gambling:** is gambling behavior which causes disruptions in any major area of life: psychological, physical, social, or vocational. It's not rooted in compulsion but rather chasing a desired outcome.
[15] **Gaming industry:** encompasses both gaming and gambling.
[16] **Resident play:** resident or local participation in gaming and gambling
[17] Investigative research with Section Head Casino Control, Aug 2022
[18] Investigative research with Mental Health Foundation and Turning Point, Aug 2022

The social—economic ramifications of gambling have been studied worldwide and have shown that although the gaming industry has lucrative monetary, employment, and tourism benefits for a country, damaging social and health consequences also goes hand in hand (Anielski Management Inc., 2009; Williams et al., 201; National Center for Responsible Gaming, 2017; **Appendix 1**).

Therefore, The Ministry of Public Health, Social Development, and Labor – hereafter referred to as VSA or the Ministry, has a vested interest in determining the scope of impact on past and current resident play on the St. Maarten population in relation to problem gambling and disordered gambling. Based on articles 3 and 4 of the Ministry's National Public Health Ordinance[19], it's our duty to provide care, especially to vulnerable groups – children (5 – 17), adolescents (18 – 24), 60+'ers, the physically and mental disabled, and persons living in poverty – within our society, acquire insight into health situations, identify and advise about healthcare risks, and promote preventative care.

Presently, VSA is part of the St. Maarten Gaming Authority (SMGA) – workgroup in which legislation on an official SMGA is to be established. The Ministry is seeking to take a clear stance on gambling for the prevention and protection of public harm and those most vulnerable in our society. Therefore, **the aim of this report is to assess and address the likelihood of problem and disordered gambling on Dutch Sint Maarten**.

1.2 Gambling

"Gambling is the act of staking money or something of material value on an event having an uncertain outcome in the hope of winning additional money and or material goods" (Abbott et al. 2018). Gambling is a cultural construct in which individuals partake in for various reasons without experiencing problems. However, some individuals develop substantial impairment. This study primarily focuses on the commercial and online forms of gambling and gaming.

[19] AB 2016 no 42 LV Publieke Gezondheid

Various forms of gambling:

1. ***Commercial gambling***: a formal and regulated style of gambling that includes casinos, bingo, Keno, electronic gaming machines (EMGs), video lottery terminals, lottery tickets, horse racing, and legal sports betting. There's an unequal relationship between the gambling provider and the gambler; the gambler mainly loses to the provider.

2. ***Private gambling****:* refers to betting on card games like poker among friends, or betting on sports results with family and colleagues. Here money is redistributed within the group and individual wins or loses depend on skill or chance.

3. ***Recreational gambling****:* entails gambling for leisure, recreation, or entertainment. Is deemed low-risk and can sustain, enhance, or have little to no impact on a gambler's well-being.

4. ***Professional gambling:*** involves gamblers that have commitment (time and effort), discipline (purposeful and constant betting strategy), and the ability to deal with ambiguity (the unpredictability of gambling outcomes).

5. ***Online gambling:*** entails any kind of gambling that is conducted on the internet.

6. ***Illegal gambling****:* includes bookmaking on sports and horse races, underground casinos, and number running. Like commercial gambling, there is an unequal relationship between provider and gambler. However, illegal providers are not constrained by laws and regulations.

7. ***Gaming*** differs from gambling because it refers to videogames and outcomes are achieved mainly by skill. However, some games include elements of gambling (e.g., Loot boxes[20] and gambling scenarios), and some forms of gambling have adopted game-like elements (arcade casino games and skill-based slot machines).

[20] **Loot boxes:** a consumable virtual item that can be redeemed to receive virtual items, e.g., monetary tokens, weapons, other beneficial items.

1.3 Disordered Gambling (Gambling addiction) vs. Problem Gambling

Global studies make a differentiation between gambling addiction and problem gambling. Gambling addiction is the persistent and recurrent problematic gambling behavior that leads to significant impairment or distress. Individuals are often preoccupied with gambling, loss of control, "chasing" losses, and continued gambling despite problems in social or occupational functioning (DSM-5, 2022; Morasco et al., 2006). **Gambling addiction** is synonymously and interchangeably used with **compulsive gambling**, **gambling disorder**, and **pathological gambling**. Studies have also shown that gambling addiction has a higher chance of developing when gambling starts from young ages, e.g., 10 –30 (Shi et al., 2021; Abbott et al., 2018; Wijesingha et al. 2017). Moreover, they also suggest that increased availability of gambling opportunities contributes to developing gambling disorders in a population including youths (Shaffer et al., 1999).

Problem gambling on the other hand can be defined as non-addicted behavior in which habits are not entirely under control and the gambling behavior affects and disrupts daily life, i.e., work, and social life. Problem gamblers are basically high functioning[21] gambling addicts. **The key distinction to bear in mind is that all gambling addicts are problem gamblers, but not all problem gamblers have a gambling addiction. Gambling addiction involves repeated, problem gambling behavior.**

[21] High functioning gambling addict: someone who suffers from addiction, but the consequences are not always obvious to the casual observer.

Chapter 2 Summary: Methodology

Secondary Desk Research and Data Collection

Both internal (published / unpublished governmental documents and professional knowledge and experiences) and external (online searches, scientific literature, work done by consultants, and professional experiences) techniques were used.

Inclusion and Exclusion Criteria

Existing material and stakeholders were included if they provided previous and current knowledge, experience, and involvement in the gambling industry. Likewise, materials and stakeholders with no direct connection to the gambling industry were excluded.

Strengths and Limitations

Strengths

Secondary desk research provided a broad perspective on the reach topic, is inexpensive, and offered readily reliable data from various sources. Additionally, the gambling industry is well documented worldwide therefore the use of scientific research was heavily relied upon since the sector is less documented locally.

Limitations

Limited data, lack of standardized documentation, and lack of documentation consistency from key institutions (e.g., the dept. of Economic Licenses, dept. of Labor Affairs, Turning Point Foundation, and Mental Health Foundation) and lack of documentation consistency.

Bear in mind that although local data is limited (especially regarding the number of problem and disordered gamblers), a comprehensive overview of the island's gambling system, laws, policies, stakeholders, bottlenecks, and reported instances more than suffice to be able to draw accurate and reliable conclusions.

2. Methodology

Secondary Desk Research and Data Collection

This paper executed the methodology of secondary desk research in which existing material produced by others was used. Both internal (published/ unpublished governmental documents and professional knowledge and experiences) and external (online searches, scientific literature, work done by consultants, and professional experiences) techniques were used.

Inclusion and Exclusion Criteria

Existing material and stakeholders were included if they provided previous and current knowledge, experience, and involvement in the gambling industry. Gathered and provided data gravely relied on what was openly available online, stakeholders' availability and willingness to provide information. Likewise, materials and stakeholders with no direct connection to the gambling industry were excluded.

Strengths and Limitations

Secondary desk research provided a broad perspective on the reach topic, is inexpensive, and offered readily reliable data from various sources. This was essential given the fact that the National Ordinance for a regulated gaming authority is well on its way to being established, therefore time to conduct primary desk research was very limited. Additionally, the gambling industry is well documented worldwide therefore the use of scientific research was heavily relied upon since the sector is less documented locally.

This research was faced with many limitations as it pertained to data collection. Limited data, lack of standardized documentation from key institutions (e.g., the dept. of Economic Licenses, dept. of Labor Affairs, Turning Point Foundation, and Mental Health Foundation) and lack of documentation consistency. Limited data is a well-known issue on the island. Be that as it may, readers should bear in mind that data (i.e., the number of problem and disordered gamblers) is one aspect of the larger picture. A comprehensive overview of St. Maarten's gambling industry system, laws, policies, stakeholders' roles and responsibilities, bottlenecks, and reported instances more than suffice to be able draw accurate and reliable conclusions.

Chapter 3 Summary: Socioeconomic Context of St. Maarten Population

*In a 10-year span (2011 – 2021), the **St. Maarten Population** has experienced a 27% growth rate. Home to 118 nationalities the island is diversified by nature with of Afro-Caribbean descent being the most predominant, followed by Caucasians, Latino, and Asians.*

***Immigrants** are primarily from the Dominican Republic, The Netherlands, France, Jamaica, and the United States. Illegal presence and work are widespread issue on the island in which immigrants contribute to the labor market but also present social problems such as transferring most of their income to relatives elsewhere (remittance) in poverty, consciously living in poverty, and do not build up sufficient pension.*

***Residents** emigrate due to the need for higher education, economic opportunities, or after natural disasters specific to the island like a Hurricane. Young St. Maarteners in particular show a trend of leaving the island and never returning due to high cost of living, which also includes the cost of housing. Resident emigration results in brain drain that partially contributes to gaps in the labor market.*

Gender distribution

In 2018, the last labor force survey showed that the island consisted of 49% men and 51% women. Life expectancy is on the rise, less people are dying and are living longer. This also means that the country's old-age dependency ratio is also increasing, from 3.2 in 2004 to 9.5 in 2021.

GDP, Income levels, and Housing

The island has one the highest gross domestic products (GDP) in the Caribbean – USD 28, 184 in 2016 per capita and approx. USD 30K in 2022. However, the country's GDP is subject to debate due to varying reports on the population size (the Civil Registry reported 61, 750 inhabitants in 2019 and STATS reported 41, 177). Seventy-four percent (74%) of households have a combined income of ± USD 2,777, of which 5% (1 in 5 people) have no income at all. The housing market is tense and bifurcated, there is a lack of social housing, utilities are expensive, and informal rental markets are on the rise.

Labor Market: Employment vs. Unemployment – 2019 Labor Force Survey

*Forty-eight-point seven percent (48.7%) of the **employed population** consists of mainly unskilled blue-collar occupations such as wholesale and retail trade (18%), accommodation and food and service activities (12%), and construction (12%). Of the 20,760 employed, 3.5% (722 individuals) completed no formal education, 25.3% (5,253) have a Primary education, and 42.4% (8,805) have a Secondary education. Moreover, only 8.4% (1,848) have post-secondary non-tertiary education, and 19.9% (4,133) have tertiary education.*

***Unemployment** is higher for women (63.4% or 1, 456) than for men (36.6% or 840). Women ages 25 – 44 years represent 29% of the unemployed population. Of the 2,296 unemployed, 3% (69 individuals) completed no formal education, 34.8% (798) have a Primary education, and 42.9% (985) have a Secondary education. Moreover, only 7.4% (169) have post-secondary non-tertiary education, and 12.0% (275) have tertiary education. There is a positive correlation between education and income levels, the higher a person's education the higher the income bracket, and the lower the education the lower the income.*

Poverty and Vulnerability

Women-headed households with single incomes, the youth (young professionals with low starter incomes), and the elderly living on meagre pensions or no income at all are the islands most vulnerable groups in regards, to housing, employment, and livable incomes.

3. Socioeconomic Context of the St. Maarten Population

3.1 Population, Religion, Immigration, and Emigration

St. Maarten department of Statistics reported a population of 33, 609 residents in 2011 and 42, 577 in 2021, depicting a 27% growth in a 10-year span (Table 1; Department of Statistics (STATS), 2021). The island diverse by nature consists of 118 nationalities[22] of which Afro-Caribbean descent is predominant, followed by Caucasians, Hispanics, and Asians (UNICEF, 2020). Religiously[23] this island consists of Roman Catholics (33.10%), Pentecostal (14.7%), Methodists (10%), Seven-day Adventists (6.6%), Hindu (5.2%), Baptist (4.7%), Anglican (3.10%), Jehovah's Witness (1.7%), Evangelical (1.4%), Islam and Jewish (1.10%).

A steady influx of immigrants occurred from 1, 575 in 2014 to 1, 648 in 2016, but saw decreases after Hurricane Irma in 2017 (964) and again in 2020 (868) with the COVID-19 pandemic. Immigrants come primarily from the Dominican Republic (DR), The Netherlands (NLD), France (FR), Jamaica (JA), and the United States of America (US). Additionally, due to the island's geographical location, both the French and Dutch side attract residents from surrounding islands.

A 2022 study done by SEO Amsterdam reported lack of manpower and financial resources to be key determinants for the islands suboptimal immigration control that contributes to non-compliance and abuse by employers and employees from outside of the island. Additionally, illegal presence and work is reported to be a widespread issue on the island. Immigrates contribute to the local labor market but also present social problems such as transferring most of their income to relatives elsewhere (remittance) in poverty, consciously living in poverty, and do not build up sufficient pension.

Residents on the other hand tend to emigrate due to the need for higher education, economic opportunities, or after natural disasters specific to the island like a Hurricane (STATS, 2019). The impact of major Hurricanes specifically, Luis (in 1995), Lenny (1999), Irma (2017) is still noticeable and affects tourism which is the island's main source of income (van Vuuren et al., SEO social security report 2022).

Young St. Maarteners in particular show a trend of leaving the island and never returning due to high cost of living, which also includes the cost of housing (VROMI housing assessment, 2019).

[22] VROMI – Sint Maarten Rapid Housing Sector Assessment, 2019
[23] Religions on St. Maarten/ St. Martin: https://www.sint-maarten.net/population/culture/religion

Of the young St. Maarteners that remain or do return to the island, they experience invisible homelessness[24] due lack of financial means and the housing market, therefore they stay at home longer with their parents (VROMI housing vision, 2012). Many workers, including specialists, often leave the island permanently after each hurricane (van Vuuren et al., SEO social security report 2022).

3.2 Gender distribution

The last reporting of gender distribution in 2018 showed that the island consisted of 19, 759 men (49% of the population) and 20, 855 women (51%) (Figure 1). With life expectancy on the rise, less people are dying and are living longer (5, 450 elderly 60+) (Table 1 & 2; Figure 1). This also means that the country's old-age dependency ratio[25] is also increasing, it went from 3.2 in 2004 to 9.5 in 2021. The birth rate is steady, hence more children ages 0 – 9 (5, 387 or 13% of the population), adolescents/youths ages 10 – 19 (5, 462 or 13% of the population), and young adults ages 20 – 24 (2, 165 or 5% of the population).

Table 1: *St. Maarten Population estimates from the department Statistics 2021*

Vital Statistics	Jan 2014	Jan 2015	Jan 2016	Jan 2017	Jan 2018	Jan 2019	Jan 2020	Jan 2021
Population (estimates)	37,132	38,247	39,411	40,535	40,614	41,177	42,044	42,577
Births	532	500	458	363	412	398	423	
Deaths	169	197	160	172	165	194	233	
Natural Increase	363	303	298	191	247	204	190	
Immigrants	1,575	1,541	1,648	964	1,273	1,379	868	
Emigrants	824	681	822	1,078	957	716	525	
Net migration	751	860	826	-114	316	663	343	
Total Growth	1,115	1,164	1,125	79	563	867	533	

[24] Invisible homelessness: young people who remain longer at home and different households that live in one household.

[25] Old age dependency ratio is the ratio of the number of elderly people at an age when they are generally economically inactive (i.e., aged 65 and over), compared to the number of people of working age (i.e., 15-64 years old).

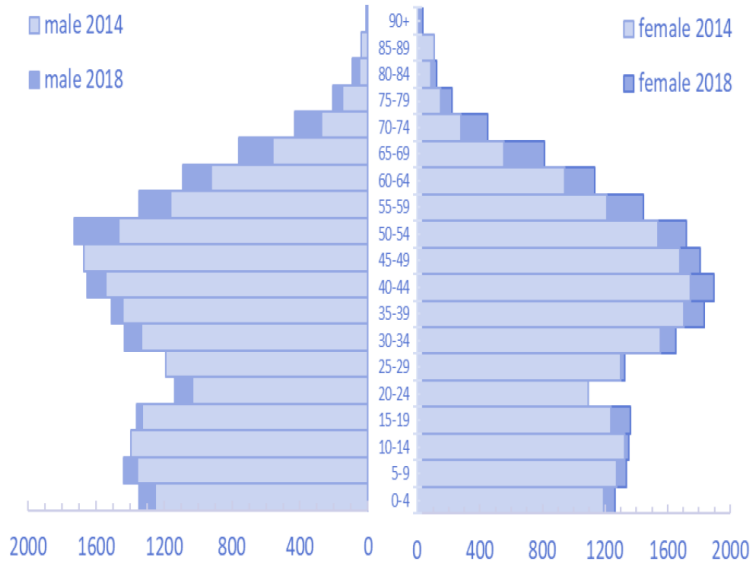


Figure 1: St. Maarten life expectancy by gender, 2014 vs 2018. Department of Statistics.

Population of Sint Maarten, 2018			
Age	Male	Female	Total
0-4	1349	1265	2614
5-9	1437	1336	2773
10-14	1387	1354	2741
15-19	1360	1361	2721
20-24	1139	1025	2165
25-29	1142	1324	2466
30-34	1432	1651	3083
35-39	1510	1832	3342
40-44	1651	1895	3546
45-49	1665	1806	3471
50-54	1727	1719	3446
55-59	1348	1447	2795
60-64	1091	1132	2223
65-69	759	813	1573
70-74	431	450	881
75-79	207	223	430
80-84	93	125	217
85-89	18	61	79
90+	11	36	47
Total	19759	20855	40614

Table 2: Population by a 5-year age group, 2018. Department of Statistics

3.3 GDP, Income levels, and Housing

St. Maarten has one the highest gross domestic products (GDP) in the Caribbean – USD 28, 184 in 2016 per capita and approx. USD 30K in 2022 (VROMI housing assessment, 2019; van Vuuren et al. SEO Amsterdam, 2022). However, the country's GDP is subject to debate due to varying reports on the population size. The Civil Registry reported 61, 750 inhabitants in 2019 and STATS reported 41, 177 (van Vuuren et al. SEO Amsterdam, 2022).

In 2013, 67.5% of households had an income at or below ANG 3,000 (USD 1,666) per month, while in 2018 the percentage dropped to 50% (USD 833) (VROMI housing assessment, 2019). Data from the 2019 Labor Force Survey shows that 74%[26] of households have a combined income of up to ANG ± 5K (± USD 2,777). The median household income is around USD 2,000 (Table 3). Moreover, of the 74% of households with a combined income, 5% have no income at all (STATS, Labor Force Survey, 2019). In 2022, SEO Amsterdam reported that 5% of households with no income represents approx. 1 in 5 St. Maarteners. On an individual monthly level, 21% have no income, which suggests that individuals with no income live in households with at least one individual with an income. Household income distribution before and after Hurricane Irma earning less than ANG 2K increased from 31% to 41% (van Vuuren et al. SEO Amsterdam, 2022).

[26] Interestingly SXM News reported 94% instead of 74%: https://stmaartennews.com/social/94-households-need-least-2222-usd-month-survive/

Housing is incredibly expensive and unaffordable for the average person due to a bifurcated housing market, lack of social housing, limited access to land and weak land management, high price of housing, lack of affordability and access to finance, informal rental markets, and utility expenses (VROMI housing assessment, 2019). Additionally cumbersome red tape such as varying taxes applied at multiple points in the housing supply chain, permitting processes, and informal settlements, add to the hardship of housing.

Table 3: Individual and household gross monthly income 2017 vs. 2018

INDIVIDUAL GROSS INCOME (USD)	% of population (2017)	HOUSEHOLD GROSS INCOME (USD)	% OF HOUSEHOLDS (2017)	% OF HOUSEHOLDS (2018)
278 OR LESS	4%	1 – 555	11%	14%
278 – 555	13%	556 – 1,110	17%	22%
556 – 1,110	21%	1,111 – 1,666	16%	14%
1,111 – 1,388	9%	1,667 – 2,222	12%	13%
1,389 – 1,666	7%	2,223 – 2,777	9%	7%
1,667 – 2,777	13%	2,778 – 3,333	8%	6%
2,778 +	10%	3,334 – 3,888	4%	5%
NO INCOME	23%	3,889 – 4,444	4%	3%
		4,445 – 5,000	3%	2%
		5,001 – 5,555	2%	1%
		5,556 +	10%	9%
		No income	3%	5%

Source: STAT Labor Force, 2017

3.4 Labor Market: Employment vs. Unemployment and Education

Due to the emigration of locals, the island has a brain drain that partially contributes to gaps in the labor market (VROMI housing assessment, 2019). Therefore, employers at the upper end of the market fill the gap with expats such as technical professionals in the hotel industry, banking sector, real estate, etc.

The lower end job market attracts unskilled or semi-skilled workers in areas like construction, services, cooking, cleaning, and other low wage employment. Island sentiment in this regard is that the middle class is hollowed out which has accommodated wealthy expats and low-income migrants.

The 2019 Labor Force Survey showed of the 2018 total population of 40,614, only 51% or 20, 760 persons were employed[27] (VROMI housing assessment, 2019). Of the employed population, 83% depend on salaries as their main source of income whereas 11% depend on old age pension (STATS, Labor Force Survey, 2019). Only 716 (or 3.5%) of the 20, 760 employed have a second job. In 2018, males represented 53% (10, 990 people) of the employed and females 47% (9, 769) (Table 4 a & b).

[27] Employed: persons 15+ with a job or their own business or who, during the week prior to the Labor Force Survey, worked 4 hours or more for a remuneration.

The last report of employed persons with a pension plan occurred in 2017 and 2018. In 2017 of 20, 954 employed only 4, 550 had a first layer pension plan (AOV[28]), and in 2018 of 20, 760 only 4, 918 (van Vuuren et al., SEO Amsterdam 2022).

Table 4a: Employed and Unemployed population by age and gender in numbers (in 2018)

Age in years	Male	Female	Total
15 – 24	1,079	845	1,924
25 – 44	4,979	4,767	9,746
45 – 60	4,087	3,446	7,533
61 – 64	431	398	830
65+	414	312	727
Total	**10,990**	**9,769**	**20,760**
Employed population by Age and Gender (numbers)			
15 – 24	244	175	419
25 – 44	274	665	940
45 – 60	291	582	873
61 – 65	31	33	64
Total	**840**	**1,456**	**2,296**
Unemployed population by Age and Gender (numbers)			
Source: 2019 Labor Force Survey			

Table 4b: 2018 Employed and Unemployed population by age and gender in percentage

Age in years	Male	Female
15 – 24	5%	4%
25 – 44	24%	23%
45 – 60	20%	17%
61 – 64	2%	2%
65+	2%	2%
Total	**53%**	**47%**
Employed population by Age and Gender (percentage)		
15 – 24	10.6%	7.6%
25 – 44	12.0%	29.0%
45 – 60	12.7%	25.4%
61 – 65	1.4%	1.4%
Total	**36.6%**	**63.4%**
Unemployed population by Age and Gender (percentage)		
Source: 2019 Labor Force Survey		

[28] AOV: arbeidsongeschiktheidsverzerkering – Disability insurance

Industries with the highest number of employed are wholesale and retail trade (18%), accommodation and food and service activities (12%), and construction (12%) (VROMI housing assessment, 2019). Of the 20,760 employed, 3.5% (722 individuals) completed no formal education, 25.3% (5,253) have a Primary education, and 42.4% (8,805) have a Secondary education (STATS, Labor Force Survey, 2019).

Moreover, only 8.4% (1,848) have post-secondary non-tertiary education, and 19.9% (4,133) have tertiary education. A combined 71% (or 14,780) of the employed population did not continue their studies beyond high school. Almost half of the employed population, 48.7%, consists of mainly unskilled occupations such as service, shop and market workers, plant and machine operators and assemblers, and craft & related trade work which do not require post-secondary education.

After Hurricane Irma, the unemployment rate grew from 6.2% in 2017 to 9.9% in 2018, and again after the COVID-19 Pandemic from 13% in 2021 but fell to 11.2% in 2022 (van Vuuren et al., SEO Amsterdam 2022). The unemployed[29] population in 2018 was 2,296 or 6% of the entire population (STATS, Labor Force Survey, 2019). Unemployment is higher for women (63.4% or 1, 456) than for men (36.6% or 840). Women ages 25 – 44 years represent 29% of the unemployed population. Youth unemployment dropped by 6% from 2017 to 2018 and is reportedly highest among the poorly educated. The 2019 labor force survey unemployment in youths 15 – 24 was 18,2% (10.6% male, 7.6% female, or 419 individuals).
Equally reported reasons, a 50 – 50 split, for youth 15 – 24 unemployment in males and females were due to slow season and no available jobs. Adults 25 – 44 (41%; 940 individuals), and 45 – 60 (38, 1%; 873 individuals), and 61+ (2.8%; 64 individuals) list reasons such slow season, no jobs in desired industry and age as reasons for unemployment.

Of the 2,296 unemployed, 3% (69 individuals) completed no formal education, 34.8% (798) have a Primary education, and 42.9% (985) have a Secondary education (STATS, Labor Force Survey, 2019). Moreover, only 7.4% (169) have post-secondary non-tertiary education, and 12.0% (275) have tertiary education. There is a positive correlation between education and income levels, the higher a person's education the higher the income bracket, and the lower the education the lower the income. St. Maarten's **unemployment rate of 9.9%** in 2018 ranges from no formal completed education to having completed a tertiary level.

[29] Unemployed: all person's 15+ who during the Labor Force Survey were unemployed, were actively looking for work the month prior to the survey, and who could start working within 2 weeks, should they find a job.

3.5 Poverty and Vulnerability

The 2019 housing assessment done by the Ministry of Public Housing, Spatial Planning, Environment, and Infrastructure (VROMI), identified **women-headed households with single incomes**, **the youth** (young professionals with low starter incomes), and **the elderly** living on meagre pensions or no income at all as the islands most vulnerable groups in regards, to housing, employment, and livable incomes.

Women-headed households typically have a single-income, children, and sometimes the elderly which makes them more vulnerable than nuclear households with both parents living together. Female-headed households represent 39% of all households.

In 2019, the percentage of the population above the age of 60 was 13%, and 1% for those 80+. The elderly is often affected by poverty with poor nutrition, lack of transportation, chronic disease, and substandard housing, which are partly inflicted by the low pensions (VROMI housing assessment, 2019).

Currently, the maximum compulsory collective Old Age Pension (AOV) is USD 681 (NAF 1,240) per month. In 2019 it was USD 591 (NAF 1,076) and in that same year 50% of elderly reported not having enough income to pay their bills. (SEO Amsterdam 2022; VROMI housing assessment, 2019).

Since there is no national poverty line for Sint Maarten, a United Nations Development Programme (UNDP) benchmark for poverty based on minimum wage indicates that **27% households are poor and live on revenues at or below the minimum wage of approximately USD 850 per month** in 2017. As of January 1st, 2023, minimum wage increased from NAF 8.83 (USD 4, 85) to NAF 9,95 (USD 5, 47)[30].

Additionally, the most recent reporting of the average household monthly expenditures was ANG 6,860 in 2015 (van Vuuren et al., SEO Amsterdam 2022). Of that total households spend 37% (ANG 2,566) of their income on housing, water, electricity, gas, and other fuels, 16% (ANG 1,096) on transportation, 11% (ANG 749) on miscellaneous goods and services, 7% (ANG 509) on food, non-alcoholic beverages, tobacco and narcotics, and 5% (ANG 325) on recreation and culture, 2% (ANG 133) on health, and 2% (ANG 145) on education. Collectively, household expenditures exceeded the median household income of ANG 2K – 3K in 2018.

[30] SXM News: minimum wage increase goes into effect as of January 1st, 2023. https://smn-news.com/index.php/st-maarten-st-martin-news/41777-exclusive-minimum-wage-increase-goes-into-effect-as-of-january-1st-2023.html

NB: Readers should note that the data from the Labor Force Survey is based on a sample size of households and extrapolated to provide estimates that represent the country-wide population.

As it pertains to our healthcare institutions, there are currently two that can provide mental health and addiction care and treatment, i.e., Mental Health Foundation and Turning Point Foundation. However, to some extent the capability of diagnosing and providing specialized care (i.e., financial, social, or mental) to gambling addicts specifically is limited. Throughout this report it will be made clear how difficult it is to detect and treat problem and disordered gambling. Currently, our healthcare institutions focus primarily on alcohol and (drug) substance abuse.

The Ministry of VSA engaged the Mental Health Foundation, Turning Point, and a retired psychologist on their experiences of local prevalence and care for gambling addicts. All were able to recall cases of gambling addiction over the years but were unable to provide documentation on timeframes, patient demographics, or frequency.

Chapter 4 Summary: Gambling history on St. Maarten

Gambling was introduced to the island in the 1960s. *Due to tourism and Resort development, most developers and owners considered the addition of Casino facilities to be important an amenity to draw visitors to their resort and St. Maarten.*

Other forms of gambling such as cock fighting and betting exist but have not been formally identified, measured, or regulated.

Noteworthily on ***French Saint Martin*** *gambling is legal in which gambling laws from France apply. The gaming industry is licensed and regulated by the French side government and the main form of gambling that takes place there is online gambling. There are no land base casinos, and the island does not have its own lottery. This is primarily due to high industry taxations.*

1996 *– St. Maarten's Executive Council hired consultants Coopers & Lybrand to conduct an evaluative study on the gaming industry on the island. Research concluded that the two main sources of Casino revenues were cruise ship travelers and island residents**.** Additionally, St. Maarten had the highest resident generated casino revenue compared to Bahamas, Puerto Rico, Curaçao and Aruba**;** in 1994 resident share in the gambling industry was 25% and by 1995 it was 55%.*

2012 *– Sint Maarten was audited by the Financial Action Task Force (FATF). The result of the audit was that St. Maarten was in noncompliance in 26 of 28 FATF recommended regulations. A consequence of the negative FATF audit is the blacklisting of a country.*

4. Gambling History on St. Maarten

Over the past 40 years and presently, St. Maarten continues to be a well-known tourist destination (TEZVT Casino Policy, 2011). In the early years of tourism and resort development, most developers and owners considered the addition of Casino facilities to be important an amenity to draw visitors to their resort and St. Maarten (HPS consulting, 2013). Presently, St. Maarten gaming sector has transformed tremendously and is namely dominated by Casinos, Lotteries, and newly introduced Online gambling. However, other forms of gambling such as betting and cock fighting undoubtably exist, but have not been formally identified, measured, or regulated. Even the idea of a National Lottery for the island has been considered. Moreover, although the way we gamble (land based[31] and online) locally has shifted and grown exponentially over the years, effective and efficient collection of outstanding taxes by government from the industry remains to be elucidated (HPS Consulting, 2013; General Audit Chamber, 2021; GLI, 2022).

Noteworthily, gambling is legal[32] on French Saint Martin where France gambling laws apply [33]. The gaming industry is licensed and regulated by the French government. The main form of gambling that take place on the French side is online gambling[34] (sports betting, poker, horse race betting, and lottery), which has been legal since 2010. There are no land base casinos, and the island does not have its own lottery. However, the lottery in France and its territories is a state monopoly of the government-owned company, Française des Jeux. Some online lotteries still accept lottery players from St. Martin, despite this (they are licensed in countries, where offering lottery services to French citizens is legal), locals can also buy lottery tickets on these platforms. Taxation of the gaming industry on the French Side is extremely high; depending on the games offered (37.7% horse racing, 40.8% online poker, 55.2% online sports, 44.5% retail sports betting, lottery 54.5%, and 42 % for bingo, keno, and raffles) tax based on gross gaming revenue annually is implemented. Moreover, gaming clubs i.e., casinos, VIP, entrance fee and dress code can cost 10% –70% of revenue ranging €100,000 – €500, 000 **(Appendix 3, Table C9)**. Therefore, French Side citizens and visitors gamble on the Dutch Side of the island.

[31] Land base casinos are traditional brick and mortar gaming and gambling places.

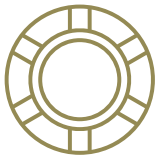
[32] French gambling act: Article L.320-1 of the French Code of Homeland Security (Chapitre préliminaire: Dispositions communes – Articles L320-1 à L320-18)

[33] https://simonsblogpark.com/onlinegambling/simons-guide-to-gambling-in-the-collectivity-of-saint-martin/

[34] Online gambling Law 2010-476 (Loi no. 2010-476 du 12 mai 2010 relative à l'ouverture à la concurrence et à la régulation du secteur des jeux d'argent et de hasard en ligne)

4.1 1996 – The severity of Resident Play on St. Maarten

In 1996 St. Maarten's Executive Council hired consultants **Coopers & Lybrand** to conduct an evaluative study on the gaming industry on the island. The study evaluated and analyzed capacity and expansion, fiscal impact (taxes and fees), licensing, and internal control environment. But also included meetings, interviews, surveys, and observations with industry representatives and the Government.



The study reported 3 distinct Casino types on the island at the time: Resort Facilities, Stand-Alone Casinos, and Front Street/ Philipsburg Casinos. After Hurricane Luis in 1995, 7 of the 10 Casinos remained in operation: 6 in Resort Facilities, 2 stand-alone, 2 in Front Street/ Philipsburg. Results reported 26 years ago depicted alarming interaction of resident play stating that although residents frequented all three types of Casinos, stand-alone and Front Street/ Philipsburg were the most popular amongst that group. ***"The two main sources of revenue for Casinos on Front Street are cruise ship arrivals and Island residents, while land-based tourist constitutes a smaller portion of their gaming income"***.

4.2 1996 – St. Maarten compared to other Countries in the Region

The study also made a comparison list of Caribbean gaming jurisdictions and narrowed it down to 4 islands by analyzing their casino performance and demand characteristics to St. Maarten (Coopers and Lybrand, 1996). Those 4 islands were Bahamas, Puerto Rico, Curaçao, and Aruba, coined the "competitive set". On each island of the competitive set, land-based tourists represented most of the demand for Casinos, since air travel tourism was more dominant than cruise ship tourism at the time. However, resident play on each island, besides the Bahamas[35] and Puerto Rico tremendously outweighed tourist play by 267% in Curaçao, 53% in Aruba, 867% in St. Maarten (prior to Hurricane Luis), and 1176% in St. Maarten (after Luis). Resident play in Puerto Rico was 29% lower than tourists in 1996 (**Table 5**). ***"St. Maarten had the highest resident generated Casino revenue of any island in the competitive set. The St. Maarten casino industry's reliance on resident-generated play was significant prior to Hurricane Luis, but increased from $203 per person prior to the storm, to $286 after the storm; a 32% percent increase. This was substantial in wake of a 40% decline in overall Casino revenue in the 12 months following the Hurricane."*** (**Table 5**). Of the 10 major Caribbean gaming destinations in 1995, St. Maarten placed top 5 (**Appendix 2, Table B**).

[35] The Bahamas prohibited residents from gambling in 1996.

Table 5: 1996 Competitive Caribbean Gaming Jurisdiction

Island	Total Casino Win	Tourist Share	Tourist Win	Resident Share	Resident Win	Annual Tourists	Cruise Ship Tourist	Land Base Tourist	Resident Population	Revenue Tourist	Revenue Resident
Bahamas[1]	$277,000,000	100%	$277,000,000	0%	$0	3,141,000	1,543,000	1,598,000	257,000	$88	$0
Puerto Rico	$162,000,000	60%	$97,200,000	40%	$64,800,000	4,022,000	980,000	3,042,000	3,800,000	$24	$17
Curaçao	$30,000,000	40%	$12,000,000	60%	18,000,000	396,000	172,000	224,000	164,000	$30	$110
Aruba	$60,000,000	90%	$54,000,000	10%	$6,000,000	916,000	802,000	614,000	67,000	$59	$90
St. Maarten[2]	$30,000,000	**75%**	$22,500,000	**25%**	$7,500,000	1,401,000	729,000	672,000	37,000	**$21**	**$203**
St. Maarten[3]	$18,000,000	**45%**	$8,100,000	**55%**	$9,900,000	848,000	501,000	347,000	37,000	**$21**	**$268**

Notes:

[1] In 1996, Bahamas prohibited resident play from gambling.

[2] Twelve-month period September 1994 – August 1995 (Prior to Hurricane Luis)

[3] Annualized twelve-month period September 1995 – August 1996 (Subsequent to Hurricane Luis)

Sources: Coopers & Lybrand (1996). Government of St. Maarten Gaming Industry Study.
Caribbean Tourism Organization, Smith Barney, International Casino Guide, St. Maarten Department of Tourism, 1996

On October 29th, 1996, the consultants reported to the Executive Council that in 1994 **resident share in the gambling industry was 25% and more than doubled to 55% by 1995** (**Table 5**) (Coopers & Lybrand, 1996; TEZVT Casino Policy, 2011, HPS Consultancy, 2013).

4.3 2012 – Financial Action Task Force (FATF)

Sint Maarten was audited by the Financial Action Task Force (FATF) in March 2012 (HPS Consulting, 2013). The FATF is an inter-governmental body established in 1989 by the Ministers of its Member jurisdictions. The objectives of the FATF are to set standards and promote effective implementation of legal, regulatory, and operational measures for combating money laundering, terrorist financing and other related threats to the integrity of the international financial system. The result of the audit was that Sint Maarten was in noncompliance of 26 of the 28 FATF recommended regulations. The extreme consequence of an FATF audit is the blacklisting of a Country.

Chapter 5 Summary: Current structure of the Gaming Industry of St. Maarten

The Ministry of Tourism, Economic Affairs, Traffic and Telecommunications (TEATT/TEZVT) *currently oversees the gaming industry on the island. Within the Ministry of TEATT the department Inspection and Control heads two sections in gaming; Casino Control and Economic Control. These sections are tasked by law to control gaming establishments.*

Additionally, the Ministry of Finance also plays a role. The departments of Finance invoices casinos and controllers, Receivers Office collects the fees, and Tax Administration applies normal taxes levied.

Establishment of the Gaming Authority *– The Ministry of TEATT no longer meets the contemporary requirements of an adequate and responsible supervisory regime. Therefore, a new independent 'zelfstandige bestuursorgaan (ZBO)' authority is being established – The St. Maarten Gaming Authority (SMGA).*

SMGA objective: ***(1)*** *achieve compliance with Caribbean Financial Action Task Force (CFATF) and Financial Action Task Force (FATF);* ***(2)*** *create an effective and efficient regulatory body and framework to elevate the integrity of the industry and quality of gaming and gambling.* ***(3)*** *promote awareness of the potential addiction risks associated with gaming and gambling and make sure operators take effective measures to prevent gambling addiction.*

St. Maarten in collaboration with the Dutch Temporary Work Organization (TWO) developed a plan of approach to establish the SMGA as part of the country's national package, measure H2. A SMGA-workgroup consisting of 7 members of 3 ministries ***(4)*** *TEZVT,* ***(1)*** *Finance,* ***(1)*** *VSA, and* ***(1)*** *Legislative lawyer is working to establish the SMGA.*

Scope of the current Local Gaming Industry

There are 25 gambling licenses (i.e., 15 Casino, 7 Lottery, and 3 Online) on the island, and 23 are operational. However, when the number of gambling opportunities are combined locally; we have 2,167 casino machinery, 75 table and card games, 15 lottery games, 361 lottery facilities (i.e., booths, mobile, resellers, etc.). In total, ***St. Maarten has 2, 618 gambling (accounted for) opportunities on 16 square miles. There is little to no data on the existence and operations of local online gambling.***

The Social Economic Council (SER)

SER submitted solicited advice to the Cabinet of the Prime Minister/ Minister of General Affairs concerning the placement of lottery booths in lower income areas. The districts of ***Cole Bay (55)*** *and* ***Lower Princess Quarter (89)*** *have the highest number of booths,* ***Simpson Bay (10)*** *and* ***Little Bay (10)*** *have the lowest. Seventy five percent (75%) of lottery booths are placed in the top 3 most populated areas (Cole Bay, Lower Princess Quarter, and Cul-de-Sac). These areas are highly populated and have a high population density in comparison to other districts, SER derived from the fact that those areas also house the largest portion of lower income communities.*

5. Current structure of the Gaming Industry on St. Maarten

The Ministry of Tourism, Economic Affairs, Traffic and Telecommunications (TEATT/ TEZVT) currently oversees the gaming industry on the island. Within the Ministry of TEATT the department Inspection and Control heads two sections in gaming; Casino Control and Economic Control. These sections are tasked by law to control gaming establishments (Table 6) (HPS Consulting, 2013).

The Ministry of Finance department of Finance, Receivers Office, and Tax Administration also play a role in the process. The Department of Finance invoices casinos and controllers, Receivers Officer collects the fees, and Tax Administration applies normal taxes levied on all businesses. Although the Casino operations are well structured, the structure of Lotteries and Online gambling are quite vague and not as documented.

In 2022, Gaming laboratories International (GLI) review of St. Maarten's casino market revealed that the current regulatory structure is highly inefficient and ineffective. Despite spending reasonable amounts of public funds on gaming regulation, the current system does little to mitigate known risks and nothing to maximize the economic impact of casino gaming on the island's economy or tourism industry. Consistent with the findings of past reports, there is evidence of lax accounting, failure to pay taxes, infiltration of criminal elements into the gaming operation, inability to account for or control the quality of gaming devices, risks to patron safety, inadequate licensing, and oversight and virtually no attention to responsible gaming. This is consistent with findings in numerous reports (TEZVT Casino Policy, 2011; HPS Consulting, 2013; General Audit Chamber, 2021).

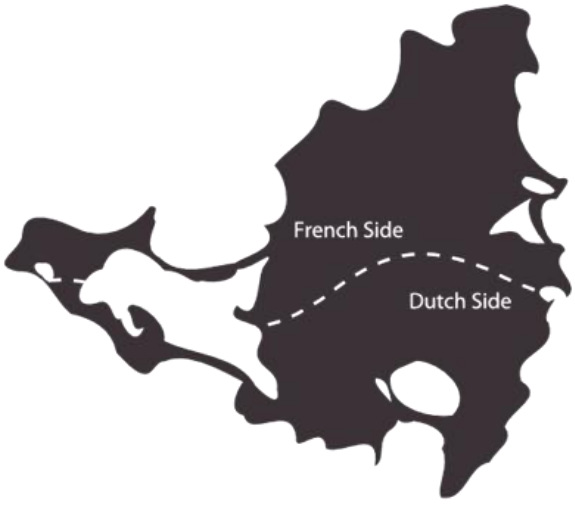


Table 6: Current structure of St. Maarten's gaming industry, 2022

Ministry	Department	Section	Task(s)	Workers and Task
TEZVT	Business Licenses and Permits		Processing and issuing of all licenses and permits (also of the gaming industry)	
TEZVT	Inspection and Control	Economic Control	• Develops, maintains, and executes orderly audits. • Conducts economic regulation inspection. • Ensures compliance with various regulations in the field of public street commerce, markets, settlement regulations and other economic regulations. • Makes correction to proposals; and provides information on audits performed	**(1)** Section Head **(4)** Economic Controllers • Controls all Gaming establishments as it relates to them having valid licenses and permits to be open to the public, e.g., business license, operating license, liquor license. • Checks if the establishments with a valid license are following the contents of the license issued, e.g., location, objectives of the NV, closing time. **(2)** Marketmeesters
TEZVT	Inspection and Control	Casino Control	• Supervises the effective control of compliance with the National ordinance on Games of Chance • Regulates issued for its implementation. • Ensures checks on the reliability of gaming equipment in casinos and introduces procedures to promote orderly surveillance of the casino industry	**(1)** Section Head **(2)** Supervisors Casino Control* **(32)** Casino Controllers*
Policy and Legislation	• Vestigingsregeling voor Bedrijven (P.B. 1946, no. 43) • Lands-verordening Hazardspelen & Eilandsbesluit h.a.m.	• Federal legislation, (PB 1993, no. 63 Hazardspelen international service lijndiensten • Loterijverordening (AB2000) & Loterij-verordening 1909 (PB1965 no.85 amended AB2000 no.2 & Eilandsbesluit h.a.m.)	• Landsverordening Hazardspelen) • Vestigingsregeling voor Bedrijven (P.B. 1946, no. 43 • Winkelsluitingverordening • Ijkwezen verordening	
TEZVT	EVT		Formulating of Economic Policies & related strategies including to guide the Gaming Industry	
Policy	Rules of the Game			

Ministry	Department/ Committee	Section	Task(s)	Workers and Task
TEZVT	**Lottery Committee**		• Tasked to have one of its members present at all "number's drawings" to monitor and ensure the drawing takes place in an orderly, honest, and legitimate manner. • To some extend guarantee the compliance of the paying out of the monies to the ticketholders of the winning numbers	2 Members*
Policy and Legislation	• Loterijverordening AB2000 • Loterijverordening 1909 PB1965 no.85 amended AB2000 no.2 & Eilandsbesluit h.a.m			
Finance	Finance Department		Invoice Casinos and Controllers fees	License fees Casino Controllers fees
Policy and Legislation	• Speelvergunningsrecht/Legesverodening AB 1983 no 11			
Finance	Tax Administration		Applies normal taxes levied on businesses. With the granting of 10-year periods of tax holidays, most resorts are charges 2% profit tax *	Conducts audits
Policy and Legislation	• General Ordinance for Federal Taxes			
Finance	Receivers Office		Collects fees	
Policy and Legislation	• Speelvergunningsrecht/Legesverodening AB 1983 no 11 • General Ordinance for Federal Taxes			

Elucidations:

- Seemingly there is also no gaming tax charged as known in many other Gaming jurisdictions, besides the fixed casino fee currently being paid by the Casino Operators (HPS Consulting 2013)
- TEZVT organizational structure calls for 4 Casino Control Supervisors, but there are only 2 currently active (TEATT, 2022)
- HPS Consulting 2013 report states 45 Casino Controllers, but TEZVT reported that 32 are currently active (TEATT, 2022)
- HPS Consulting 2013 report states 3 Lottery Committee seats are available but only 2 were filled at the time.

5.1 Establishment of the St. Maarten Gaming Authority Workgroup

The existing supervisory regime (the Ministry of TEZVT) regarding the admission and management of providers of games of chance no longer meets the contemporary requirements of an adequate and responsible supervisory regime. Therefore, to provide adequate regulations regarding games of chance and supervision in this regard, the National Ordinance on Games of Chance is being drafted. The Ordinance will provide for the establishment of a Gaming Authority as supervisor of the sector of games of chance. The Gaming Authority will be set up as an entirely new institution, with implementation innovation as a central objective, to create a modern, lean, and highly efficient organization.

March 2021, St. Maarten in collaboration with the Dutch Temporary Work Organization[36] (TWO) developed a plan of approach to establish the SMGA as part of the country's national package as stated in measure H2. On May 25th, 2021, a SMGA—Workgroup was created by *Ministriele Besluit* (Nr.2022/628) to facilitate the process. The workgroup is tasked with 3 core objectives; **(1)** achieve compliance with Caribbean Financial Action Task Force (CFATF) and Financial Action Task Force (FATF); **(2)** create an effective and efficient regulatory body and framework to elevate the integrity of the industry and the quality of gaming and gambling in Sint Maarten; **(3)** and promote awareness of the potential addiction risks associated with gaming and gambling and make sure that operators take effective measures to prevent gambling addiction. The workgroup consists of **7** members representing three Ministries: **(4)** TEZVT, **(1)** Finance, **(1)** VSA, and **(1)** legislative lawyer. However, due to lack of cross-departmental communication within VSA, the Ministry's representative officially joined the group on July 18th, 2022. The Ministry acknowledges the missed opportunity to be part of the discussion from its inception. Nevertheless, since joining the Ministry has been committed to bringing about the necessary change.

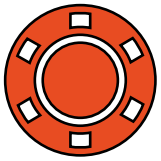
[36] The TWO was created by the Ministry of Interior and Kingdom Relations to support Aruba, Curaçao and St. Maarten with the reforms and measures in the Country Packages. The TWO does this in collaboration with other Dutch ministries, which provide expertise on the subject matter.

5.2 Scope of the current Local Gaming Industry

5.2.1 Casinos

Casino licenses are granted for a duration of 5 years. Policy states that moratoriums[37] are instituted on standalone casinos but not for casinos within hotels. The operational status of local Casinos has fluctuated over the years from (**10**) in 1995, (**7**) in 1996, (**13**) in 2011, (**14**) in 2013, (**14**) in 2021, and (**13**) in 2023 (Coopers & Lybrand, 1996; TEZVT Casino Policy, 2011; HPS Consulting, 2013; General Audit Chamber, 2021; TEZVT, 2022). To date, **16** casino licenses has been issued but **13** are operational[38] (TEZVT, 2021; HPS Consulting 2013; General Audit Chamber, 2021) (Table 9, 10 & **Appendix 3; Table C3 & C4**).

In 2021, "*The total number of slot machines from all casinos amount to approximately **2,150**. **Princess Casino has the highest number of slot machines on its premises with 319 and Diamond Casinos has the lowest with 58 machines.** Other machines available for use are bingo, sport book and key master machines. Sport book machines are totaled at 11 while the availability of bingo and key master machines are recorded at 3 each. Throughout all casinos, **11 types of games are available to visitors**. 'Black Jac' is the most widely available game with a total of 23 tables and 'Ultimate' is the least available game with only 1 table available."* (TEZVT SMGA Verification report, 2021).



5.2.2 Online gambling

Licenses for online gambling have a 5-year duration, and the annual license fee is based on the duration of the license. However, the amount of the license fee can be determined again after a period of two years (TEZVT, 2023). There is also no data to be found on our online gambling, no policy, or reports. Our online casino legislation is based on a 1993 ordinance[39]. St. Maarten currently has 3 online gambling licenses that are operational (Table 9, 10).

[37] Moratoriums: max. 5 stand-alone casinos in Philipsburg; max. 5 stand-alone in the Simpsonbay strip area.
[38] 13 Operational Casinos: 5 stand-alone in Simpsonbay/ Maho area, 5 in Philipsburg area, and are 3 situated on hotel premises.
[39] National ordinance offshore hazard games: https://lokaleregelgeving.overheid.nl/CVDR142240?&show-wti=true

5.2.3 Lotteries

Lottery licenses are granted for a duration of 5 and can be extended for a period of up to 5 years. Currently there is a moratorium on the number of allotted lotteries 7, it was previously 4 in 2012 (TEATT, 2022). Of the 7 licenses, there is approximately 361 lottery facilities[40] through which tickets and diverse number lotteries are sold. St. Maarten Lotteries offer **(4)** types of games, Lotto, Sweepstakes, Number Lottery and Scratch Lottery, and a combined total of **15** games are available (TEZVT SMGA Verification report, 2021) (Table 9, 10 & **Appendix 3; Table C6**).

As it pertains to lottery booths, in 2012 Minister Romeo Panthophlet of TEATT raised the limit on lottery licenses from 4 to 7 under the justification of creating additional jobs and tax revenue. In 2019, the TEATT's Minister Steward Johnson issued a policy amendment and moratorium on the construction or erection of lottery booths[41] (SER, 2023). The policy also implemented a branch license *"for every location selling lottery tickets for and on behalf of the lottery company"*. Additionally, the policy also applied a branch license fee of NAF 1250 in accordance with the National Ordinance regulating the Levying and Collection of Precario Duties and Fees. This was motivated by *"concerns of undesirable development in the lottery gaming industry with the sporadic erection of lottery booths and illegal sale of lottery games most pressing"*.

The moratorium was motivated by *"the need to determine the best methodology to properly allocate the number of allowed lottery booths and other types of sales outlets per license holder, in such a way that it is fair and acceptable to all parties as well in the general best interest."*

In 2020, Minister Mellissa Arrindell-Doncher of TEATT suspended the requirement of branch licenses and the payment of branch license fees, no motivation was provided. Be that as it may, the moratorium on lotteries is still in effect.

[40] Facilities include booths, containers, machines placed in businesses, sales through mobile phones and the head offices from which the license holders operate.

[41] Amendment lottery license policy, 27 September 2019

Noteworthily, The Social Economic Council (SER) submitted solicited advice to the Cabinet of the Prime Minister/ Minister of General Affairs concerning the placement of lottery booths in lower income areas on February 13th, 2023. SER's advice was triggered by member of Parliament, Melissa Gumbs, on October 29th, 2020, who was concerned about the growing number of lottery booths and kiosks considering the economic effects of the COVID-19 pandemic.

The advice request posed three questions to be answered by SER:

1. *The number of lottery booths on the island prior to Hurricanes Irma and Maria as compared to the number of today (2020).*
2. *The socio-economic impact on the communities in which these lottery booths are places; and*
3. *The support available to those who may suffer from gambling addiction in these communities.*

Registered Lottery booths

Of the approximate 360 lottery facilities, SER found that between 2019 and the first quarter of 2021, 111 booth were registered as locations from which lottery tickets are physically being sold on Sint Maarten (SER, 2023 & TEZVT, 2023). Lottery license holders are legally obliged to inform the Department of Economic, Transportation, and Telecommunication (ETT) in the event additional are established in addition to existing lottery booths. However, it's reported that in practice holders do not adhere to their obligations and therefore the number of active booths may not align with the actual number of lottery booths on the island. SER suspects that the 111 booths may have significantly increased by now.

For comparison, in Curaçao (171 square miles) the number of lottery booths are capped at 362 locations and each permit grants the possibility to open 70 locations, that's 2.11 locations per square mile.

St. Maarten, which is 16 square miles, has 6.9 registered lottery booths per square mile. If we consider the 360 lottery facilities, that's 22.5 lottery opportunities per square mile for St. Maarten!

Geographical distribution of the number of Lottery Booths (up until 2021)

SER reported that the 111 lottery booths are divided over 9 districts (**Table 7**) (SER, 2023). The districts of Cole Bay (55) and Lower Princess Quarter (89) have the highest number of booths, Simpson Bay (10) and Little Bay (10) have the lowest. Also reported is that of 2017, **Lower Princess Quarter** (10, 833), **Cul-de-Sac** (8, 588) and **Cole Bay** (7,194) are the most populated districts on the island. **These areas are highly populated and have a high population density in comparison to other districts, SER derived from the fact that those areas also house the largest portion of lower income communities**.

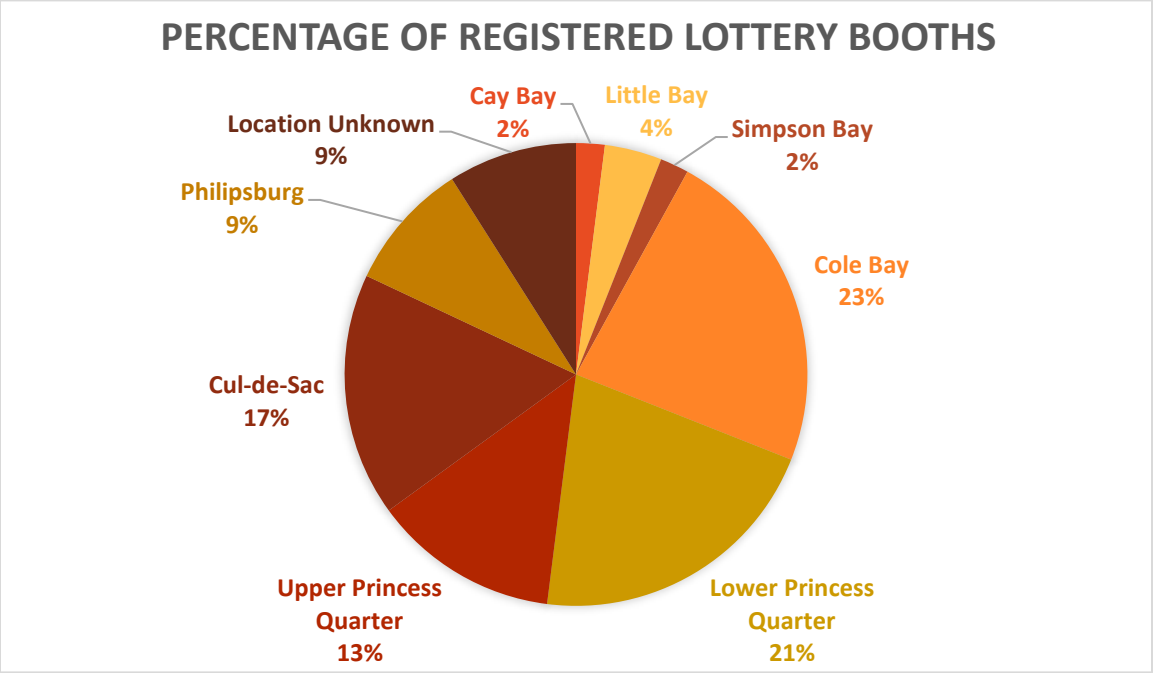
Therefore, 75% of lottery booths are places in the top 3 most populated areas consisting of significantly more people stemming from lower income communities than other districts (Table 7, Graph 1). Twenty-five percent (25%) of all sale points are in the Lower Princess Quarter area.

Table 7: Overview of the registered sale points from 2019 up until 2nd quarter of 2020 (SER, 2023)

Location Sale Points 2019 – 2020									
District	**Cay Bay**	**Cole Bay**	**Cul de Sac**	**Little Bay**	**Lower Princess Quarter**	**Philipsburg**	**Simpson Bay**	**Upper Princess Quarter**	**Location Unknown**
Registered lottery booths	2	25	19	5	23	10	2	15	10
Registered mobile booths	2	15	14	3	35	8	0	9	63
Registered machines	1	6	14	1	20	8	6	3	0
Other	0	9	1	1	11	9	2	0	4
Total	5	55	48	10	89	35	10	27	77

* Includes headquarters, offices, and containers.
** Location unknown as these locations is registered as future booth of which the location must be determined, or the registered address is unclear.

Graph 1: Overview of registered lottery booths on Sint Maarten by district between 2019 – 2020 (SER, 2023)



"The placement of lottery booths in lower income communities' ties into the social and economic standing of a persons living in these communities and their motivation to improve their socioeconomic standing."

SER also reported that people with significantly fewer financial capabilities are more likely to participate in gambling activities, as they are motivated to improve their socioeconomic standing. Additionally, the placement of many lottery booths is located within 100 meters of various vulnerable social groups such as schools, clinics, churches, banks and rehabilitation centers, retirement homes, etc.

All form of addiction on St. Maarten

In correlation to this report's findings, SER was also unable to obtain data from Turning Point Foundation on the total number of persons suffering from gambling addictions locally (SER, 2023). Be that as is may Turning Point was able to provide data on the number of persons locally suffering from all forms of addiction (**Table 8**).

Table 8: Turning Point patient care 2020 – 2022.

Turning Point Foundation Patient Care			
Year	**2020**	**2021**	**2022**
Outpatient Care	0	27	40
Inpatient Care	11	11	18
Total	**11**	**38**	**58**

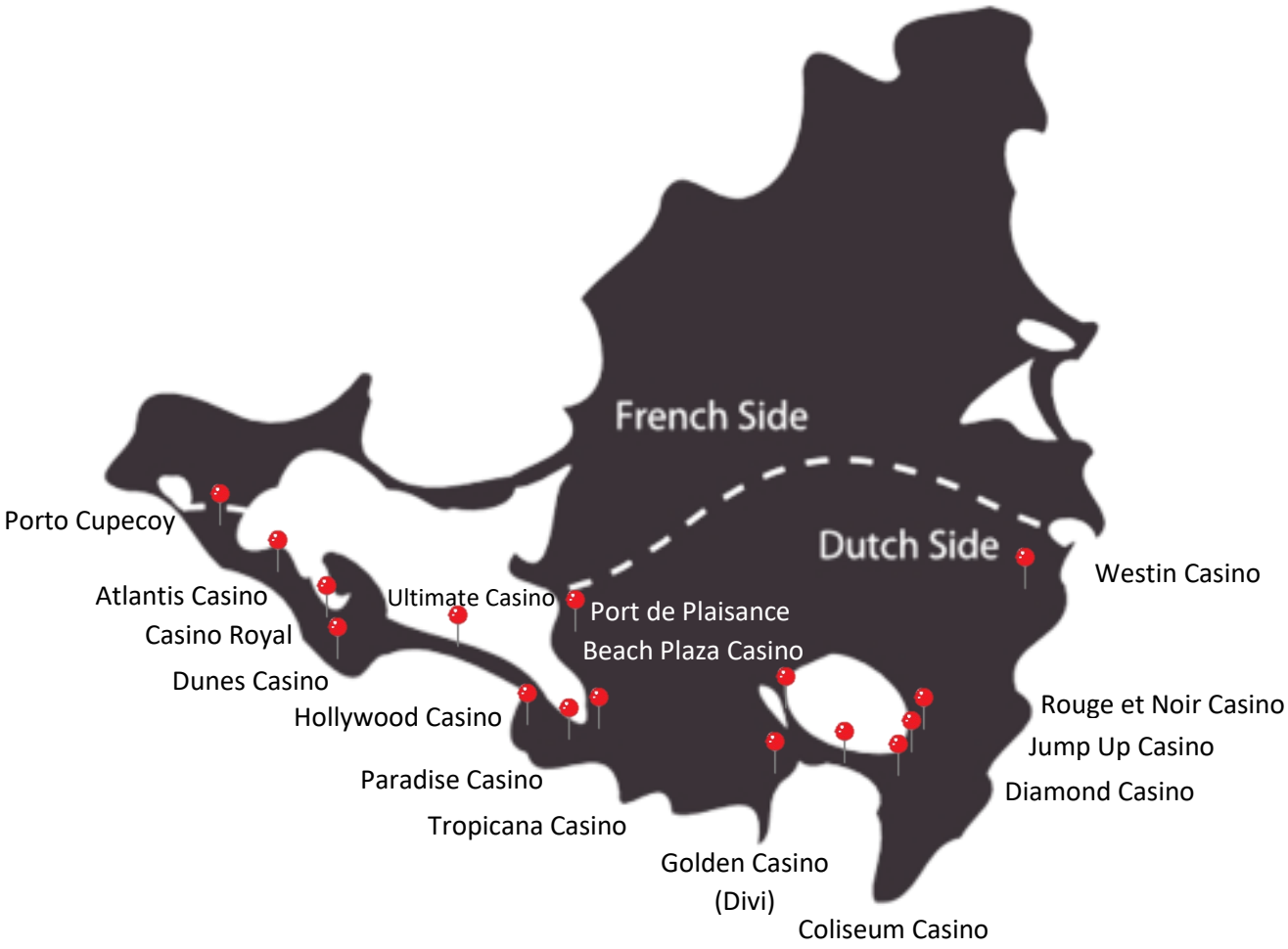


Figure 2: Overview of land-based Casinos on St. Maarten

5.2.4 Overview of the St. Maarten Gambling Industry

Table 9: List of all Casinos, Online gambling, and Lotteries on St. Maarten

No.	Casinos	Doing Business As (DBA)	Year of Establishment	Hotel / Stand Alone/ Varying locations	Operational as of 2023
1	Babitbay Beach Development N.V. (Westin Hotel)	Westin Resort & Casino	2006	Hotel Dawn Beach	X
2	Corlac Games N.V.	Porto Cupecoy (a.k.a Stars)	1991	Stand Alone Cupecoy	✓
3	C.M & M Services N.V. (Previously Resort of the World N.V.)	Casino Royale	2021	Hotel Maho	✓
4	Dutch Caribbean Resort (D.C.R) N.V.	Hollywood Casino	2001	Hotel Bily Folly	✓
5	Funtime N.V.	Rouge Et Noir Casino	1982	Stand Alone Philipsburg	✓
6	G.N. Entertainment N.V.	Dunes Casino	2011	Hotel Simpson Bay	✓
7	International Race & Sports Consultants N.V.	Jump Up Casino	2001	Stand Alone Philipsburg	✓
8	Millenium Star N.V.	Ultimate Sports Casino	2013	Stand Alone Simpson Bay	✓
9	Oasis Gaming Company N.V.	Tropicana Casino	1999	Stand Alone Cole Bay	✓
10	Play To Win N.V.	Paradise Plaza	1999	Stand Alone Simpson Bay	✓
11	Port De Plaisance Hotel Management N.V.	Princess Casino	1999	Stand Alone Cole Bay	✓
12	Sint Maarten Games N.V.	Beach Plaza Casino	2001	Stand Alone Philipsburg	✓
13	Sint Maarten Resorts Hotel & Casino N.V.	Golden Casino (Divi Little Bay)	1979	Hotel Little Bay	X
14	Trimerit N.V.	Diamond Casino	1997	Stand Alone Philipsburg	✓
15	Vegas Amusement N.V.	Coliseum Casino	1989	Stand Alone Philipsburg	✓
16	*AWG Holding CO. N.V.	Atlantis Casino (Starnet Gaming)	?	Stand Alone Cupecoy	X
	Online gambling				
17	**	**	**2014	Online	✓
18	**	**	**2014	Online	✓
19	**	**	**2018	Online	✓
	Lotteries				
20	Gold Chest Enterprise N.V.	Mega Lotto	1999	Booth	✓
21	Gold Pot N.V. (Managing company Prodigal Lottery Services N.V)	Caribbean Lottery (Formally St. Maarten Lotteries)	1997	Office/Machine	✓
22	Jamaroma Lottery N.V. (Managing company Smart Play N.V)	Robbie's Lottery	2011	????	✓
23	Kinfolk Lottery Company N.V.	Freddy Fernandez/Kinfolk Lotto	2015	Booth/ Mobile/ Container/Booth	✓
24	Majula Gaming N.V.	????	2014	????	✓
25	My Lucky Day N.V.	Mega Lotto	2013	HQ/Booth/Mobile	✓
26	Smartplay N.V.	Robbie's Lottery	1990	Booth/Mobile	✓

The information for this table was provided by TEATT 2023 and HPS Consulting report 2013.
* Reports state that Atlantis casino is now Porto Cupecoy. However, its former location still stands though closed. It's unclear whether Porto Cupecoy is a separate license from that of Atlantis.
** The ministry of TEVZT did not provide VSA with information on the online gambling industry, deeming licenses that were granted in 2014 and 218 as "sensitive info". VSA was unable to ascertain which online license were granted in 2014 and which in 2018. The number of online licenses is suspected to have risen than what is reported.
? = unclear or not stated

Table 10: Overview of gambling opportunities on St. Maarten (Dutch Side)

Gambling Facility	Number of Licenses (2013)	Number of Licenses (2023)	Machinery 2013	Machinery 2023	Number of available gaming table/ card games (2013)	Number of available gaming table/card games (2023)	Facilities/Offices/ Booths/Resellers etc. (2013)	Facilities/Offices/ Booths/Resellers etc. (2023)
Casino	**14** (licenses) 14 (operational)	**15** (licenses) 13 (operational)	**3, 574** slot machines **(5)** betting book **(2)** bingo **(?)** master key machines	**2, 150** slot machines **(11)** sports book machines **(3)** bingo **(3)** master key machines	**(2)** Craps **(15)** Roulette **(38)** Blackjack **(50)** Poker	**(0)** Craps **(14)** Roulette **(23)** Blackjack **(12)** Caribbean stud **(1)** Let it ride **(8)** 3 card poker **(0)** 4 card poker **(0)** Regular poker **(4)** Baccarat **(11)** Texas Hold' em **(2)** Ultimate	14 Casino facilities	13 Casino facilities
Online gambling	0*	3	N/A	N/A	?	?	N/A	N/A
Lottery	4**	7	NR	NR	NR	**(3)** Lotto **(7)** Number lottery **(3)** Scratch lottery **(2)** Sweepstakes	**(3)** Offices **(1)** Kiosk **(54)** Business Resellers *** **(32)** Booths **(160 – 200)** walk along resellers	**(1)** Office **(111)** Booths **(153)** Sales through Mobile Phones **(2)** Head Quarters **(1)** Container **(20)** Machines places in businesses **(73)** Unaccounted types
Total	**18**	**25**	**3,581**	**2,167**	**105**	**90**	**264 – 304**	**374**

Data for this table was sourced from HPS Consulting Situational Analysis 2013, TEATT SMGA Verification Report 2021, and the Ministry of TEATT, 2023.

Master Key machines are slot machines with multiple games.
Meanings: **N/A**: not applicable | **NR =** Not Recorded |**? =** unclear
Based on the vary reporting objectives, some data was not measured and is therefore unavailable when comparing 2013 to 2023.
* The first Online gambling license was established in 2014 on St. Maarten.
** HPS Consulting reported 3 visible operating lotteries (Sept 2013), but TEZVT lottery license policy reported 4 licenses (Dec 2013)
*** 40 resellers of which three in St. Eustatius were reselling for St. Maarten

Figure 3: Number of Gambling Licenses on St. Maarten 2013 vs 2023.

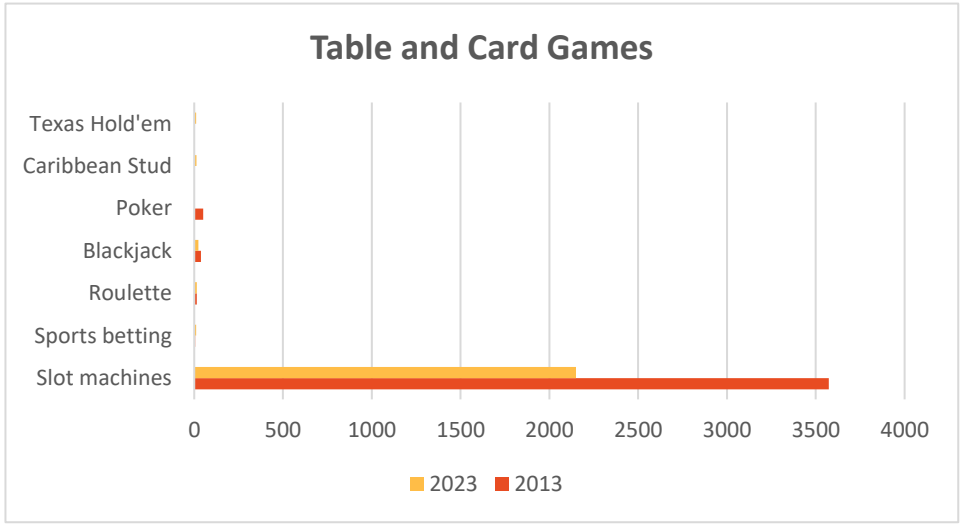


Figure 4: Number of Table, Card, and Lottery Games on St. Maarten 2013 vs 2023.

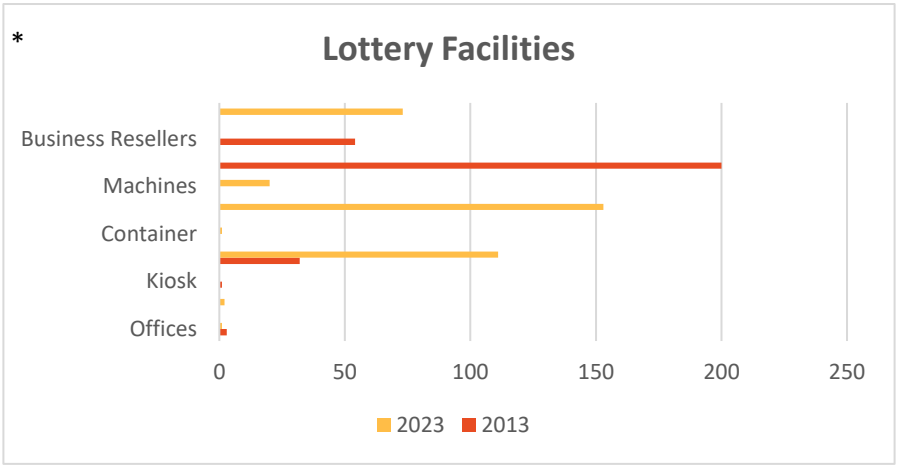


Figure 5: Number Lottery Facilities on St. Maarten 2013 vs 2023.

* **Figure 5:** Unaccounted types were not specified within TEATT's documents

Bear in mind, although there are 13 Casinos operational, this report was unable to ascertain whether the 2 other casino licenses have been revoked. With that in mind, they are still considered eligible for reactivation. Based on legislation, the Minister of TEATT has the authority to revoke a gaming license for a company that is not operational[42]. To reinstate an operator's license, the license holder must submit a request once operational. The Minister will then decide based on the current legislation and policy.

Another key observation is that the numbers for machinery, table and card games, facilities, booths etc. provided are decent indications but it is suspected that they underrepresent the current situation. Conversations with key stakeholders and local citizens reveal that in many restaurants, shops, bars etc. there are slot machines and gaming tables present. Therefore, many types of (known) gambling venues outside of the designated casinos and lottery facilities are unaccounted for when reporting on the industry. Moreover, conversations with locals that partake in gambling reveal that slot machines (located outside of casinos) often do not accept cash. Once a player pays a barman for instance, funds are credited digitally to the machine. In these people's opinion that resembles a form of online gaming. Additionally, locals report having access to apps like "Chatochi[43]" which allows them to participate in sports betting and lottery games in which prizes are usually received in the form of credit.
It's the role of the inspectorate of TEATT to surveil and shutdown any illegal (not having a license) gaming.

Furthermore, there is also a lack of a standardized method of labeling the industry. As seen in table 10, figures 3 – 5 reporting inconsistencies are very apparent. Labeling like Table and Card games are labeled "Table Games" (**Appendix 3; Tables C3 –C5**), Resellers or Business resellers, Betting Book or Sports Book Machines, and Unaccounted types are examples of this inconsistency. Figure 4 'Table and Card Games' only consists of data from slot machines, betting book and sports book machines, roulette, blackjack, poker, Caribbean stud, and Texas Hold'em because those games provided have comparable data.

[42] COUNTRY REGULATION containing provisions regarding the operation of games of chance to promote tourism. https://lokaleregelgeving.overheid.nl/CVDR208375

[43] Chatochi: On google play and the app store the app is described as a messaging service that allows users to contact companies and service providers that participate in Chatochi directly for service and requests. https://apps.apple.com/nl/app/chatochi/id1473942885

In summary, there are 25 gambling licenses (i.e., 15 Casinos[44], 7 Lotteries, and 3 Online) on the island, and 23 are operational. However, when the number of gambling opportunities are combined locally; we have 2,167 casino machinery, 75 table and card games, 15 lottery games, 361 lottery facilities (i.e., booths, mobile, resellers, etc.). **In total, St. Maarten has 2, 618 gambling (accounted for) opportunities on 16 square miles** (Table 10, Figures 3—5).

5.2.5 Employees within the Casino Industry

All businesses on St. Maarten are required by law to register their business and employees[45]. Labor registration consists of (1) business registration, (2) personnel registration, and (3) workbook and should be updated yearly. However, not all companies and thus casinos and lotteries comply with the mandate as seen in tables 11 and 12. Therefore, employee information pertaining to the gaming industry was only obtained from select casinos that do comply. No information was ascertained from the lottery or online casino industry. **Noteworthy:** The department of STATs was able to provide some additional insight into the industry (**Appendix 3; Table C7 & C8**).

Information for **Tables 11 and 12** was sourced from the Department of Labor Affairs in 2023. Both tables depict the number of casino employees, age range, and gender.

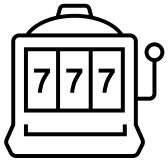


Table 11: Number of Employees per casino from 2017 – 2022.

No.	Casino	2017	2019	2020	2021	2022	Total
1	Rouge et Noir		81	40	34		**155**
2	Diamond	57					**57**
3	Hollywood		52				**52**
4	Casino Royale		68	79	60	69	**276**
5	Divi Little Bay		62			2	**54**
	Total	**57**	**263**	**119**	**94**	**71**	**604**
Missing numbers represent unrecorded data in those years. Additionally, there is no information to be found on the other remaining casinos.							

[44] Although 13 casinos are currently operational, the other 2 licenses a have not been revoked.

[45] St. Maarten Labor Registration: http://www.sintmaartengov.org/government/VSA/Department-of-Labor - Affairs/Pages/Labor-Registration.aspx

Table 12: Casino employees by age and gender from 2017 – 2022.

Age in years	2017	2019	2020	2021	2022	Total
18 – 24	1	13	6	2	2	**24**
25 – 44	18	98	44	31	26	**217**
45 – 60	35	131	59	50	39	**314**
61 – 64	1	9	5	6	3	**24**
65+	2	12	5	5	1	**25**
Total	**57**	**263**	**119**	**94**	**71**	**604**
Gender	**2017**	**2019**	**2020**	**2021**	**2022**	**Total**
Females	42	152	67	48	34	**343**
Males	15	111	52	46	37	**261**
Total	**57**	**263**	**119**	**94**	**71**	**604**

Disclaimer: Age ranges were kept in line with the reporting standard of the 2019 Labor Force Survey.
Employees aged 18 – 21:

- Rouge et Noir employees = 4; 2 (in 2019) and 2 (in 2021)
- Casino Royal employees = 2; 1 (in 2020) and 1 (in 2022)

Jobs within casinos vary per company. However, based on data obtained from the Department of Labor Affairs and Social Services the below listed job titles are what is common locally (Table 13).

Table 13: Casino employees job functions. The listed jobs are for all permanent employees.

Lower-level Employees	Middle Management	Top-Level Management
AC technician	Cashier Supervisor	Director
Administrative assistant	Casino Cash Manager	Director & CEO
Assistant cash desk man	Casino Gaming Manager	Director of Casino Marketing
Assistant Casino Marketing	Casino Host Supervisor	Director of Finance
Bartender	Casino Shift Manager	Director of Technical Operations
Bellman	Cleaner Supervisor	Vice President of Casino Operations
Butler	Executive Secretary	Vice President of Resort Operations
Camera man	Financial Controller	
Car Valet Attendant	Financial Manager	
Carpenter	Floor manager	
Cashier	Food & Beverage Captain	
Casino Host	Front office Supervisor	
Cleaner	General Manager	
Cook	Income Auditor	
Dealer or Casino Dealer	Kitchen Supervisor	
Driver	Maintenance Manager/Supervisor	
Electrician	Pit Boss Supervisor	
Gardener/ Landscaper	Supervisor	
Internal Cash Desk Controller	Technical Operation Manager	
Internal Control	Vault Supervisor	
Maintenance helper		
Maintenance Technician		
Mason		
Painter		
Pit Boss		
Security		
Slot Attendant		
Slot Technician		
Steward		
Surveillance Operator		
VIP Hostess/ Bingo caller		
VIP/Customer Service		
Waiter/ Waitress		

No information was found on employees within the Lottery and or Online gambling field.

5.2.6 St. Maarten Expected Gambling Revenue

In accordance with legislation, ***full-fledged* casinos** pay an annual fee of NAF 600,000 per year and ***slot machines only* casinos** pay NAF 120,000 annually[46]. TEAT's 2021 verification report states that there are 8 full-fledged casinos that offer both gaming tables and slot machines, and 5 that only provide slot machines, bingo, sports book, and key master[47] (Table 15).

Of the 7 lotteries, 3 companies offer lotto, 7 offer number lottery, 3 scratch, and 2 sweepstakes (TEATT, 2021). For each type of game offered by a lottery a monthly fee is instituted. Lottery locations that offer **lottery** pay a monthly fee of NAF 30,000, **sweepstake fees** are NAF 20,000 per month, and **number and scratch tickets** are NAF 12, 500 per month[48]. To be noted, Lottery license holders can decide whether to include all 4 games, or just one or two, for instance. The number of preferred offered games are then written on their license (Appendix 3, table C6).

Table 14 shows what government expected to collect from Casino and Lottery fees versus that was collected during 2017 – 2020 (TEZVT SMGA Verification report, 2021).

Table 14: Gaming and gambling revenue comparison overview.

Gaming and Gambling sectors revenue 2017 – 2020 in NAF			
License	**Expected**	**Actual**	**Outstanding Total**
Casino	21, 600, 000	7, 823, 539	**13, 776, 461**
Lottery	12, 840, 000	4, 575, 575	**8, 264, 425**
Total	**34, 440, 000**	**12, 399,114**	**22, 040, 886**
Bear in mind, our research was unable to ascertain the expected, actual, and outstanding totals for online gambling.			

On July 7th, 2022, The St. Maarten Daily Herald[49] reported that NAF 12 million casino fees and NAF 6 million in controller fees are in outstanding to government, some dating back to 2010. The Minister of Finance stated that a special research and collection task force was instated to assist the government in collecting outstanding fees from the industry. On October 26th, 2022, government announced[50] that it was making headway with collection via payment plans, collecting over NAF 500 million.

[46] National Decree for the implementation of Article 3 of the National Ordinance Gaming Permit Law on Hazard Games https://lokaleregelgeving.overheid.nl/CVDR208313

[47] Master Key machines are slot machines with multiple games.

[48] National Decree entailing General Measures, for the implementation of articles 3bis, third and fifth paragraphs and 4, second paragraph of the Lottery Ordinance, AB 2013, GT no. 97. https://lokaleregelgeving.overheid.nl/CVDR208349

[49] Daily Herald Newspaper: https://www.thedailyherald.sx/islands/naf-12m-casino-fees-6m-controller-fees-outstanding

[50] SXM News: https://www.smn-news.com/index.php/st-maarten-st-martin-news/41632-government-making-headway-with-the-collection-of-taxes-and-other-fees-from-casinos.html

In our research we have incorporated what the gaming industry should be making in accordance with legislation. This information can be found in table 15.

Casinos

The law[51] states that a one-off amount of NAF 200, 000 is owed when casino (that include hazard games, slot machines and bingo), licenses are granted or renewed. Per financial year the amount of NAF 600, 000 is to be paid in 12 monthly installments during the financial year (Table 15). Therefore, newly established casinos or those that renew their license every 5 years pay a total of NAF 800,000.

Venues that offer Slots and Bingo exclusively

For games of chance where the opportunity is given exclusively to venues that exclusively provides slot machines and bingo, a one-off amount of NAF 10, 000 is owed when the license is granted. Per financial year the amount of NAF 120, 000 is to be paid in 12 monthly installments during the financial year. Bear in mind, for venues that only exclusively provide slot machines and bingo, there is no renewal license fee required as with casinos.

Online gambling

Our findings reveal that the original ordinance on the Online Gaming dates to 1993[52], when the Netherlands Antilles existed. The ordinance from the Netherlands Antilles was taken over by St. Maarten (practically) unrevised during country independence in 10-10-10[53]. Our research was unable to find the National decree (Landsbesluit) in which online gambling fees are regulated.

[51] National Decree implementing Article 3 of the National Ordinance on Hazard Games; Article 1 https://lokaleregelgeving.overheid.nl/CVDR208313

[52] 1993 National Ordinance for offshore hazard games: https://lokaleregelgeving.overheid.nl/CVDR1855

[53] 2010 National Ordinance for offshore hazard games: https://lokaleregelgeving.overheid.nl/CVDR142240

However, it is highly likely that the National Decree containing the fees from the Netherlands Antilles at time was also taken up by St. Maarten during 10-10-10. Similarly, this happened in Curaçao, which has been confirmed in jurisprudence in which reference is made to both the National ordinance and the National decree[54,55]. Secondly, a license for online gaming on Curaçao dated back to 2013[56] was found in which the fee was set at NAF 10.000 per month for 5 years. Therefore, the impression is that the current fee for online games of chance licenses for St. Maarten is also suspected be NAF 10,000 per month (Table 15).

Noteworthy, in the 2014 HPS Consulting report on recommendations to a gaming authority for St. Maarten, a revenue of NAF 2, 400, 000 for 4 offshore games of chance licenses was suggested. This would amount to NAF 600, 000 in annual license fees or NAF 50,000 monthly. This is considerable mention in that the report recommends an increase in monthly fees for offshore games of chance licenses compared to what we suspect is at hand.

Lottery

The law states that a lottery, the prizes, or premiums of which consist of money or valuable paper, insofar as this lottery consists of sports competitions or lottery, a fee of NAF 30,000 per month is owed. For sweepstakes or a similar game there is a fee of NAF 200,000 per month. For number lottery and scratch lottery monthly fees are NAF 12, 500 per month respectively[57].

Based on legislation, our finding revealed that the expected total amount of revenue:

casinos	NAF 600,000
slots and bingo venues	NAF 120,000
casino controllers fee[58]	NAF 1,980,000
online	NAF 120,000
Lottery games	NAF 3,060,000
Expected Grand Total	**NAF 11,280,000**

[54] Curaçao license holder of online games of chance is liable found liable for payment of prize money: https://www.navigator.nl/document/id50470166903e4b76a033939c848ec102?anchor=id-6981b19c-8b57-483e-a87f-87ebf878b145

[55] Curaçao; bankruptcy company operates online casinos in Curaçao as a 'sublicense holder' of a licensee. https://www.navigator.nl/document/idaa80abb14a634109a98405a7555343d5/ecli-nl-oghacmb-2023-68-ghvj-23-05-2023-nr-cur2023h00144

[56] 2013 Curaçao National Decree offshore hazard games: https://files.platform-investico.nl/app/uploads/2022/05/24123926/Landsbesluit-Antillephone-september-2013.pdf

[57] National Decree entailing General Measures, for the implementation of articles 3bis, third and fifth paragraphs and 4, second paragraph of the Lottery Ordinance, AB 2013, GT no. 97. https://lokaleregelgeving.overheid.nl/CVDR208349

[58] Assuming with the closure of 2 casinos (from 15 to 13); 4 entrances were excluded in the calculation.

Table 15: Expected revenue for Casinos, Controllers, Online, and Lottery games based on legislation.

Casinos (This includes all hazard games, slot machines +bingo)	**NAF onetime and renewal license fee**	**NAF Monthly operating fee**	**NAF Annually operating fee**
Fixed fee for first time licenses or renewals	200,000		
Per financial year an operating fee is owed[59]		50, 000	*600,000*
Total annual casinos revenue			***600,000***
Venues that exclusively have slot machines and bingo	**NAF onetime license fee**		
Fixed fee for license (onetime)	10,000		
Per financial year an operating fee is owed [60]		10,000	*120,000*
Total annual venues that exclusively have slot machines and bingo revenue			***120,000***
Current situation*			
Grand total for 8 operational casinos[61] annually			*4,800,000*
Grand total for 5 venues on providing slot machines, bingo, sports book + key master annually			*600,000*
Total expected revenue from casinos sector in 2023			***5,400,000***
Casino controller fee[62]	**NAF Fixed rate**	**NAF Monthly**	**NAF Annually**
Number of casino entrances in 2014[63]	7,500	195,000	*2,340,000*
Number of casino entrances in 2023[64]			*1,980,000*
Total assumed expected revenue from casinos controller fee in 2023			***1,980,000***
Online gambling license fee[65]		**NAF Monthly**	**NAF Annually**
		10,000	*120,000*
Total expected revenue from online gambling sector in 2023[66]			***120,000***
Lottery[67]			
	Facilities in 2023	**NAF Monthly**	**NAF Annually**
Lottery (lotto + sport)	3	30,000	*1,080,000*
Sweepstake	2	20,000	*480,000*
Number lottery	7	12,500	*1,050,000*
Scratch	3	12,500	*450,000*
Total expected revenue from lottery sector in 2023			***3,060,000***
Grand expected total from gambling industry annually			NAF 11,280,000

[59] Law implementing Article 3 of the Hazard LVO; Article 1 https://lokaleregelgeving.overheid.nl/CVDR208313

[60] Law implementing Article 3 of the Hazard LVO; Article 1 https://lokaleregelgeving.overheid.nl/CVDR208313

[61] 8 full-fledged casinos offer both gaming tables and slot machines (TEATT verification report, 2021)

[62] In 2014, 15 operating casinos had 26 entrances (HPS Consulting report, Dec 2014)

[63] Fee was provided by HPS Consulting report (Dec 2014). However, this report was unable to verify via legislation.

[64] Assuming with the closure of 2 casinos (from 15 to 13); 4 entrances were excluded in the calculation.

[65] 2013 Curaçao National Decree offshore hazard games, Article 4. Only applicable for 5 years. https://files.platform-investico.nl/app/uploads/2022/05/24123926/Landsbesluit-Antillephone-september-2013.pdf

[66] At the time of this report are 3 (accounted for) online gambling licenses. The fee presented accounts for 1 new online license, for instance.

[67] National Decree entailing General Measures, for the implementation of articles 3bis, third and fifth paragraphs and 4, second paragraph of the Lottery Ordinance, AB 2013, GT no. 97. https://lokaleregelgeving.overheid.nl/CVDR208349

Chapter 6 Summary: St. Maarten current gaming and gambling legislation and policies

Gambling Legislation:

- **Casino ordinance**: *landsverordening hazardspelen & eilandsbesluit h.a.m*
- **Lottery ordinance:** *de loterijverordening (AB2000) & lotterijverordening 1909 (PB1965 n0.85 amended AB2000 no.2 & eilandsbesluit h.a.m*
- **Online gambling ordinance:** *landsverordening hazardspelen op de international markt middels servicelijndiensten/ federal legislation, PB 1993, no. 63*

Review of current Legislation

The legal expertise of Duncan Brandon & Hoeve was consulted in 2013 to review the current ordinances regulating the Gaming sector. Results revealed that gambling ordinances are outdated, not supportive to the current gaming environment, and crucial aspects related to the industry are not provisioned which leaves the gaming industry largely uncontrolled.

TEZVT Casino policy and Review

The policy focuses on four philosophical pillars; ***(1)*** *profitability of gaming institutions,* ***(2)*** *continued and eventually increased tax revenues from gaming,* ***(3)*** *balanced resident participation,* ***(4)*** *and avoidance of criminality in the industry.*

The casino policy has limited scope, ignores other gaming formats (online, professional, etc.), has no specific rules and regulations for unregulated gambling practices, lacks oversight and increase tax revenue stream, casino controllers are ineffective, and overall has no standards, rules, or regulations.

TEZVT Lottery license policy and Review

Has limited scope, has no specific rules and regulations for unregulated lottery practices, no consideration and or protection for resident play and vulnerable groups, and overall has no standards, rules, or regulations.

No policy that regulates online gambling was found.

6 St. Maarten Current Gaming and Gambling Legislation and Policies

6.1 Review of TEZVT Gaming and Gambling Legislation

The gaming Industry on Sint Maarten is regulated by three main ordinances directly related to the sector namely:

- ***Landsverordening Hazardspelen & Eilandsbesluit h.a.m***
- ***De loterijverordening (AB2000) & Loterijverordening 1909 (PB1965 no.85 amended AB2000 no.2 & Eilandsbesluit h.a.m***
- Online Gaming is regulated in the previous ***Federal Legislation, PB 1993, no. 63., LANDSVERORDENING houdende bepalingen betreffende het exploiteren van hazardspelen op de internationale markt middels servicelijndiensten***,

Additional ordinances having a link with the establishing of Gaming Establishments are:

- ***Vestigingsregeling voor Bedrijven (P.B. 1946, no. 43)*** for the licensing of Casinos.
- ***Ministeriele beschikking*** artikel 2 van de landsverordening buitengaatse hazardspelen
- ***Legesverordening*** for the fee structure and collection procedures.
- ***AB 1983, no. 11*** which stipulates the payment of the Casino Controllers' fees.
- ***Landsverordening Melding Ongebruikelijke Transacties (MOT) en Landsbesluiten h.a.m*** which stipulates reporting illegal or suspected dishonest transactions.

6.1.1 Review of current Legislation

As reported by HPS Consulting in 2013, the legal expertise of Duncan Brandon & Hoeve was consulted to review the current ordinances regulating the Gaming sector. The legal experts concluded that the current ordinances directly related to the Gaming sector are outdated and not supportive to the current gaming environment. Crucial aspects related to the industry are not provisioned which leaves the gaming industry largely uncontrolled. For example, certain types of gaming are not covered in legislation, i.e., Sports betting, Keno, or numbers via SMS.

Additionally, the lack of a legal basis for due investigations into the operations within the gaming industry was also a key observation.

6.1.2 LANDSVERODENING Hazardspelen & Eilandsbesluit h.a.m[68]

The National Ordinance contains measures regarding the exploitation of hazard games of chance to promote tourism. The Minister of TEATT is empowered to grant a license as well as temporary licenses for an event to operate games of chance. However, there is also no clear indication of the scope of games of chance. The Minister of TEATT can also grant permits for other forms of gambling such as dog runs, cockfights, and competitions in designated places.

As it pertains to prevention, the Ordinance restricts resident access to games of chance premises if frequented more than six times on different days in the same month. Access is revoked for a period of one year. Access to premises of hazards games is also not possible for those under the age of 18 and those who are in a state of intoxication. This Ordinance does not provide extensive consumer protection and the prevention of gambling addiction.

6.1.3 LANDSVERORDENING houdende bepalingen betreffende het exploiteren van hazardspelen op de internationale markt middels servicelijndiensten[69]

The Minister of TEATT is authorized to grant a license to operate games of chance on the international market by means of service lines. Permit to hold hazard games are only given to legal entities established in Sint Maarten. Within this legislation no consideration is given to social and health within the sector.

6.1.4 LOTERIJVERORDENING (AB2000) & Loterijverordening 1909 (PB1965 no.85 amended AB2000 no.2 & Eilandsbesluit ham[70]

This ordinance regulates Lotteries and their games, i.e., Lotto, Sweepstakes, Number Lottery and Scratch. The Minister of TEATT makes the decision on permits and there is also regulation on permit exemption and payment of fees by those organizations. This regulation does not apply to the National Lottery, as included in the National Lottery Regulation. Within this regulation, there are also no factors related to health or social issues regarding lotteries.

[68] COUNTRY REGULATION containing provisions regarding the operation of games of chance to promote tourism https://lokaleregelgeving.overheid.nl/CVDR208375

[69] COUNTRY REGULATION containing provisions regarding the operation of games of chance on the international market by means of service line services https://lokaleregelgeving.overheid.nl/CVDR142240

[70] Lottery Ordinance: https://lokaleregelgeving.overheid.nl/CVDR208383

6.1.5 Lottery Booths

The legislative framework for lottery booths includes the (1) National Ordinance[71], (2) National Decrees[72,73], and a Ministerial Regulation[74] in which the Minister of TEATT makes the decision to grant licenses.

The type of lotteries sold with lottery booths are guided under article 3ter of the Lottery Ordinance. *Article 3ter allows for the Minister of TEATT to "grant a license to legal entities established in St. Maarten to build and maintain: a number lottery; a lotto; a sweepstakes; and scratch lottery".* While article 3ter regulates the above listed lotteries in the Ordinance, the National Decree 3bis currently regulates these forms of lotteries[75]. Within this regulation, there are also no factors related to health or social issues regarding lotteries.

6.2 TEZVT Casino Policy 2011 – Revised Version

Fifteen years after it was originally created in 1996 TEZVT revised its 'Rules of the Game – Casino Policy'. The main objective of the policy is to regulate the number of Casinos within a selected area (TEZVT Casino Policy, 2011). It also formulates the Licensing and Application procedures for Casinos and the criteria for resident restriction to enter Casinos.

The policy focuses on four philosophical pillars; **(1)** profitability of gaming institutions, **(2)** continued and eventually increased tax revenues from gaming, **(3)** balanced resident participation, **(4)** and avoidance of criminality in the industry.

[71] Lottery Ordinance, AB 2013, GT no.121 https://lokaleregelgeving.overheid.nl/CVDR208383

[72] National Decree entailing General Measures, for the implementation of articles 3bis, third and fifth paragraphs and 4, second paragraph of the Lottery Ordinance, AB 2013, GT no. 97. https://lokaleregelgeving.overheid.nl/CVDR208349

[73] AB 2013, GT no 363, National Decree entailing general measures, in implementation of Article 5 of the Lottery Regulation. https://lokaleregelgeving.overheid.nl/CVDR143129

[74] AB 2013, GT no. 79, Ministerial Regulation, establishing the framework for forms necessary to apply for a lottery license, to establish and maintain a number lottery, scratch lottery consisting of sweepstakes or lotto. https://lokaleregelgeving.overheid.nl/CVDR207983

[75] National Decree entailing General Measures, for the implementation of articles 3bis, third and fifth paragraphs and 4, second paragraph of the Lottery Ordinance, AB 2013, GT no. 97. https://lokaleregelgeving.overheid.nl/CVDR208349

6.2.1 TEZVT Casino Policy Principles of interest to VSA

Pillars 2, 3 and 4 are of interest for VSA. The **pilar 2** of the revised policy states "*From the Coopers & Lybrand Gaming Industry Study it is clear that the island government is not receiving its "fair share" of gaming activity tax revenue as compared to other competitive destinations. A new system will be developed that meets the needs of government to derived sufficient revenue needed to aid in the socio-economic development of the island, as well as being equitable to the casino operators."*

The **pilar 3** is quoted saying *"In recent years it has become evident that neither legislation nor the casino control function is effectively limiting resident play. The situation begs the question whether government should even attempt to legislate behavior or morals as this relates to gaming and resident."*

Pilar 4 states "*that crime is usually related to players as well as gambling as a business itself. Evidence suggests that pathological gamblers are likely to engage in forgery, theft, embezzlement, drug dealing and property crime to pay off gambling debts. The huge sums involved in legalized gambling tend to attract organized crime"*.

6.2.2 Size of the casino industry

The policy also states a maximum of 5 stand-alone in Philipsburg area; (2) at the time establishments and (3) additional slots for in the future. In the Simpson Bay 'strip' a maximum of (5) stand-alone was set in which (2) establishments were already in existence and (3) slots were available. **The moratorium is only applicable to standalone casinos and not those with hotels** (TEZVT SMGA Verification report, 2021).

6.2.3 Casino location determinants

As it pertains to the location of Casinos, the policy stipulates restrictions of gambling establishments and entrance requirements. *"Establishments will not be able to be located within a radius of fifty (50) meters of sensitive buildings where there are no permanent activities (i.e., schools, churches, etc.). The transition period for pending requests with letters of intent will be exempted from this new requirement for a limited period."* **This is currently not the case with several Casino locations around the island.**

6.2.4 Casino entrance requirement

As for entrance requirements, it is stipulated that minors[76] should not be able to enter or participate in gaming activities. *"This is a protective measure that relates to the potential for abuse of gaming in society and should be strictly enforced. Other entrance requirements will be stipulated by government in the future."* **To date, several studies have reported that the policy is not in enforced, effective, or efficient** (Coopers & Lybrand, 1996; TEZVT Casino Policy, 2011; HPS Consulting 2013; GLI, 2021).

6.2.5 Attempts to mitigate resident play

To mitigate patron play, legislation was drafted and implemented to restrict resident attendance to maximum **4 times per month** (the law states 6 times), and Casino Controllers' government implemented were to ensure that the law was adhered to (**Appendix 4**, Federal Ordinance 1948; TEZVT Casino Policy, 2011, HPS Consultancy, 2013). It is however, to be noted that mitigating resident entry to Casinos by Casino Controllers had already been instituted since 1996 and possibly prior (Coopers & Lybrand, 1996). Back in 1996 Controllers were located at the entrance of each Casino and tasked with checking the identification of each resident that entered by noting their name. A list of all residents who entered each Casino was prepared daily and summarized at the end of the month.

Residents who exceeded the maximum number[77] of Casino visits were sent warning letters by the Lieutenant Governor's Office. Residents were issued a maximum of 2 warnings followed by a third which banned them from Casinos for a period of 1 year. Investigative conversations with the Section Head of Casino Control reported that Controllers execute 10 controls per year in which age requirements are surveilled and are handwritten in books (TEZVT, 2022). However, over the years and presently, nothing has been done with the collected data and lots of data has been lost during Hurricane Irma in 2017.

Since 2013, the number of Casino Controllers has been on a decline, from 52, to 45, and now to 32 in 2022 (HPS Consulting 2013, TEZVT, 2022). The instituted regulatory framework of patron protection severally lacks supervision, execution, and evaluation which has led to its overall inefficiency (TEZVT Casino Policy, 2011; HPS Consulting 2013; GLI, 2021). Lastly, the policy also reported a growing concern for residents playing in gambling establishments. The policy stated that contingencies would need to be developed to mitigate potential negative consequences to individuals. To this day it remains to be elucidated whether those contingencies have been developed or not.

[76] Minors: Sint Maarten Constitution classifies a minor as a person under the age of 18.

[77] Sint Maarten Federal Ordinance of 1948, article 1 states that residents can be denied if visits are exceeded more than 6 days in a month **(appendix 4**).

6.2.6 Challenges in the function of Casino Controllers

In 2013, HPS Consulting reported the following functional challenges with Casino Controllers (Table 16).

Table 16: Main challenges faced by Casino Controllers sourced from HPS Consulting 2013.

Non-Functioning	Challenging Work Environment
Not showing up for work.	Lack of Supervision.
Direct payment from Casino for overtime.	No vehicle for Supervisor to move between Casinos.
Gambling of controllers on their off day intrudes on the effectiveness of the one working.	No evaluation and thus very limited possibility for an increase in their salary.

6.2.7 Review of TEZVT Casino Policy

Review and key take aways from "The Rules of the Game Casino Policy":

1. Limited scope: only focuses on the number of casinos per area, does not cover zoning.
2. Ignores other possible gaming formats (e.g., online, and professional gambling)
3. No specific rules and regulations for unregulated gambling practices.
4. Lacks the depth and basis for Government to have better oversight and increase the tax revenue stream.
5. Casino Controllers entrance control for residents is ineffective, no tracking mechanism casino to casino.
6. No standards, rules, or regulations:
    a. Taxes and casino fees are not properly paid due to lack of control over financial practices of licensees.
    b. No honest gaming (consumer protection), there is no prevention of cheating by casino management or player.
    c. The industry is not corruption free. Does not prevent unsuitable or undesirable persons from having direct or indirect involvement in gaming operations.
    d. No true consideration of patron protection e.g., advertisement requirements, premises standards, and other measures.

6.3 TEZVT Lottery License Policy 2012 & 2019

In 2013 lottery moratoriums established by the former Executive Council (BC251005 agpt15) were amended and lifted. At that time there were 4 lottery licenses, 3 additional ones were added and maximum ceiling of 7 licenses was placed. The goal of the policy states that lotteries would provide economic opportunities (i.e., jobs and government revenues) (TEZVT Lottery Policy, 2013).

As previously stated in **Chapter 5 (5.2.3)** an attempt to curb the erection of the growing number of lottery booths was made in 2019 for the best interest of general population but was short lived and suspended by 2020. There is no policy to guide the overall setup and functioning of these gambling operations. (HPS Consulting, 2013).

6.3.1 Review of TEZVT Lottery Policy

Review and key take aways from Lottery License Policy.

1. Limited scope: focuses on job creation and government revenue but fails to elucidate on "how and why" in the gaming sector, also does not describe the current and desired state of the industry.
2. No specific rules and regulations for (un)regulated lottery practices.
3. No consideration and or protection for resident play and vulnerable groups (youths, young adults, elderly)
4. Does not cover entrance requirement, size of industry, location determinants, or maximum ceiling for various lottery facilities/ facilitators (i.e., offices, kiosk, resell businesses, booths, walk-along resellers)
5. No standards, rules, or regulations (same as those mentioned in Casino Policy review)

Chapter 7 Summary: Scientific Evidence on the Complexed Severity of Disordered Gambling

Classification

Gambling addiction as a mental disorder termed 'gambling disorder'. It is considered a non-substance addictive disorder. Gambling disorder is very similar to substance use disorders (e.g., alcohol, stimulants, etc.) in its clinical expression, brain origin, comorbidity, physiology, and treatment.

Key signs and symptoms of Disordered Gambling

1. Chasing losses and urgent need to keep gambling.
2. Distortions in thinking e.g., denial, superstitions, sense of power and control.
3. Belief that money is both the cause and solution to their problems.

Diagnosis

Disordered gambling is extremely difficult to identify and diagnose because individuals exhibit no obvious physical signs or symptoms.

Diagnostic Criteria

A person is diagnosed with a gambling disorder when 9 of the DSM criteria are met.

*Criteria 4 – 5 is **Mild***
*Criteria 6 – 7 is **Moderate***
*Criteria 8 – 9 is **Severe***

Differential Diagnosis

*It is imperative to differentiate individuals that are non-disordered gamblers, those experiencing manic episodes, personality disorders, or other medical conditions. These are those who are **non-disordered gamblers** (professional or recreational), those with **manic episodes**, **personality disorders**, **other medication conditions** or **medication induced problems**.*

Harm, Harmful Gambling and Gambling-related Harm

Harm is "any type of repetitive gambling that a person engages in that leads to (or aggravates) recurring negative consequences, such as significant financial problems, addiction, or physical and mental health issues". Harmful gambling behaviors exist on a continuum.

General risk factors that contribute to Harmful Gambling

***Biological** – genetics, gender, age*
***Psychological** – personality, self-perception, trauma, stressors, experiences*
***Cultural** – ethnicity, immigrant groups, religion*
***Societal** – family & peers, neighborhood, work, deviance*

Gambling-Specific factors that contribute to Harmful Gambling

***Gaming environment** – macro and microeconomics, politics, policies, laws, etc.*
Gambling exposure, proximity, accessibility, marketing & messaging, etc.
***Gaming types** – payback percentages, bonus features, timing, etc.*

7. Scientific Evidence on the Complexed Severity of Gambling

7.1 Disordered gambling in context

Classification

The 5th edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) now refers to **gambling addiction as a mental disorder termed 'gambling disorder'**. It has also been moved from its disorder class of 'impulse-control disorder' to 'substance-related and addictive disorders' and is **considered a non-substance addictive disorder** (**Appendix 5**, overview). Gambling disorder is very similar to substance use disorders (e.g., alcohol, stimulants, etc.) in **its clinical expression, brain origin, comorbidity, physiology, and treatment** (American Psychiatric Association, 2013). Scientists have reported that gambling disorders closely resemble alcoholics and drug addicts, not just by external consequences such as problem finances and destruction of relationships, but also internally (Reilly & Smith, 2013). Brain imaging studies and neurochemical tests have identified strong cases where gambling activates the reward system in the same way that a drug does. Disordered Gamblers report cravings and highs in response to their stimulus of choice. Additionally, people who suffer from a gambling disorder tend to have a family history with gambling and suffer from many other disorders that can cause additional problems.

Key Signs and Symptoms of Gambling Disorder

1. A developed pattern of "chasing one's losses", with an urgent need to keep gambling (e.g., placing larger bets or taking greater risks) to undo a loss or series of losses.

2. Distortions in thinking (e.g., denial, superstitions, a sense of power and control over the outcome/chance of events, and/or overconfidence) may be present.

3. Individuals may believe that money is both the cause of and the solution to their problems.

7.2 Diagnosis

Disordered gambling is extremely difficult to identify and diagnose because individuals **exhibit no obvious physical signs or symptoms** like those seen in drug or alcohol addicts. A person is diagnosed with a gambling disorder when 9 of the DSM criteria are met. Persons that meet 4 – 5 criteria are considered **Mild**; those that meet 6 – 7 are **Moderate**; and 8 – 9 are considered **Severe** (DSM-5, 2022). Several of the below listed gambling behaviors must be observed for a 12-month period to be diagnosed with a gambling disorder.

Diagnostic Criteria

DSM-5 Diagnostic Criteria for Gambling Disorders

1. A preoccupation with gambling (e.g., preoccupation with reliving past gambling experiences, handicapping, or thinking of ways to get money with which to gamble).
2. A need to gamble with increasing amounts of money in order to achieve the desired level of excitement.
3. Repeated, unsuccessful efforts to control, cut back or stop gambling.
4. Feels restless or irritable when attempting to cut down or stop gambling (withdrawal symptoms).
5. Often gambles when feeling distressed (e.g., helpless, guilty, anxious, depressed).
6. After losing money gambling, often returns another day to get even ("chasing" one's losses).
7. Lies to family members, therapist, or others to conceal the extent of one's involvement with gambling.
8. Has jeopardized or lost a significant relationship, job or educational or career opportunity because of gambling.
9. Relies on others to provide money to relieve a desperate financial situation caused by gambling.

Differential Diagnosis

It is imperative to differentiate individuals that are non-disordered gamblers, those experiencing manic episodes, personality disorders, or other medical conditions.

- **Non-disordered gambling:** As previously stated, there are different forms of gambling (e.g., commercial, private, recreational, professional, illegal, online, and gaming). Gambling disorder must be distinguished from professional and social gambling. In professional gambling, risks are limited, and discipline is present. Social gambling usually occurs with friends or colleagues, and only lasts for discrete periods of time, with reasonable or acceptable losses. Some individuals can experience problems (e.g., short-term chasing behavior and loss of control) but still **do not meet** the full criteria for gambling disorder.

- **Manic episode:** Reckless behaviors, poor judgment, and excessive gambling may occur during a manic episode. An additional diagnosis of gambling disorder should be given only if the gambling behavior is not better explained by a manic episode (e.g., a history of maladaptive gambling behavior at times other than a manic episode). Alternatively, an individual with gambling disorder may, during a period of gambling, exhibit behavior that looks like a manic episode, but once the individual is away from the gambling, these manic-like features dissipate.

- **Personality disorders:** Problems with gambling may be common in those with antisocial personality disorder and other personality disorders. If the criteria are met for both disorders, both can be diagnosed.

- **Other medical conditions or medication-induced**: Some patients taking dopaminergic medications (e.g., Levodopa for Parkinson's disease) may experience urges to gamble. If these symptoms stop when dopaminergic medications are reduced in dosage or ceased, then gambling disorder is not diagnosed. Lastly, partial dopamine agonists (e.g., Aripiprazole) have also been documented to cause impulse-control disorder.

Harm, Harmful Gambling, and Gambling-related Harm

Harm as it relates to gambling is defined as "*any type of repetitive gambling that a person engages in that leads to (or aggravates) recurring negative consequences, such as significant financial problems, addiction, or physical and mental health issues*" (Shi et al., 2020). With harmful gambling, gamblers immediate surroundings, i.e., family, social network, and community may also experience negative effects.

The degree of harm can reside on a continuum and can range from inconsequential, temporary, to significant (Figure 6). As it relates to frequency, harm can be episodic or chronic (Abbott et al., 2018). Therefore, harmful gambling encompasses the full spectrum of severity and frequency.

Harmful gambling has also been referred to as **problem gambling, compulsive gambling, irresponsible gambling, gambling disorder, and pathological gambling**. The differences among these terms are a matter of severity and frequency of gambling (**Appendix 6;** mental, medical, physical, financial, and criminal burdens associated with gambling). Currently, there is no universal definition of what constitutes **low-risk** or **moderate (at-risk)** gamblers (Miller, 2017). Harmful gambling behaviors exist on a continuum, and any cut off point must be somewhat arbitrary (**Figure 6**). However, studies have proven that low-risk and moderate-risk individuals are harmed because of their gambling. Additionally low-risk and moderate-risk gamblers are more common than problem gamblers and are also most likely to transition to problem gambling. People experiencing less harm are also less likely to believe that they need to make changes to their gambling behavior.

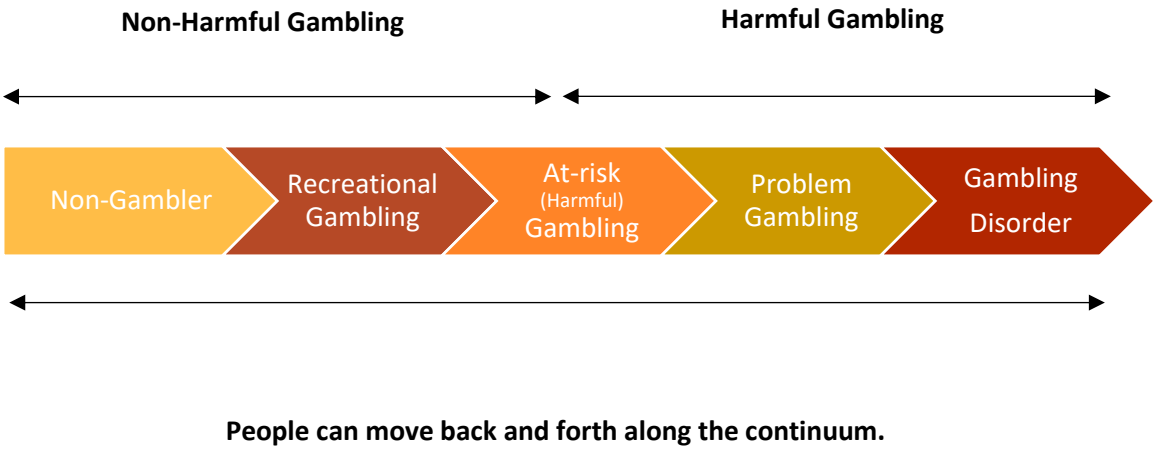
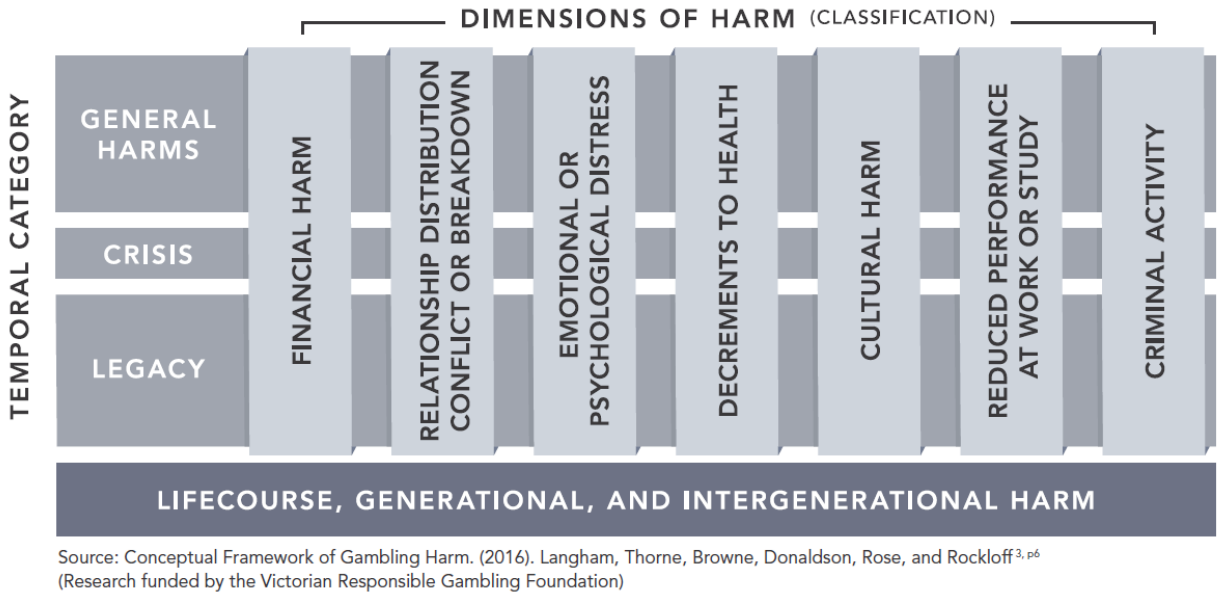


Figure 6: The Gambling harm continuum



Source: Conceptual Framework of Gambling Harm. (2016). Langham, Thorne, Browne, Donaldson, Rose, and Rockloff [3, p6]
(Research funded by the Victorian Responsible Gambling Foundation)

Figure 7: Conceptual framework for Harmful Gambling by Abbott et al. 2018

Research classifies gambling harm with 7 dimensions of harm that relate directly or indirectly to gambling (Abbott et al., 2018) (Figure 7). The dimensions of harm are financial, relationship disruption, emotional, physical health, cultural, work performance, and criminal. Intersecting the dimensions are three temporal stages that indicate the severity of a gambling problem.

Temporal stages are:

- *General harms:* minor harms that occur after a person starts gambling.
- *Crisis harms:* severity in which a person believes that they have a problem with gambling.
- *Legacy harms:* long-lasting effects even if the person might no longer gamble.

Lastly, underlying both the harm dimensions and temporal stages are the life, generational, and intergenerational harm. They indicate the extent to which besides the affected individual, families, and communities, alter life circumstances and opportunities are impacted.

7.3 General Risk Factors that Contribute to Harmful Gambling

There are several intricate factors that contribute to the development of problems and disordered gambling. The key general factors are **Biological, Psychological, Cultural and Social**. These risk-factors are vast, complex, and interconnected.

7.3.1 Biological Factors

Genetic inheritance and vulnerability

Research has shown that psychological disorders such as addictive disorders and depression run in families (Riley, 2017). Scientists have studied families to follow the extent of genetic inheritance of harmful gambling. Research has shown rates between 8% – 50% depending on whether relatives are of the first, second or third degree (Abbott et al., 2018). These estimates are consistent and correspond with heritability estimates for major psychiatric disorders and substance dependance (30 – 70%). Which is why **the increased likeliness of comorbidity amongst harmful gambling, substance use disorders, depression, and other conditions are partly due to a common genetic vulnerability** (**Appendix 6**). Reports have shown heritability estimates are also influenced by changes to a person's environment (e.g., the availability of gambling facilities).

Neurobiology

When a gambler attempts to reduce or stop gambling, they experience withdrawal. This process is called neuroadaptation which is changes in brain structure and functioning (Riley, 2017). Studies comparing groups of problem gamblers and healthy participants have investigated a range of neurocognitive and biological markers of harmful gambling (Abbott et al., 2018). These studies reveal altered function in the brain system responsible for reward processing, risk-based decision making, and inhibitory control.

The evidence from neuropsychological studies is strong and indicates behavioral markers of impulsivity and impaired decision making.

Markers such as **Dopamine**, a key neurotransmitter within the brain reward system, showed altered levels of dopamine metabolites in plasma along with elevated polymorphisms that affect the dopamine system in problem gamblers. **Abnormalities in Noradrenaline**, a neurotransmitter in regulating arousal, could predispose some people to greater elevations of physiological arousal brought on by gambling.

Gender

When it comes to sex, men and women differ in habits, motivation, and rates of gambling. For both youths and adults, **men participate and spend more money gambling than women** (Abbott et al., 2018). However, the progression of gambling appears to be more rapid in females than in males (psychdb.com). **Women tend to gamble later in life, but when problems occur, they gamble more rapidly** (Abbott et al., 2018). Worldwide, men are reported more at risk of developing gamble disorder than women. As it pertains to problem gambling gender difference lie in the type, number of games, and patterns of gambling behavior in which women display emotional distress and men show aggression.

Men tend to partake in sports betting and other games of skills, whereas women partake in bingo, slots, electronic gaming machines (EMG), and lotteries. Women also participate more in gambling if facilities are clean, attractive, and whether there is a safe, protective, public, or domestic environment.

Age and lifespan development

Children, adolescents, and young adults that start gambling at a youthful age are at high-risk for developing gambling-related problems. Global studies estimate that between the ages of 10 – 24, 0.2 – 12% of youths and young adults experience gambling problems (Calado et al., 2019; Turner et al., 2020; Abbott et al., 2018), and an additional 8 – 14% are at risk for developing gambling problems (Volber et al., 2010). Teens that display risky behaviors such as alcohol and drug use, smoking, and delinquency participate in disordered gambling behaviors at a higher rate than teen that don't, especially teenage boys.

A 2002 study showed 3 key factors associated with increased likelihood of gambling disorder from adolescences into young adulthood (early 20s); **(1)** at-risk gambling during adolescence, **(2)** the male gender, **(3)** parents with a history of gambling problems (Winters et al., 2002). Turner et al., 2006 substantiates this by reporting that **although gambling frequency increases in teenage years, the highest involvement occurs in the twenties and thirties**.

The Turner study found that **most people without gambling problems began to gamble between the ages of 18 – 23**, while **people with gambling problems began gambling either before 18 or after 23**. The study concluded that the higher risk for later onset gamblers could possibly be due to the relatively recent introduction of EGMs and casinos.

Research attests that failure to address early onset gambling in youths (ages 15 – 24) leads to negative impacts (Rahman et al., 2012; Shi et al., 2021, Dowling et al., 2017, Hing et al., 2014, Barnes et al., 2011). Studies have shown that:

Early age of gambling onset is associated with developing ***gambling problems, particularly for <u>males</u>*** (ages 24–26), and more severe gambling problems later in life.

- Early gambling is associated with serious negative ***psychological (e.g., depression, anxiety), social, financial, and substance use problems***.
- Individuals aged 18–20 years are particularly likely to ***chase losses and bet more than they can afford***.
- Young adults (ages 18–24) may be at ***elevated risk given neurodevelopmental processes*** underlying risk-taking and addictive behaviors.
- ***Emotional regulation, logic, and other processes are not fully developed*** by young adulthood. Therefore, ***poor decision-making*** may lead young adults to take more risks and act more impulsively when gambling.
- Youth gambling also effects their ***academic performance*** leading to absenteeism or poor grades.
- ***Online gambling*** is one of the strongest predictors of gambling problems in young adults.
- Youths don't have their lives yet structured by constraints, obligations, and rewards that adults have.

All the above factors act as a resistance barrier to prevent excessive involvement with gambling. Additionally, studies show a significant difference of earlier – and later-onset gamblers by the relationship between at risk problem gamblers (youths), participation in non-strategic forms of gambling[78] (instant and traditional), and slot-machine gambling, which was 2x as strong compared to later-onset gamblers (Rahman et al., 2012; Zapata, et al., 2011).

[78] Non-strategic forms of gambling: lottery tickets, scratch cards, bingo, and gambling machines)

Slot machines and scratch cards are favored amongst children and young adolescents (10 –14 years) (Zapata, et al., 2011). Cultural factors also influence the prevalence of youths gambling because of exposure and parental approval for gambling (Alegría et al., 2009).

Older populations such as adults and seniors also gamble. Co-factors such as different gambling opportunities, attitudes, expanding gambling legalizations, availability of leisure time, loneliness, limited financial resources, disposable income, and decreased cognitive functioning that could lead to poor decision-making. All co-factors vary throughout a person's lifespan but are also disorder gambling precursors (Abbott et al., 2018; Riley, 2017).

7.3.2 Psychological Factors

Psychological factors are rooted in a person's biology and broader environment. Therefore, a person's psychological characteristics may make them either more or less susceptible to developing harmful gambling.

Temperament and Personality Characteristics

People are complex and differ in their thoughts, feelings, and actions. **Individuals with personality and temperament characteristics are frequently associated with harmful gambling** (Abbott et al., 2018). These individuals can be highly competitive, workaholics, impulsive, display restlessness and easily board attributes, are sensation-seeking, low behavioral control, and emotionally vulnerable. Personality disorders that co-occur with gambling are narcissistic, antisocial, avoidant, obsessive-compulsive and borderline.

Judgement and Decision Making

Individuals with gambling problems tend to experience **'gambling-related cognitive distortions'** (Abbott et al., 2018). In other words, they have faulty beliefs about gambling such as over-estimating their chances of winning, greater weight of losses compared to gains of equivalent size, bias evaluation (e.g., attributing wins to skills and losses to bad luck), illusion of control over gambling outcomes (e.g., superstitions or behavioral rituals that are designed to increase wins) and failing to recognize statistical independence or turns. These judgement and decisions can be encouraged by gambling types and features (slot machines and stop buttons). Additionally, these may be increased by substance use or other intoxicating substances.

Comorbid mental health disorders

The correlation of comorbid mental health disorders to problems and disordered gambling has been studied worldwide (Abbott et al., 2018). **Findings show that 75% of people seeking treatment for gambling problems have comorbid mental disorder** such as major depression, anxiety disorders, substance use disorders, mood disorders, nicotine use, eating disorders, psychosis, attention deficit disorder, obsessive compulsive disorder, post-traumatic stress disorder, behavioral addictions (compulsive shopping, video games, problematic internet use) (Appendix 6).

However, it's difficult to differentiate whether mental disorders were present before harmful gambling or vice versa. Nevertheless, research attests that people with both gambling and mental health disorders have a greater severity of gambling, distress, are more likely to have other mental health disorders, and respond poorly to treatment.

Coping styles

Avoidance and emotional coping when experiencing difficulties versus a problem-solving approach have been observed in both adolescents and adults with gambling problems (Abbott et al., 2018).

Self-perception

Self-perception is the thought one has of themselves about their behavior, emotions, and mental state in relation to others (Abbott et al., 2018). People can perceive themselves as 'professional gamblers' or 'not having a problem at all'. A person's self-esteem is also heavily associated with the concept of self-perception and if one's self-esteem is low, they are high-risk for disordered gambling.

Adverse Childhood Experiences, Trauma and Stressors

Adversities linked to childhood trauma experiences like emotional and or physical neglect, parental separation and divorce, household substance use, mental illness, and incarceration all have been linked to harmful gambling (Abbott et al., 2018). Trauma such as natural disasters, violence, physical or sexual abuse, terrorism events, or serious accidents have shown to strongly influence addictive behaviors (Riley, 2017). It's to be noted that **traumas and stressors are interrelated and amplify each other**. Therefore, even non-traumatic life experiences such as job loss, and discrimination of race, gender, or sexuality can cause stress and lead to trauma.

7.3.3 Cultural Factors

Culture is defined shared thought, meaning and morality of people or ethnic group (Abbott et al., 2018). Cultural factors affect the prevalence of gambling, the popularity of gambling types, thoughts, and attitudes towards gambling, how people gamble and the extent of harmful gambling. This also means that they affect treatment outcomes and the consequences of gambling.

Ethnicity and Immigrant groups

Ethnicity

US studies have shown that specifically **Blacks, Asians, and Hispanics** are at higher risk of being disordered gamblers (Alegria et al., 2009). In 2017, Caler et al. reported **Blacks** having twice the rate of gambling addictions compared to Caucasians, and that Black teens engage more than Caucasian teens in gambling activities, which leads to problem gambling and gambling disorder later in life. This is often attributed to Blacks socioeconomic status, which is often at a disadvantage in the US.

In the **Asian** culture, gambling is seen as a social activity, thus making them prone to developing issues and negative gambling consequences (Luczak & Wall, 2016). In the US, Chinese college students have the highest gambling rates, followed by Koreans then Caucasians (Alegria et al, 2009). Compared to the others, **Caucasians** have the lowest rates of problem gambling, however, certain groups within the Caucasian race are more likely to develop gambling issues. For instance, Caucasian men in a low-income bracket and between ages 30 – 44 are 72% more likely to develop disordered gambling than Black males.

Lastly, when compared to Blacks and Asians, **Hispanics** tend to experience less gambling prevalence of disordered gambling. However, Hispanics are higher at risk of developing disordered gambling from problem gambling as well as other addictions (e.g., substance use, mood, anxiety, and personality disorders).

A recent study done in 2020 investigated whether the association between income and gambling disorder varies by race or ethnicity (Day et al., 2020). The study included a sample size of 1164 with ethnic and racial groups that were African Americans, Whites, Asians, Hispanic Whites, Hispanic Blacks, and American Indians/ Alaska Natives. Results found no evidence for such variation. **For all races and ethnicity groups having a low income significantly increases the odds** (odds ratio 2.27, 95% confidence interval 1.46, 3.53) for disordered gambling.

Immigrant groups tend to show higher rates of gambling due to culture and traditions of their country of origin. Reasons are as followed:

- Some migrant cultures tend to place great value on the possession and display of wealth, which makes gambling an attractive means to an end.
- In certain cultures, there may not be much gambling opportunities but if immigrants then move to a country with plenty of gambling, they may develop unrealistic expectations of making money.
- Post-immigration hardships with adjustments such as unemployment, language barriers, and social isolation, feelings of discomfort due to being uprooted, a perceived loss of social status, altered family roles in the new country, and feeling excluded and discriminated against.
- Gambling problems among immigrants can arise in the interaction among having roots in another culture, the experience of migration, and the process of integration into the current society.
- Some cultures may consider gambling a derogatory activity and thus making migrants hesitant to seek gambling help.

Socio-cultural attitudes

Policial orientations: moral values that influence the perception of gambling; liberals are more accepting and view gambling as an individualistic choice (Abbott et al., 2018). Whereas socialists and conservatives often hold disapproving views due to beliefs in absolute moral values.

Social classes: varying social classes hold different gambling beliefs; elites and upper classes may view gambling as a competitive nature and an act of comradeship (Abbott et al., 2018). Whereas lower classes or the low educated may view gambling as a means to alter their socioeconomic status.

Age periods: people born in different time periods tend to have opposing views on gambling (Abbott et al., 2018). Teenagers may be more accepting due to their experienced normalcy of various gambling facilities, whereas seniors may think otherwise due to their past, often more conservative, lived experiences.

Religion and other belief systems

Different religions have opposing views on gambling; Islam forbids gambling, Lutherans, Mormons, and Jehovah's witnesses condemn gambling, while Roman Catholics do not disapprove but advises about its excessiveness. Other heritage **factors such as tradition, acceptance of magical thinking and the existence of fate, history, and lifestyle also contribute to disordered gambling** (Morasco et al., 2006; Alegría et al., 2009).

Gambling cultures

Gambling venues also influence a specific gambling culture amongst gamblers (Abbott et al., 2018). They and their employees get to know gamblers and interact with them in specific familiar ways, e.g., special vocabulary, norms of conduct, and interact in particular ways which create a 'social world'.

7.3.4 Social Factors

Social – economic factors are heavily linked to gambling addiction and problem gambling (Morasco et al., 2006; Alegría et al., 2009; Shaffer et al. 2002). Social factors encompass both interactions among people and their collective co-existence. **All spheres of human activity are shaped by interactions between social structures, and a person's individual agency (ability to freely choose his or her actions or beliefs).** Social factors span interpersonal relationships at the micro level of social relationships; environmental and cultural factors are relevant at the macro level of social structures and institutions. Moreover, social factors are important in shaping how commercial gambling is made available in different societies, and how people who develop difficulties with their gambling are viewed and treated by others. Social factors also influence attitudes and beliefs about different types of gambling, as well as about harmful gambling and the best ways to prevent or reduce harm.

A study found that individuals with lower educational achievements were more likely to exhibit problem gambling behaviors in adults compared to those with higher educational levels (LaPlante et al., 2011). Whereas in young people, adolescents ages 12 – 17 and young adults up to the age of 25, higher rates of problem gambling were in those with lower educational attainment than those with higher education (Volberg et al., 2010). In both studies **socioeconomic factors such as limited employment opportunities and social support combined with low educational achievement contributed to increased vulnerability and likelihood of engaging in problem gambling behaviors.**

Socioeconomic impacts

- Brokenness of the nuclear family (single parent homes), heightened tension in marriages, and divorce.
- Family disfunction and domestic violence (spousal and child abuse)
- Household income: low-income households spend proportionately more of their money on gambling than higher income households.
- Poverty: highly associated with increased financial risk-taking
- Financial problems and bankruptcy
- Homelessness

Social demographics

Studies have found that at-risk individuals and problem gamblers **gambling rates increase in certain professions** such a taxi and bus drivers, blue-collar workers, people with flexible work hours, those with time on their hands between jobs, those with little physical supervision, and those with easy access to gambling facilities (Abbott et al., 2018). Additionally, **long-lasting effects of housing insecurity also play a role** in a person's involvement in gambling and other addictive behaviors.

Family and Peer gambling involvement

When it comes to the gambling behaviors of teenagers and young adults the influence of peers and family members plays a significant role (Abbott et al., 2018). Higher rates of gambling participation and problem gambling is observed in adolescents with parents and households that gamble. **Families can either contribute or prevent the development of harmful gambling through social learning and gambling activities.** Additionally, some families have **'gambling friends'** which serves as a common interest of their relationships. While other **people are simply influenced by the presence and actions of other gamblers**. For instance, playing with someone who gambles for prolonged periods of time and for high stakes may lead a person to play over his or her limits.

Neighborhood

Increased availability and location of gambling facilities are correlated to the frequency of harmful gambling (Abbott et al., 2018). At a neighborhood level, social groups are typically divided by socioeconomic status. Interestingly, research depicts that gambling outlets are more likely to be placed in areas with lower social capital. One hypothesis is that **gambling operations tend to find little to no resistance from lower socioeconomic neighborhoods because they are less likely to mobilize to prevent gambling introduction.** Additionally, in areas where people are socioeconomically disadvantaged a person's income restricts their ability to travel to other communities that offer other leisure options.

Work environment

Social studies report that a person's work environment can encourage and discourage gambling. People working in the gambling industry are more at risk for harmful gambling (Abbott et al., 2018). In 2002, Shaffer and Hall reported higher rates of harmful gambling casino employees, especially in those who were younger and more recent.

Psychoecomonics

Psychophysiological economics entails the psychological and physiological events as factors that shape consumers economic behavior. **Gambling increases during periods of high stress, depressive episodes, and or during substance use or abstinence**. Stressors such as physical, mental, and economic challenges alter a person's behavior and cognitive processing. So, individuals living in poverty for instance perceive greater potential to change their lives from gambling than those with a better financial means (Shaffer et al. 2002).

Stigmatization

Stigmatization comes from an array of angles, from gender (women are more stigmatized than men), specific cultural groups, stereotypes, shame and embarrassment, and fear of discrimination (Abbott et al., 2018). Typical stereotypes of gamblers and problem gamblers include adjectives such as *compulsive, impulsive, desperate, irresponsible, risk-taking, depressed, greedy, irrational, antisocial, and aggressive*.

Deviance

Studies have identified that harmful **gambling is driven by the same factors and circumstances that drive criminal behavior**, i.e., impulsiveness, sensation-seeking personality, elevated risk taking, high levels of urgency and increased lack of premeditation (Abbott et al., 2018). Social and environmental factors characterizing the criminal lifestyle also contribute to harmful gambling, such as obvious consumption when money is available, money laundering by means of gambling, a focus on quickly acquiring money, and a substantial amount of free time when in prison.

However**, gambling problems may cause people without any criminal record to do unlawful things** – this is called criminogenic problem gambling. The most common type is property crimes to procure money for gambling. The specific crimes committed depend on accidental circumstances, as well as on the social position and abilities of the person with gambling problems, for example: robbery, theft, forgery, fraud, and white-collar economic crimes. Gambling also increases opportunities for illegal activity like passing counterfeit money, money laundering, loansharking, cheating-at-play, race fixing (Williams et al., 2011). Specific venues (i.e., casinos) that serve alcohol also contribute to alcohol-related offences (i.e., assault, driving under the influence) and/or disproportionately attract a clientele with criminal tendencies. Gambling venues also increase the overall number of visitors to the area (crime rate per capita).

Finally, in **gambling-related embezzlement in the workplace,** there is an obvious link between harmful gambling and economic crime. The embezzler is typically a trusted employee who has been with the company or organization for a long time — which means that there are no significant prior psychiatric problems or a criminal record. The employee develops an addiction to gambling, starts to "borrow" money at the workplace, and sometimes ends up having embezzled huge sums.

7.4 Gambling-Specific Factors that Contribute to Harmful Gambling

7.4.1 Gambling Environment

Macroeconomics

When considering the introduction of gambling into society, policy makers weigh the cost of a country's economic development, employment, and tax revenues (Abbott et al., 2018). With the wide spread of casinos, studies have shown that their **introduction has a modestly positive impact on economic growth and property prices**. However, **where employment is concerned**, opposing results show that **in the US casinos have a moderately positive impact** and **in Canada positive impacts are considered short-term successes**.

Regarding taxes, many studies have shown that lottery tax disproportionately affects the poor as they spend more of their income on lotteries. The same is also assumed for casino taxes, but evidence to substantiate this sentiment is lacking. There has been little research done on the affect problem gambling has on a local economy besides its social cost.

Microeconomics

At a closer look, when considering individual consumers or businesses, and government policies that affect particular industries, the social cost of gambling must be considered. **The social cost of gambling is attributed to bankruptcy, crime, unpaid debts, decreased work productivity, treatment, and stress on person relationships** (Abbott et al., 2018). The level of impact of crime is based on how a country's crime rate is defined. Additionally, the 'social costs' of gambling are difficult to assess due to little agreement on the definition and proper measurement techniques. A key reason being the difficulty in accurately estimating social cost of gambling comorbidity.

Socio-political environment

The adoption of gambling in a jurisdiction is the result of social, cultural, and political forces. Political and economic systems are extremely important in shaping where and how commercial gambling will be offered, as well as which groups are most likely to be labelled as problem gamblers (Abbott et al., 2018). Unlike other consumer products, legal gambling has been influenced by government decisions rather than economic need.

When new methods of gambling are legalized, they enter society in ways that enhance their legitimacy and acceptance. Their legalization is then accompanied by major institutional shifts; for instance, gambling operations and oversight become part of the routine processes of government. Additionally, some retail operators such as restaurants, hotels, and social clubs tend to become dependent on revenue from gambling to operate profitably. Lastly, in some countries, the gambling industry executives and political action committees become key sources of funding for political parties, elections, and ballot initiatives.

Public policy

As it relates to public policy, worldwide some governments have adopted broad approaching in developing gambling policy and regulation. **Policies are usually focused on harm-reduction efforts** for products such as alcohol and tobacco. However, in several cases, the emphasis is placed on the need to identify and treat people with gambling problems, rather than on the community or policy environment. Therefore, to be effective, health public policy requires that:

- The promotion of health and well-being of the community is the centralized focal point.
- Based on harm prevention and reduction.
- Grounded in evidence.
- Be reflective and responsive to public opinion.
- And foster public discourse to help improve the community's health and well-being.

7.4.2 Gambling Exposure, Proximity, and Participation

Gambling exposure is the extent to which populations or population sectors encounter gambling activities (Abbott et al., 2018). Exposure is strongly influenced by availability, i.e., the type, number, distribution, and accessibility of gambling activities. **Exposure and participation are closely intertwined. Without opportunities to gamble, people are unable to do so.** Gambling participation is measured by involvement in specific gambling activities and includes assessments of frequency (how often), duration (for how long), and expenditure (how much money was spent). Participation can become problematic when the gambler and/or other people experience harm because of his or her participation. However, it is to be noted that gambling exposure, expansion (proximity), and participation is not the same for people across the board since factors such as socioeconomic status, vulnerability, and other influences play a role (Riley, 2017).

Gambling setting

Various aspects of gambling venues influence gambling impact, participation, behavior, time, and money spent (Abbott et al., 2004; Finlay et al., 2010). Things such as:

- Venue entry requirements.
- The legality, nature, and perceived safety of gambling settings.
- The purpose of the gambling activity.
- Number of EMGs within venues.
- Venues that offer cheap foods, beverages, and entertainment.
- The association with other attractions.
- Alcohol availability (alcohol reduces inhibition and leads to intensive and risky gambling behavior).
- Venue layout, lights, colors, sound effects, background odors.
- Co-locating ATMs and credit facilities.
- Proximity and access to loan sharks.

Online gambling

Internet gambling, online gambling, and (interactive) remote gambling refers to wagering and gaming activities offered through internet-enabled devices (Abbott et al., 2018). The devices include computers, mobile and smart phones, tablets, and digital television. This method of gambling is not a separate type of gambling activity but rather a mode access that differs from land-based outlets such as lotteries and casinos.

The nature of online gambling makes it an inherently more problematic way gambling when compared to other traditional land-based forms. Reasons being that online gambling offers features that contribute to the lessening of players' ability to control their environment. These features are:

- Great convenience.
- Easy access.
- The solitary nature of play.
- The ability to play when intoxicated.
- Lack of realistic cash markers.
- The ability to play with credit.
- Often lack of age verification.
- The ability to play multiple sites and or games simultaneously.

Accessibility

Local geography plays a significant role in availability and accessibility to gambling (Abbott et al., 2018). These factors are:

- The types of gambling venues.
- The number of gambling venues.
- The concentration of gambling venues (availability per capita).
- Opening hours.
- Availability of transportation.
- Availability of affordable alternative recreational facilities.
- The physical visibility/ prominence of venues.

Marketing and Messaging

Generally, advertisement and other forms of promotion are very important for gambling facilities in competitive markets, especially for online companies with no physical location (Abbott et al., 2018). **Advertising attracts new customers and inspires more gambling amongst existing ones.** The main objective of gambling marketing is to increase and maintain company profit. Therefore, **to differentiate from competitors gambling advertisers must motivate a gambler to choose one company over the other.** People's perception of gambling advertisements varies across ethnic groups and those with gambling problems report that some advertisement messages influence them more than others. Some scholars even suggest that advertisement contributes to the normalization of gambling in society.

The portrayal of gambling is often done in a positive light through explicit and implicit symbolic and mythological messages. These portrayals have made their way into the news (e.g., stories about jackpot winners, advice on betting and gambling) and are part of mainstream media culture like movies, TV-series, novels, urban legends. The marketing and messaging of EMGs and lottery tickets often uses images and symbols to convey a message that gambling is 'fun, exciting, and can make people rich'. Moreover, traditional forms of advertising are being replaced by sponsorship, social media, viral marketing, and consumer-generated marketing.

The convergence of gaming and gambling

The incorporation of gambling and gambling-like elements within games is intended to make them profitable and more exciting to participants (Abbott et al., 2018). This may contribute to players shifting to online and land-based gambling activities. The merger is especially evident in casino games and sports events/activities. Online and land-based venue betting on sports events have extended to eSports, immersive reality, and fantasy sports. Additionally, betting on video games and tournament results are rapidly increasing.

In addition, besides content converging between gaming and gambling, the media that they are based on is shifting as well. Gaming was once restricted to computers and video game consoles, now people can gamble on their PCs and even in virtual reality. Lastly, **the increasing cross-over between gambling and gaming networks, platforms, and products allows gambling operators a larger reach in the market.**

Gaming-like Gambling: besides the inclusion of gambling elements within games, there is increased merge of game-like elements and themes within gambling (Abbott et al., 2018). Features include things like:

- Skill
- An increased the illusory that skill is involved.
- EMGs also include themes from social video games and television game shows (which attracts younger participants)

Gambling-like Gaming: video games are increasingly displaying elements and phenomena we would traditionally associate with gambling (Abbott et al., 2018).

- The presence of gambling mini games within video games (a game within a game).
- Loot boxes, a form of game monetization.

Online tactics

Due to the vast and increasing number of new sites appearing daily, researchers suspect that the distinction between gambling and gaming may be blurred by the online gambling industry to maximize future profits (Messerlian et al., 2004).

Emerging and existing sites are offering rewards in the form of "tokens" which allows players to trade in each number of tokens for a prize. To begin each player is awarded a certain number of free tokens and each game involves an initial wager and payouts if the player is successful. When combined with these factors, youth who play regularly on these free practice sites are prime targets as future players.

Just like online gaming sites, online gambling sites also have reward and loyalty programs which may be enticing to youths. Such programs include the possibility of earning redeemable points through playing.

For example, many sites offer high initial deposit bonuses, while others guarantee bonuses of up to $20 per month for returning players. Often, players who refer a friend are awarded bonuses as high as $50. Some sites even provide "Bettor's Insurance" programs which returns 10% of net gaming losses (Gambling Online, 2003). Casino games are interspersed with other, more innocuous games, each following the same basic theme.

7.4.3 Gambling Types

Structural characteristics: several psychological dimensions that gambling games offer, these are:

- Timing parameters i.e., the delay between the gamble and outcome, like with lotteries.
- Payback percentages.
- Bonus features in EGMs, i.e., free spins.
- Losses disguised as wins.

Motivational characteristics: gambling motivation differs between recreational gamblers and problem gamblers (Abbott et al., 2018). However, their reasoning for gambling ranges from social interaction (with friends or alone), demonstration of skills and competing, a means to escape or be distracted from troubles, and mood-altering effects.

7.4.4 Gambling Resources and Interventions

Research has shown that only 7 – 12% proportion of problem gamblers seek treatment (Abbott et al., 2018).

Resources

Psychotherapy: a cognitive-behavioral approach. This approach tackles dysfunctional thoughts (unhealthy, irrational, negative beliefs) about gambling and replaces them with health positive ones (Abbott et al., 2018). Behavioral therapy uses a process of exposure to the behavior you want to unlearn and teaches you skills to reduce your urge to gamble.

If it becomes part of daily treatment routine and is reported to be highly effective. During sessions, Therapists' facilities goal-orientated, explicit, systematic procedures such as thought-replacement, role playing, desensitization, relaxation techniques, and homework assignments (Riley, 2017).

For people with less severe gambling problems, science has been dabbling with interventions that require single session treatments and those with little to no therapist interactions such as telephone-based therapist guidance. Lastly, there's motivational therapy which is commonly used in substance use disorders and offers a combination of humanistic treatment and enhanced cognitive-behavioral strategies. Nevertheless, because of the high-level of comorbid mental illness and addiction in gamblers, integrated treatment approaches are essential when treating patients.

Pharmacotherapy: no medication for the treatment of problem gambling exists. However, promising research has shown that Naltrexone, an opioid antagonist, may offer help (Abbott et al., 2018). This medication has been shown to be most useful and effect in affecting dopamine pathways involved in reward processing. It is however cautioned to consider co-occurring psychiatric illness when making medicinal treatment decisions. Opioid antagonists are well suited for people with substance use disorders, whereas antidepressant medications or mood stabilizers are more appropriate for depressive/ anxious or bipolar disorders.

Mutual support: entails support groups. Recovering and recovered gamblers help each other to stop harmful gambling or gambling all together (Abbott et al., 2018). A great form of self-help is Gamblers Anonymous which is based on the 12-steps of Alcoholics Anonymous which focuses on members lifelong to the commitment of the steps, gambling abstinence, and participation of meetings (Riley, 2017).

What is key here is that participants take turns talking regularly about gambling from onset to progression and their recovery while others provide advice (Abbott et al., 2018). Support groups provide social and emotional support, maintain the motivation to abstain, gain insight, and get practical advice on how to stay away from gambling.

Self-help takes form in a few ways, i.e., online, and printed exercises, workbook and manuals, audio and video recording, telephone, computer, and web-based programs (Abbott et al., 2018). Research suggests that self-help is likely less effective than in-person treatment, however, if done for a prolonged period it can show positive results.

Self-Exclusion Programs

Self-exclusion entails having a gambler "banning" his or herself from gambling facilities (online or land based) for a period of 1 year or a lifetime, depending on a country's regulation (Riley, 2017). US and Canadian studies propose that self-exclusion programs should be viewed as therapeutic and not punitive. Canada found better outcomes when treatment and minimal guidance were offered to enrolled customers. Whereas in the US, although enrolled persons violated trespassing agreements, many moved back towards healthier decisions.

Financial Counseling

The US National Council for Problem Gambling (NCPG, 2000) and (Riley 2017) suggest providing financial counseling to disordered gamblers. The relationship between disordered gamblers and money is quite uniquely complex. **Money is not seen as a way to accomplish goals, a measure of security, source of freedom, or standard of accomplishment. Instead, the value of money to a gambler is viewed as means to gambling to stay "in action".** Unlike other addictions (e.g., alcohol, or drugs), gamblers cannot physically avoid money in their daily activities with banks, cash registers, etc. They can, however, stay out of casinos and stop buying lottery tickets. Therefore, financial literacy and proper money management for the disordered gambler as well as their family can help restore a sense of value towards money.

7.5 Remission & Treatment Barriers

Remission

Individuals can experience early remission or sustained remission.

- **In early remission**: After full criteria for gambling disorder were previously met, none of the criteria for gambling disorder have been met for at least 3 months but for less than 12 months.

- **In sustained remission**: After full criteria for gambling disorder were previously met, none of the criteria for gambling disorder have been met during a period of 12 months or longer.

Treatment barriers

Studies have shown that only a mere 25% of problem gamblers seek help (Suurvali et al., 2008; Suurvali et al., 2012, Baxter et al., 2018). Similar to other mental and substance use disorders, individuals seeking help for their gambling problems tend to be prevented by:

- Self-perceptions.
- General shame, shame of dishonesty, shame related to gambling-related financial difficulties.
- Difficulty acknowledging the problem.
- Public stigmatization.
- Discrimination of gambling.
- The attractiveness of gambling facilities.
- Belief in luck.
- and past treatment experiences.

Chapter 8 Summary: Best Practices to Prevent Gambling

1. Strive for optimal Design and Evaluation of New Initiative
2. Recognize that Effective Problem Gambling Prevention requires Decreased Revenue and some Inconvenience to Non-Problem Gamblers.
3. Employ a Wide Array of Educational and Policy Initiatives.
4. Coordinate these Multiple Educational and Policy Initiatives.
5. Decrease the General Availability of Gambling.
6. Eliminate, Reduce, and/or Constrain Higher-Risk Forms of Gambling.
7. Eliminate Reward Cards or use them to Foster Responsible Gambling
8. Restrict who is Eligible to Gamble.
9. Restrict the use of Tobacco and Alcohol while Gambling.
10. Restrict access to Money while Gambling.
11. Impart Knowledge, Attitudes, and Skills to Gamblers to inhibit the progression of the Problem Gambling
12. Keep Prevention Initiatives in place for a Sustained Period because Population-Wide Behavioral Change takes a Long Time.

8. Best Practices

Literature acknowledges that some might suggest not to speculate without a direct base of evidence or not to act prematurely in identifying 'best practices' for the prevention problem gambling. However, ample studies have deemed it necessary to speculate and act because of the significant impact inaction leads to (Williams et al., 2012; Babor, Caetano, Casswell, et al, 2010; Miller, Wilbourne & Hettema, 2003; Tobler et al., 2000).

Below are worldwide best practices that have proven to provide positive support to prevention initiatives for problem gambling (Williams et al., 2012). These practices aim to offer direct guidance to effective strategies; however, some might require a base of direct evidence to be applicable.

1. **Strive for optimal Design and Evaluation of New Initiatives.**
   - Employ Social experts in Design, Implementation, and Evaluation.
   - Use proven theoretical models of Behavioral Change to Guide the Development of New Initiatives.
   - Always use Behavioral Change as the Primary Measure of Effectiveness.

2. **Recognize that Effective Problem Gambling Prevention requires Decreased Revenue and some Inconvenience to Non-Problem Gamblers.**
   - The goal of harm minimization must be given equal priority to revenue generation.

3. **Employ a Wide Array of Educational and Policy Initiatives.**
   - Recognize that policy measures are equal, if not more important, than educational initiatives.

4. **Coordinate these Multiple Educational and Policy Initiatives.**
   - Try to involve the local community in the implementation of these multiple initiatives.

5. **Decrease the General Availability of Gambling.**
   - Limit or reduce the number of gambling venues.
   - Limit or reduce the number of different forms of gambling.
   - Locate gambling venues away from vulnerable populations.
   - Implement other restrictions on gambling availability.
     - This is done by restricting gambling venue access to non-residents, or drastically limiting the number of gambling venues accessible by residents. As well as restricting gambling opportunities (especially EGMs) to dedicated gambling venues and reducing venue hours of operation.

6. **Eliminate, Reduce, and/or Constrain Higher-Risk Forms of Gambling.**
    - These entail EMGs, continuous lotteries, casino table games, and internet (online) gambling.
    - Constrain EGM speed, maximum bet size, maximum win size, frequency of near misses, number of play lines, and seating.
    - Require pre-commitment of gambling expenditure and/or time on EGMs and online gambling using effective parameters.

7. **Eliminate Reward Cards or use them to Foster Responsible Gambling**
    - Reward players who gamble responsibly. For example, players could receive points up to a reasonable operator-set daily level of spending, beyond which they receive no points or start losing points. Another strategy would be for players not being able to collect their player points if they have exceeded their pre-commitment levels. Finally, players could receive points for opting to view educational resources.

8. **Restrict who is Eligible to Gamble.**
    - Raise the legal age for gambling.

9. **Restrict the use of Tobacco and Alcohol while Gambling.**

10. **Restrict access to Money while Gambling.**
    - ATMs should not be in gambling venues.
    - Prohibit gambling venues from offering lines of credit to gamblers.

11. **Impart Knowledge, Attitudes, and Skills to Gamblers to inhibit the progression of the Problem Gambling**
    - Increase Knowledge (e.g., dependency forming potential of gambling, signs and symptoms of impaired control/ problem gambling, true odds of various games, where to go to for help, etc.) of Gambling and Problem Gambling.
    - Correct erroneous cognitions.
    - Foster Appropriate Attitudes toward Gambling.
        - Ideologies like “Borrowed money should never be used to gamble” or ‘Financial, health and social problems associated with problem gambling can be serious and are worth avoiding.”
    - Foster Skills to Operationalize Behavior Change

12. **Keep Prevention Initiatives in place for a Sustained Period because Population-Wide Behavioral Change takes a Long Time.**

Chapter 9 Summary: Benchmarking – St. Maarten compared to the Caribbean

A comprehensible overview of the Caribbean gambling industry is challenging to ascertain due to varying of laws, report styles, and available data in each jurisdiction. Nevertheless, investigative research has led to key findings.

Benchmarking ratios of the estimated population based on gambling licenses *(casino, online casino, lottery, bingo) were compared to the estimated population size of each country. Likewise, ratios were done based on games (i.e., Slot Machines, Table games, Sports, and Horse Betting). Card and Lottery games were excluded based on inconsistent reporting on which games are listed as card games.*

In both figures (8 & 9) it's apparent that regionally every country except the Dominican Republic is beyond their capacity as it pertains to the number of licenses and games offered by the gambling industry (estimated pop. vs. ratio of estimate pop.). Results reveal that when compared to other countries it becomes apparent that gambling on ***St. Maarten is in a league of its own****.*

For the amount licenses St. Maarten has, it's population should be 32% (or approx. 1.38 million inhabitants) larger than what it is*. Additionally, for its size and the number of gambling licenses, St. Maarten surpasses St. Kitts, Bahamas, Curaçao and Aruba on license vs. estimated population ratio (Figure 8).*

The number of games compared to the estimated population*. Results depict that* ***for the amount of gambling games St. Maarten has, it's population should be 29% (or approx. 1.28 million inhabitants) larger than what it is****. (Figure 9).*

9. Benchmarking – St. Maarten compared to the Caribbean

A comprehensible overview of the Caribbean gambling industry is challenging to ascertain due to varying of laws, report styles, and available data in each jurisdiction. Nevertheless, investigative research has led to key findings. Deciding factors for which countries made it to **Table 17** was based on Coopers & Lybrand 1996 "competitive set" **(table 5),** major Caribbean gaming destinations (**Appendix 2, Table B**), country size, population size, multicultural background, country origin of St. Maarten's prominent immigrants that are geographically close, and the number of gambling licenses compared to St. Maarten.

The World Casino online directory[79] website provides global casino information. It lists information such as a country's casino industry size, betting minimums and maximums, gaming types, licenses, and more. The online directory lists 20 Caribbean countries[80] that permits gambling in their jurisdiction. Those countries are as follows:

1. Antigua and Barbuda
2. Aruba
3. Bahamas
4. Barbados
5. Bermuda
6. Bonaire
7. Curaçao
8. Dominica
9. Dominican Republic
10. Guadeloupe
11. Haiti
12. Jamaica
13. Martinque
14. Puerto Rico
15. Saint Kitts and Nevis
16. Saint Lucia
17. St. Maarten
18. Trinidad and Tobago
19. Turks and Caicos
20. U.S Virgin Islands

Although impressively detailed, The World Casino online directory is not entirely accurate[15]. Therefore, other sites such as Casino City[81] and Google searches of the names of Casinos/Hotels listed were crossed referenced for verification. An overview of the results is depicted in **table 17**.

* To be noted, table 17 is suspected to be an underrepresentation of each country's reality. Numbers are suspected to be much higher.

[79] https://www.worldcasinodirectory.com/

[80] 22 countries are listed, however, The Netherlands Antilles, French and Dutch St. Martin/St. Maarten are seen as one because they all depict Dutch St. Maarten.

[81] https://www.casinocity.com/casinos/

Table 17: 2022 Competitive Caribbean Gaming Jurisdiction

#	Caribbean Country	Size per km²	Estimated Population (2022) *2	Gambling Age	Casino Licenses	Lotteries Licenses	Bingo Licenses	Online gambling Licenses	Access to Online Casino Sites	Casino Hotels	Total Slot Machines	Total Table Games*4	Card Games	Sports Betting	Horse Betting	Lottery Games
1	St. Kitts	261	54,000	21	2	1	0	1	993	1	300	19	✓	1	1	6
2	Bahamas	13,880	402,000	18	9	✓	0	✓	955	13	2,460	270	1	2	✓	2
3	Curaçao	444	166,000	18	14	✓	2	✓	1,153	14	2,619	184	✓	4	✓	7
4	Aruba	180	108,000	18	14	1	2	✓	14	18	4,341	192	6	7	✓	11
5	Jamaica	10,991	2,992,000	18	69	1	0	✓	1,081	7	1,945	6	✓	3	4	13
6	Barbados	430	288,000	18	22	1	2	X	3	2	323	34	0	1	1	8
7	Puerto Rico	9,104	2,687,000	18	29	3	2	✓	663	24	8,444	294	6	0	1	8
8	Dominican Republic	48,442	11,103,000	18	56	1	1	✓	250	29	5,684	600	13	2	1	10
9	St. Maarten	41,44	44,000	18	15	7	3*3	3	220	5	2,150	75	✓	11	✓	4
Total *1		**83,766**	**17,844,000**	**18 (avg.)**	**230**	**15**	**12**	**4**	**5,332**	**113**	**28,266**	**1,674**	**26**	**31**	**8**	**69**

*1 Depicted totals are an indication and not an accurate representation of actual figures due to insufficient data reporting. However, if proper amounts were reported, numbers are suspected to be more than what is depicted.
*2 Numbers were rounded off for simplicity.
*3 Of the 13 operational casinos on St. Maarten only 3 offer Bingo based on TEZVT 2021 report. Numbers represent an estimated total. Totals per casino for all countries amounts were not always provided.
*4 Numbers represent an estimated total. Per country, for most casinos the number of available table/card games were provided and totaled for country-wide data. Data for every casino per country is missing. Additionally, although there are 11 available types of table/ card games on St. Maarten, when all games per casino are totaled there are 75 country wide. Additionally, table and card games are combined in TEZVT's 2021 report.

Symbol ✓ depicts that activity exists but research was unable to ascertain the exact amount.
Symbol X depicts that activity does not exist.

Information for this table was sourced from the following:
Population: https://www.worldometers.info/
Age: https://en.wikipedia.org/wiki/Gambling_age
Casino/Lottery/Licenses/Casino Hotels/Slot machines/Table games/Card games/ Sports betting/Horse betting: www.worldcasinodirectory.com & https://www.casinocity.com
Online casino sites accessible in each country: https://choicecasino.com

St. Kitts lottery games: numbers lottery pick 3, 4, hot 5; Caribbean lotto; Caribbean keno; instant scratch https://www.casinocity.com/saint-kitts-and-nevis/lotteries/ & https://www.thecaribbeanlottery.com/
Bahamas online gambling: land-based casinos were allowed to apply for gaming licenses that permit some in-house internet gaming. "Restrictive interactive gaming licenses" allows players to bet online or on mobile within the casino property is allowed. But online gaming from websites managed in the Bahamas is not allowed.
Bahamas lottery: traditional and pick 3 https://thebahamaslottery.com/
Curaçao lottery games: numbers lottery Pick 2, 3, 4; lotto 'wega di number'; scratch lottery; lottery of goods; national lottery https://www.gamingcontrolcuracao.org/regulation
Curaçao charitable gambling: charitable bingo and charitable gaming 'bon ku ne' https://www.gamingcontrolcuracao.org/regulation
Aruba lottery games: Aruba lottery games Catochi, dig 4, 1-off, Zodiac, Lucky 3, Multi-x, Korsou, Lotto di dia, Lotto 5, Mini mega, Mega plus https://www.casinocity.com/aruba/lotteries/
Jamaica lottery games: Scratchaz, Cashpot, Hot Pick, Pick 2, 3, 4, Lucky 5, Top Draw, Dollaz, Lotto, Supper Lotto, Money Time, Monsta Ball https://www.casinocity.com.jm/lotteries/ & https://supremeventures.com/
Barbados lottery games: Double Draw, Scratch & Win, Mega 6, Super Lotto, Express Cash, Keno, Pick 3, Pick 4 https://www.mybarbadoslottery.com/ & https://www.casinocity.com/barbados/lotteries/
Barbados online gambling: https://simonsblogpark.com/onlinegambling/simons-guide-to-barbados-gambling-and-online-betting/

Puerto Rico lottery: Loteria de Puerto Rico, Power Ball, Lotto cash, Wild Ball 2, 3, 4, Instataneos, Kino https://www.casinocity.com.pr/lotteries/, https://loteriasdepuertorico.pr.gov/loteria-electronica/#juegos & https://loteriasdepuertorico.pr.gov/loteria-tradicional/vendedores/
Dominican Republic: Super Kino TV, Loto Pool, Pega 123 more, Quiniela Opale, Loteria Real, Loteria Nacional, Loteria Nacional Ganamas, Quiniela Loketa, La Suerte Dominicana, La Primera de Lotodom https://www.casinocity.do/lotteries/

Table 17 was created to provide an indication of what's currently at play. Notably, for countries like Jamaica, the Dominican Republic, Puerto Rico, Barbados, Curaçao and the Bahamas the number of lottery and bingo licenses, slot machines, table and card games are suspected to be much higher than depicted. The data sourced is based on what is available online.

Benchmarking ratios of the estimated population based on gambling licenses (casino, online casino, lottery, bingo) were compared to the estimated population size of each country. Likewise, ratios were done based on games (i.e., Slot Machines, Table games, Sports, and Horse Betting). Card and Lottery games were excluded based on inconsistent reporting on which games are listed as card games. The number of lottery booths would illustrate a larger concern rather than the number of games offered, therefore the data on lottery games were also excluded.

Figure 8: Caribbean countries' population based on gambling license.

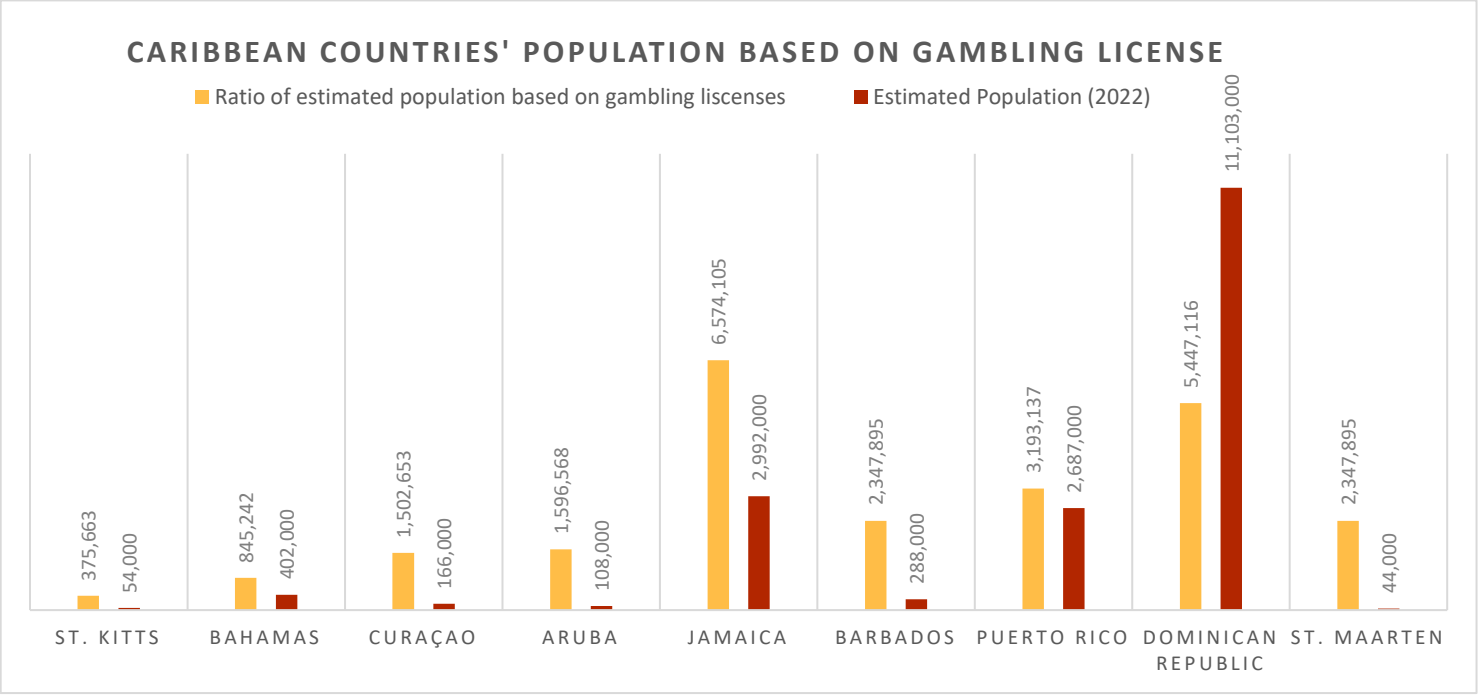
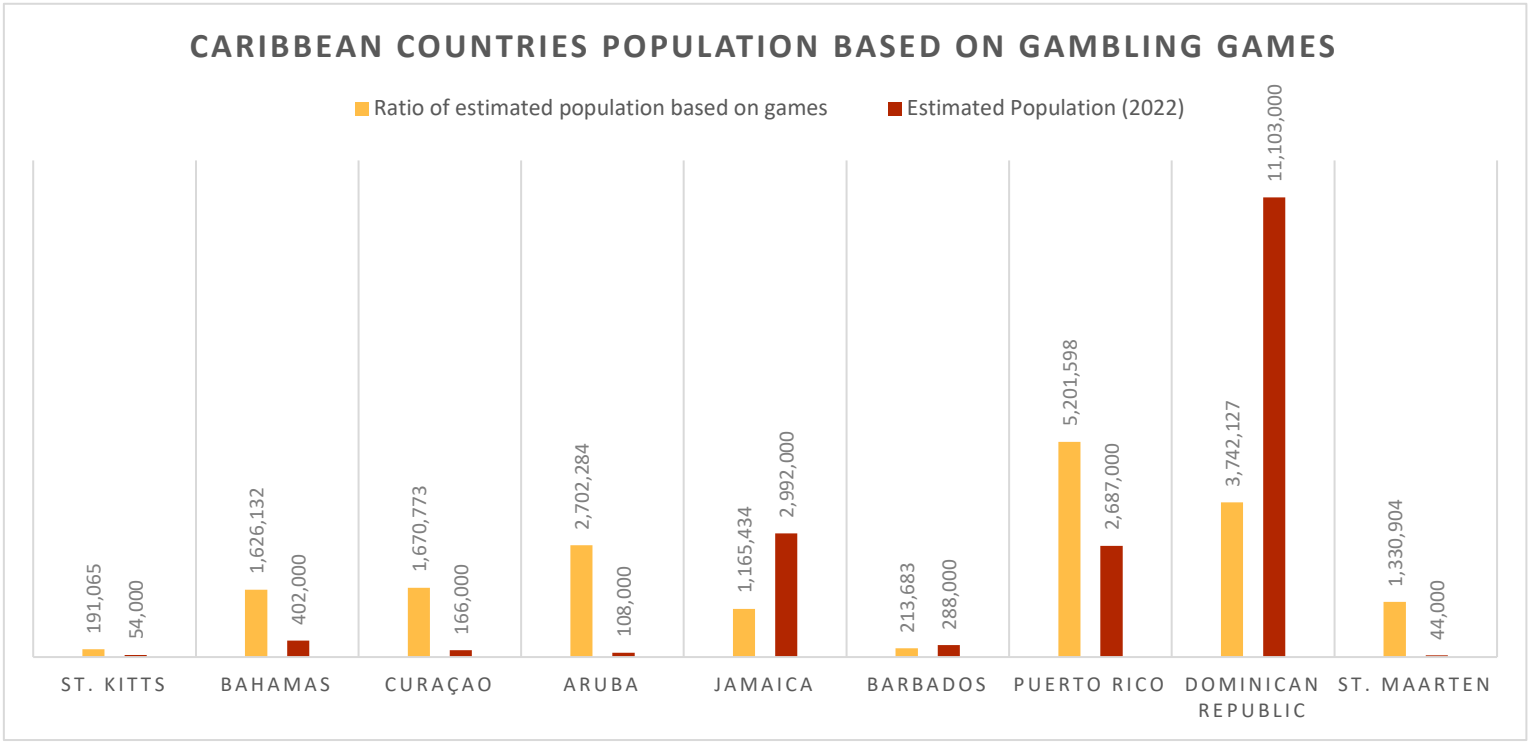


Figure 9: Caribbean countries' population based on gambling games.



In both figures (8 & 9) it's apparent that regionally every country except the Dominican Republic is beyond their capacity as it pertains to the number of licenses and games offered by the gambling industry (estimated pop. vs. ratio of estimate pop.). Results reveal that when compared to other countries it becomes apparent that gambling on St. Maarten is in a league of its own (Figures 8 & 9). For the amount licenses St. Maarten has, it's population should be 32% (or approx. 1.38 million inhabitants) larger than what it is. Additionally, for its size and the number of gambling licenses, St. Maarten surpasses St. Kitts, Bahamas, Curaçao and Aruba on license vs. estimated population ratio (Figure 8).

As it pertains to the number of games compared to the estimated population. Results depict that for the amount of gambling games St. Maarten has, it's population should be 29% (or approx. 1.28 million inhabitants) larger than what it is. (Figure 9).

Figure 10: Caribbean Gambling: an overview of population size, gaming industry, and type of addiction per country.

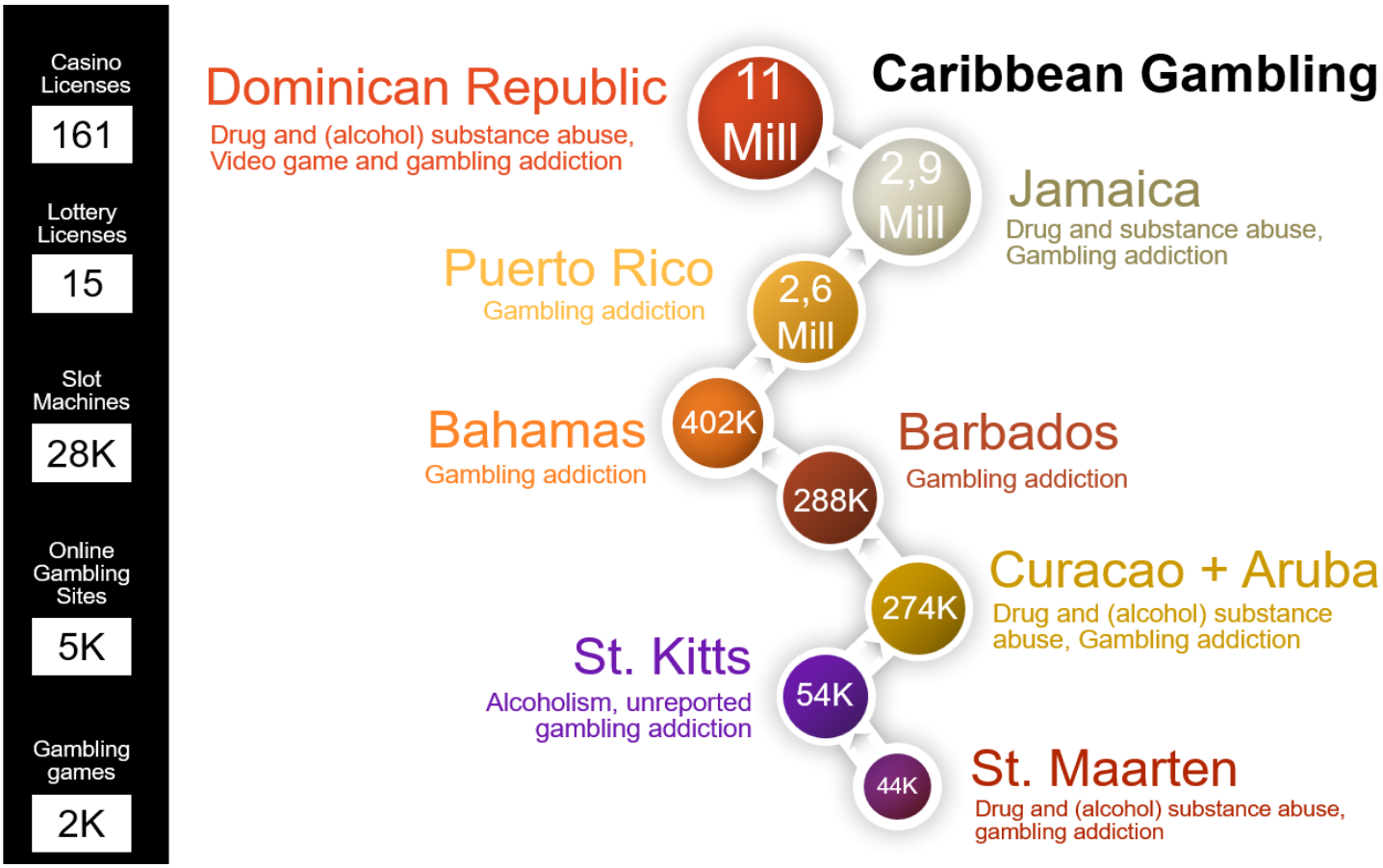


Figure 10 is a visual representation of Caribbean islands population size, reported types of addiction in relation to gambling, and a brief overview of the gambling industry. In the center the population size is shown in circles from largest to smallest. To the far left the total amount of casino (161) and lottery (15) licenses, slot machines (over 28 thousand), access to online gambling sites (over 5 thousand) and types of gambling games (over 2 thousand) are shown. Lastly, under each country, based on research and reports on the type of addictions that relate to gambling.

Figure 10 sources

Dominican Republic

- Dominican Today: Video games are addicting Dominicans (Jun 2022) https://dominicantoday.com/dr/local/2022/06/28/video-games-are-addicting-dominicans/
- Soto, L. & Lawani, K. (2020). Exploring the Impact of Alcohol Abuse on Construction Sites in Santo Domingo, Dominican Republic.
- Cherpitel et al. (2021) Road traffic injuries and substance use among emergency department patients in the Dominican Republic and Peru
- Garcia-Cerda et al. (2021) Alcohol use during the COVID-19 pandemic in Latin America and the Caribbean https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8132959/

Jamaica

- Jamaican Observer: Gambling addiction on the rise (Apr. 2005) https://www.jamaicaobserver.com/news/gambling-addiction-on-the-rise/
- The Gleaner: Seek help for gambling disorder (Jun. 2022)
- The Gleaner: RISE Life eyes new strategies to tackle gambling addiction (Oct. 2022) https://jamaica-gleaner.com/article/news/20221007/rise-life-eyes-new-strategies-tackle-gambling-addiction
- Jamaica Gamblers Anonymous – Gambling Therapy https://www.gamblingtherapy.org/blog/resource/jamaica-gamblers-anonymous/

Puerto Rico

- Volberg, R. & Vales, P (1998). Gambling and Problem gambling in Puerto Rico
- Volberg, R. & Vales, P (2002). Prevalence estimates of pathological gambling in Puerto Rico
- Puerto Rico Gamblers Anonymous – Gambling Therapy https://www.gamblingtherapy.org/blog/resource/puerto-rico-gamblers-anonymous/

Barbados

- The Barbados Advocate: Gambling Dilemma (Arp. 2018) https://www.barbadosadvocate.com/news/gambling-dilemma
- Barbados children dictionary: https://www.barbadoschildrendirectory.com/on-line-
- Barbados Gamblers Anonymous – Gambling Therapy https://www.gamblingtherapy.org/blog/resource/barbados-gamblers-anonymous/
- Nation News: Eastmond: Elderly being exploited (2010) https://www.nationnews.com/2010/08/07/eastmond-elderly-being-exploited/

Bahamas

- Bahamas tackles gambling addiction (2019) http://radiojamaicanewsonline.com/local/bahamas-tackles-gambling-addiction
- Caribbean National Weekly (Mar. 2019). Bahamian government concerned at high rate of persons impacted by problem gambling https://www.caribbeannationalweekly.com/caribbean-breaking-news-featured/bahamian-government-concerned-at-high-rate-of-persons-impacted-by-problem-gambling/
- The Bahama Journal: Gambling Addiction causes more concern (Aug. 2019) http://jonesbahamas.com/gambling-addiction-causes-more-concern/
- Bahamas chronicles: Health Minister Sands: Government addressing problem gambling and addiction (Mar. 2019) https://bahamaschronicle.com/health-minister-sands-government-addressing-problem-gambling-and-addiction/
- Eyewitness News: Students participate in gambling addiction seminar (Mar. 2019) https://ewnews.com/students-participate-in-gambling-addiction-seminar

Figure 10 sources continued

Curaçao

- SER: Curaçao must recognize gambling addiction as a psychological disorder (Nov. 2022) https://www.curacaochronicle.com/post/main/ser-curacao-must-recognize-gambling-addiction-as-a-psychological-disorder/
- Igamingbusiness: Dutch minister promises action on Curaçao-based gambling this month (Dec. 2021) https://igamingbusiness.com/legal-compliance/dutch-minister-promises-action-on-curacao-based-gambling-this-month/
- Extra: Gambling addiction in Curaçao is alarming (Nov. 2018) https://extra.cw/gambling-addiction-in-curacao-is-alarming/

Aruba

- Catholic Church Promotes Responsible Gambling in Aruba (Nov 2022) https://fantasiacriativas.com/2022/catholic-church-promotes-responsible-gambling-in-aruba/
- Wever (1977). Alcoholism in Aruba https://repository.ubn.ru.nl/bitstream/handle/2066/148467/mmubn000001_052453413.pdf
- Garcia-Cerda et al. (2021) Alcohol use during the COVID-19 pandemic in Latin America and the Caribbean https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8132959/

St. Kitts

- Luxury rehab in St. Kitts and Nevis – Low cost, extensive, & luxury rehab options to quit alcohol and drugs (2022). https://www.worldsbest.rehab/saint-kitts-and-nevis/
- OCED iLibrary Alcohol (2023) https://www.oecd-ilibrary.org/sites/bfd0a107-en/index.html?itemId=/content/component/bfd0a107-en

St. Maarten

- St. Maarten Parliament, Gumbs, M. (Oct. 2020). Letter to St. Maarten Prime minster. Request to the Social Economic Council (SER) to conduct a study on socio-economic impact of the placement of lottery booths in lower-income areas and questions to the Minister of General Affairs. http://www.sxmparliament.org/wp-content/uploads/2020/11/UV-055-dd-04nov2020-MinPres-Questions-from-MP.M.D.-Gumbs-SER.pdf
- St. Maarten News – Supermarkets selling Alcohol to minors (Oct. 2021) https://smn-news.com/index.php/st-maarten-st-martin-news/38703-supermarkets-selling-alcohol-to-minors.html
- St. Maarten News – Responsible gambling is of no concern to the government (Oct. 2021) https://stmaartennews.com/community/responsible-gambling-is-of-no-concern-to-the-government/
- Souliganewsday – J'ouvert jump up records a few incidents. Police Concerned about alcohol abuse. https://www.soualiganewsday.com/index.php?option=com_k2&view=item&id=44610:jouvert-jump-up-records-a-few-incidents-police-concerned-about-alcohol-abuse&Itemid=518
- The Daily Herald – Woman addicted to gambling jailed for UTS-embezzlement (Mar. 2019)
- https://www.thedailyherald.sx/islands/woman-addicted-to-gambling-jailed-for-uts-embezzlement
- Sxmgovernmet.com – Hilbert Haar woman beater, gambling addict, owned by Organized Crime (Aug. 2016 https://sxmgovernment.com/tag/gambling-addict/

Chapter 9 Summary: Problem Context

General risk factors that contribute to Harmful Gambling – ***Biological*** – ***Psychological*** – ***Cultural*** – ***Societal***. *The islands* ***ethnic and religious composition*** *(of predominately Blacks, Hispanics, Asians, Whites, and Roman Catholics).*

Immigrant groups present an array of issues locally *(e.g., post-immigration hardships, live consciously in poverty, transfer of income off island, blue collar workers).*

Additionally, 39% of ***households are women-led with children and elderly as codependents surviving on one source of income***. *The majority (80.7% or 1,852) of* ***unemployed*** *St. Maarteners were either* ***not formally educated*** *(3%), only have a Primary (34.8%) or Secondary (42.9%) education. Local* ***unemployment rates spike tremendously after natural disasters***, *from 6.2% in 2017 to 9.9% in 2018.*

Of the ***employed*** *population 48.7% consisted of mainly* ***unskilled or semi-skilled occupations*** *with flexible workhours (i.e., construction, services, cooking, and cleaning), and a combined 71% (or 14,780) were* ***low educated***.

Island poverty is also alarming; *minimum wage hourly rate is NAF 9.95, 27% of households are living on approx. USD 850, pensioners are unable to survive on pension payouts, 1 in 5 persons (5% of households) don't have an income, and the average person cannot afford to buy or build a home due to high cost of living and cost of housing.*

Gambling-Specific factors that contribute to Harmful Gambling – ***Gaming environment*** – ***Gambling exposure, proximity, accessibility, marketing & messaging*** – ***Gaming types***

On a ***macroeconomic*** *level various sources confirm that* ***uncollected gaming industry fees indicate that the country has not been benefiting in that regard***.

Social-political environments *influence government decision-making.* ***St. Maarten's gaming industry fluctuates based on political power will rather than economic development.***

No policy or documentation *has justified the economic benefits of introducing new gaming licenses to the country. Also,* ***policies and legislation ineffectively and inefficiently guide the overall set-up and functioning of gambling operations.***

25 gambling licenses (i.e., 15 Casino, 7 Lottery, and 3 Online) and 2, 618 combined land-based gambling opportunities on the Dutch side there is a lot of gambling opportunities.

All these correlating aspects makes St. Maarteners vulnerable and susceptible to gambling-related harms as described in literature.

10. St. Maarten in context to Gambling

This Chapter aims to provide side by side comparison between what is occurring on St. Maarten and what research has proven to be contributing risk factors for harmful, problem, and disordered gambling.

ST. MAARTEN

Gambling Overview

Population: ± 44K (2022)
Nationalities: 118
Country size km²: 41,44 (16 sq mi)
GDP: USD 30K per capita (2022)
Men: 19, 9K (49% of pop.)
Women: 20, 9K (51% of pop.)
Adolescents: 5, 5K (13% of pop.)
Young adults: 2, 2K (5% of pop.)

Immigrants: from **DR**, **NLD, JA**, and **USA**
Employed: 20,8K or 51% of the pop. in 2018.
Unemployed: 2,3K or 6% of the pop. in 2018
Median household income: ± USD 2K
Poverty indication: 27% households live on revenues ± USD 850 p/m (in 2017)
Pension payout: USD 681
Minimum wage: USD 5,47 per hour

Gambling age: 18
Casinos: 15 licenses
Lotteries: 7 licenses
Online Gambling: 3 licenses
Slot machines: 2, 2K
Table games: 75

It's to be noted that at the time of this report, the 2022 Census is currently ongoing that would have provided updated information. Nevertheless, based on local data trends collected over the years, problems pertaining to the labor market, pension, poverty, and housing for instance has been expotentially increasing and is currently still suspected to be the case as described in 2017 – 2019, especially after the pandemic.

Based the **general risk factors** (i.e., biological, psychological, cultural, social) and **gambling-specific factors** (gambling environment, exposure, proximity, participation, types, resources, and interventions) that contribute to harmful gaming, St. Maarten has quite a few areas for concern.

General Risk Factors on St. Maarten that likely contribute to Harmful Gambling

Immigrants and Ethnicity

St. Maarten brain drain in young professionals causes influxes of semi-skilled immigrant workers. Of the island's predominant **immigrant groups** (Jamaican, Dominicans, Americans, The Dutch, and French), benchmarking and literature also depicts strong presence of gambling environments, exposures, and types in most countries of origin, which are precursors for harmful and disordered gambling.

Moreover, the island immigrants are reported to present social problems such as transferring most of their income to relatives elsewhere (remittance) in poverty, live consciously in poverty themselves, and do not build up sufficient pension. As described in literature immigrants are a particular vulnerable group that is susceptible to harmful and disordered gambling due to faced post-immigration hardships (language barriers, unemployment, social status, etc.) and culture assimilation (their own and of the country they reside in). Additionally, ethic distribution shows that the island primarily consists of Afro-Caribbean descent (Blacks), Caucasians, Hispanics, and Asians. Research shows that Black, Asians, and Hispanics are at higher risk of being disordered gamblers than other ethnicities, especially if they have low income (Alegria et al., 2009).

Gender, (Un)Employment, Poverty, and Education

Gender wise, research illustrates men gamble disproportionately more than their counterparts, but women gamble more rapidly due to problems in their lives. Based on the latest gender specific information in 2019, St. Maarten women are faced with incredible challenges in their lives. **The island predominately consists of women** (51% vs. 49% men) of which **39% of households are women-led with children and elderly as codependents normally surviving on one source of income. Women are also statistically more unemployed than men** (63.4% vs. 36.6%), in which women ages 25 – 60 years represent 54.4% (1, 247) of the 2, 296 unemployed population.

Locally, unemployment is high amongst the ages 25 – 60. The majority (80.7% or 1,852) of **unemployed** St. Maarteners were **either not formally educated (3%), only have a Primary (34.8%) or Secondary (42.9%) education.** Additionally, **local unemployment rates spike tremendously after natural disasters**, going from 6.2% in 2017 to 9.9% in 2018 after Hurricane Irma to 13% in 2021 and then to 11.2% in 2022 after the COVID-19 pandemic. Studies LaPlante et al. 2011 and Volberg et al. 2010 attest that socioeconomic factors such as limited employment opportunities and social support combined with low educational achievement contributed to increased vulnerability and likelihood of engaging in problem gambling behaviors in adolescents ages 12 – 17, young adults up to 25, and adults.

Island poverty is also alarming; minimum wage hourly rate is NAF 9.95, 27% of households are living on approx. USD 850, pensioners are unable to survive on pension payouts, 1 in 5 persons (5% of households) don't have an income, and the average person cannot afford to buy or build a home due to high cost of living and cost of housing.

After Hurricane Irma, only half of the island (51% or 20, 760 of the 40,614 population) was employed in 2018. Of the then employed population 83% had only **one source of income**, in which a combined household income was ± 5K but **household monthly expenditures** (e.g., housing, utilities, transportation, recreation, culture, goods and services, total to ANG 4, 736) surpassed the median household income, especially when necessities of food, health and education were factored in. Additionally, of the employed population only 3.5% or 716 had a second job, 48.7% consisted of mainly **unskilled or semi-skilled occupations** with flexible workhours (i.e., construction, services, cooking, and cleaning), and a combined 71% (or 14,780) were **low educated**.

Furthermore, St. Maarten **elderly suffer from chronic diseases, poor nutrition, and substandard housing partially inflicted by low pensions**. Abbott et al. 2018 & Riley 2017 explain that seniors gamble due to expanding gambling legalizations, availability of leisure time, loneliness, limited financial resources, disposable income, and decreased cognitive functioning.

When viewed in context, strikingly in 2017 and 2018 respectively, of 20, 954 employed only 4, 550 (22%) had a first layer pension plan (AOV), and of the 20, 760 only 4, 918 (24%) had a pension plan. In 2018, only 11% of the 40, 614 population depended on old age pension.

Research adamantly describes areas of gender, employment status, education level, poverty, age, (non)traumatic events, and stressors as strong antecedents to gambling (harm) susceptibility because they interrelatedly amplify one another and can alter a person's behavior and cognitive processing.

For context, for 4 consecutive years (2017— 2021) the St. Maarten population has experienced **traumatic events** (e.g., Hurricanes, Pandemics), **non-traumatic events** (e.g., job loss and immigration influx), and **stressors** (health, mental, and economic challenges). Evidence also shows that young adults and seniors are vulnerable when co-factors such as different gambling opportunities, available leisure time, loneliness, limited financial resources, flexible work hours and little physical supervision, disposable income, and decreased cognitive functioning leads to poor decision-making. Additionally, **social situations** like a person's familial history and association, long-lasting effects of housing insecurity, socio-economic status, and deviance contribute to their involvement in gambling and other addictive behaviors. Mental disorders, substance use, alcohol addiction, and depression have been reportedly on the rise according to our stakeholders.

Gambling-specific Factors on St. Maarten that likely contribute to Harmful Gambling

For decades the island has consistently justified its stance in partaking in the gaming industry based on profitability, economic and social development, touristic attraction, and entertainment relevance within the region. However, on a **macroeconomic level** research depicts that Casinos have a modestly short-term positive impact on economic growth and property prices, and that lottery tax disproportionately affects the poor as they spend more of their income on lotteries. As it pertains to profitability and economic growth, local news and TEATT verification report has shown the islands' continual struggle and lack of enforcement to collect outstanding tax revenue from the gaming industry for years.

As it relates to **social-political environments** and the influence government decision-making has on it, St. Maarten's stance on the gaming industry moratoriums and policy guidelines fluctuates based on political power will rather than economic development. For instance, TEATT's 2011 Casino policy references a cap of 10 hotel casinos but the country currently has 15 casino licenses. Have feasibility studies been conducted, and what's the justification for the placed moratoriums? Also, online casino licenses went from 0 to 3, and lotteries went from 3 to 7 (which was overturned by a Minister in power at the time). **No policy or documentation from the Ministry of TEATT has justified the economic benefits of introducing new gaming licenses to the country. Also, years of uncollected gaming industry fees indicate that the**

country has not been benefiting in that regard. Data has shown that the introduction of gambling facilities enhances their legitimacy and acceptance in a population, thus making them socially acceptable.

Moreover, TEATT's casino policy pillars of profitability, balanced resident participation, and avoidance of criminality have been reported for years to be unsuccessful, nonfunctioning, inefficient, and not adhered to due to lack of infrastructure, oversight, legislation, updated policies, manpower, and challenging work environments.

Research illustrates that **public policy** in relation to gambling usually focuses on harm-reduction efforts. Only TEATT's casino policy and ordinance, though outdated, have attempted to mitigate some undeniable social and health repercussions brought on by the gaming industry pertaining to resident participation and criminality. However, our gathered data shows that **current and past attempts have not been thoroughly studied to adequately undertake, manage, and support both the positive and negative factors associated with the gaming sector**.

There is no policy to guide the overall set-up and functioning of gambling operations, and besides patron entry restriction (that's not enforced) other protective measures such as industry control or moratoriums and placements by sensitive buildings are not adhered to. There are also no patron protective measures pertaining to marketing, messaging, or the avoidance of criminality.

Lastly, benchmarking results depict, when it comes to the number of casino licenses, St. Maarten is competing neck and neck with countries 3x (Aruba) and 4x (Curaçao) our size in km^2 and is just shy of half as much licenses as Puerto Rico, which is 60x our size. Additionally, as it pertains to the number of slot machines country-wide, St. Maarten differs by a few hundred machines when compared to the Bahamas and Curaçao, which are respectively 4x, and 9x our size in km^2. We have approximately half the amount of slot machines as Aruba and the Dominican Republic, respectively 3x and 252x our size. With **25 gambling licenses (i.e., 15 Casino, 7 Lottery, and 3 Online) and 2, 618 combined land-based gambling opportunities on the Dutch side there is a lot of gambling opportunities.** Science has correlated that gambling exposure influenced by availability enhances participation. Without opportunities to gamble, people are unable to do so.

These correlating abovementioned aspects all makes St. Maarteners more vulnerable and susceptible to gambling-related harms.

Chapter 10 Summary: Discussion

This report sought to thoroughly assess and address the likelihood of gaming and gambling on the island in which extensive investigative research was conducted by engaging key stakeholders to gain as much information as possible.

Local, scientific, and benchmarking results offered an overview of known issues but also highlighted an array of concerns that previously were not pooled within the context of harm, problem, and disordered gambling. If anything, this report shows that there are in fact strong indicators of local gambling addiction albeit fragmented and unreported.

St. Maarten's gambling market has rapidly evolved and expanded with little regard towards what that would mean for our society beyond an economic perspective. This becomes apparent seeing how much the industry owes government as well as the revealed and unaddressed gambling addiction amongst St. Maarten residents revealed 27 years ago. Therefore, it can be deduced that with an inflated gaming market, little to no regulatory oversight and regard for (resident) player protection, the islands' problem and disorder gambling has also increased exponentially. Besides land-based casinos, cause for concern lies especially with online gambling and lotteries. This is apparent with the lack of documentation (i.e., thorough legislation, policies, reports, and sector revenue). For our size, ***St. Maarten simply offer way too many gambling opportunities per square capita****.*

The way forward

The Ministry of VSA, being part of the SMGA-workgroup, intends to aim its focus mainly on responsible gambling and the prevention of addiction. The concepts of responsible gambling and prevention are entwined. Both concepts are huge undertakings that span across many disciplines, sectors, and actors. Therefore, many aspects also fall outside of the scope of responsibility of the Ministry of VSA.

Based on research VSA is focusing on three points pertaining to responsible gambling and prevention ***(1) consumer protection, (2) prevention of addiction, (3) prevention of fraud.***

Consumer protection *entails guaranteeing fair play in the games of chance.* ***Prevention of addiction*** *entails that people who participate in games of chance must do so in a responsible and reliable way.* ***Primary Prevention*** *is an effort to prevent individuals in the general populace from becoming problem gamblers.* ***Secondary Prevention*** *is an effort to prevent the development of problem gambling in individuals with risk factors for the condition.* ***Tertiary Prevention*** *is an effort to stop and potentially reverse the problems occurring in existing problem gamblers and is analogous to 'treatment'.* ***Prevention can be obtained through education and policy initiatives. Examples are restricting the number of gambling venues, harmful gambling types, dedicated venues, location of venues, who can gamble, and alternation or restricting how gambling is provided.***

Fraud prevention *entails conducting customer due diligence, reporting unusual events and transactions, and taking precautionary measures to prevent interplay between visitors and employees.*

Self-exclusion *is a tool used to support (struggling) gamblers to stay away from gambling. Exclusion can be for a lifetime or a set duration (e.g., 3, 6, 9, 12 months).*

Cost of gambling, *the total sum of social, health, and economic impact related to gambling differs per country and local context and is therefore difficult to ascertain what the overall cost is or would be. The complexity lies with the vast range of intersectoral collaborations such as (healthcare) treatment and prevention, policing, prosecution, incarceration, and probation for gambling-related crime; child welfare involvement for gambling-related family problems; unemployment and welfare payments and lost productivity because of gambling-related work problems. Based on research,* ***over a 4-year period, yearly healthcare expenditure per gambler is estimated to range from $36,663 – $54, 329.***

11. Discussion

From its inception, this report sought out to thoroughly assess and address the likelihood of problem and disordered gambling on the island. In alignment with VSA's interest to work in the best interest of the people of St. Maarten from a health, social, and labor perspective, extensive investigative research was conducted by engaging key stakeholders within its own Ministry, the mental health care chain, and the Ministry of TEATT to gain as much information as possible.

The topic of "gambling addiction on St. Maarten" has been ignored for far too long which is undoubtedly apparent throughout this report. The overall sentiment amongst locals for years regarding the topic was to question whether it's even a problem. Since gambling addiction has not been properly investigated or documented before, the general stance has been *"I think we have an issue, but since there's no data…I can't say with certainty".*

Local, scientific, and benchmarking results offered an overview of known issues but also highlighted an array of concerns that previously were not pooled within the context of harm, problem, and disordered gambling. If anything, this report shows that there are in fact strong indicators of local gambling addiction albeit fragmented.

Since casinos were first introduced to the island in the 60s, the market has rapidly evolved and expanded with little regard towards what that would mean for our society beyond an economic perspective. This has become apparent seeing how much the industry owes government (**Table 15**) as well as the revealed and unaddressed gambling addiction amongst St. Maarten residents revealed 27 years ago (**Table 5**). Therefore, it can be deduced that with an inflated gaming market and with little to no regulatory oversight and regard for responsible gambling and the prevention of addiction, our shortcomings have left St. Maarten citizens exposed and susceptible to harmful gambling for over 6 decades.

Given the island's socio-economic climate (e.g., poverty, housing insecurity, educational level, blue-collar professions, etc.) of today we cannot ignore the cause-and-effect dilemma of offering gambling to our community. Too often the emphasis is only placed on the number of gambling licenses (25) we have rather than the number of opportunities (2,618) that comes along with those licenses.

Besides land-based casinos, cause for concern lies especially with online gambling, lottery booths, and convenience gambling locations. This is apparent with the lack of documentation (i.e., thorough legislation, policies, reports, and sector revenue).

How are online casino operators conducting their business? Is it via web-based platforms that allow players access via their local IP-address access to international markets via websites and or apps like Chatochi? Do we also consider slot machines that are credited electronically as online? What kind of payments (e.g., credit card, electronic check, money order, wire transfer, cryptocurrency) are being accepted via these online credit systems? Are online-casino license holders paying taxes on earnings? Why do online-casino license holders only pay a one-time license fee and not annual fees like Casinos and Lotteries? Why are lottery booths able to expand in various (vulnerable) neighborhoods without proper assessments? How much money is the government really losing by not instituting branch license fees on the approximate 360+ lottery booths and implementing Precario Duties and Fees?

These imperative questions frame perspective on the likely magnitude of at home and onsite (at gambling venues outside of designated locations) problem and disordered gamblers the island has apart from those we already suspect is affected within the "regulated industry".

Moreover, these questions further reiterate and debunked our country's weak stance of gambling being an "economic benefit". Our findings revealed that St. Maarten has not been collecting its due from the industry (especially from online gambling) (**Table 14 & 15**). Additionally, our results show that there is no clear oversight on the number of slot machines, table and card games, and lottery facilities because there is inconsistent categorization of labeling of the industry's venues (particularly lotteries) and games (**Table 10**). All in all, the structure, checks and balances of the industry should be of major concern for government because if we are seeking to restore order, we must first be transparent and honest on the magnitude of the issues we are faced with.

Figures 8, 9, Tables 7, 16, and Graph 1 depict St. Maarten having alarming concerns when compared to other Caribbean countries with similar amount of gambling licenses, slightly comparable population sizes, and a multicultural background. For our size, **St. Maarten simply offers way too many gambling opportunities per square capita**. Especially the amount (361) of lottery facilities that the island has. Too often the focus is solely on the number of casinos, but this report now highlights online gambling, lottery booths, and convenience gambling[82] as major underreported culprits.

[82] Convenience gambling are places outside of dedicated gambling location such as shops, bars, and restaurants.

Studies forewarningly indicate that the number of legal gambling venues is positively correlated to problem gambling (Welte et al., 2014; Abbott et al., 2018, General Audit Chamber, 2021). Persons living within a 10-mile radius of Casino facilities were twice as likely to develop a problem and or pathological gambling than persons living beyond a 10-mile radius. In 2021, the General Audit Chamber reported that young adolescents (ages 18 – 21 years) have a 39% probability of developing gambling problems versus persons who never gambled, with every form of gambling facility operating in a location.

Depending on the type of game, the risk of abuse behavior severely increases. Individuals who bet on sports or play cards, on average become addicted in 3½ years. While it takes slot players on average a little over 1 year (Breen & Zimmerman 2002; General Audit Chamber, 2021; Reilly & Smith, 2013). Bear in mind, **St. Maarten currently has 2, 150 slot machines**.

The question now is ***"What is the way forward, what and how do we prioritize in order to begin addressing the apparent likelihood of harm, disordered, and problem gambling amongst the St. Maarten populous?".***

The Ministry of VSA is currently lacking a vision and policy regarding addiction, and thus gambling addiction. Therefore, no policies or legislation currently exist that encompasses addiction. With the help of this document and additional supporting research, a gambling addiction vision and policy is being established.

The ideology within the discussion is responsible gambling and the prevention of addiction. **Responsible gambling** entails the right to be informed, the avoidance of gambling-related harm, continual monitoring for the early detection of problem and disordered gambling, and tools and support systems that support self-restraint. Consumers that gamble should do so in a safe and responsible manner. **The prevention of addiction** entails manners in which government should institute restrictions to prevent problem and disordered gambling. Therefore, due to the ongoing efforts to restructure and redefine the local gaming regime with the establishment of the SMGA the Ministry of VSA, being part of the SMGA-workgroup, intends to aim its focus mainly on responsible gambling and the prevention of addiction. The concepts of responsible gambling and the prevention gambling are entwined. Also, bear in mind that responsible gambling and prevention are huge undertakings that span across many disciplines, sectors, and actors. Therefore, many aspects also fall outside of the scope of responsibility of the Ministry of VSA.

Nevertheless, the concepts are addressed and discussed to contribute to tangible change and are presented as solutions going forward. Based on research there are 3 focal points pertaining to responsible gambling and prevention **(1) consumer protection, (2) prevention of addiction, (3) prevention of fraud.**

11.1 Consumer Protection

Consumer Protection entails guaranteeing fair play in the games of chance. The consumer (the player) must be able to trust that the games of chance offered are fair and managed reliably (Williams et al., 2012). It is important regarding games of chance that licensed operators (land-based and online) and regulators take strict measures to ensure that the player is protected from gambling.

To ensure a high level of consumer protection in the games of chance on St. Maarten the following principles must apply within the gaming industry:

(1) Adequate provision of information to consumers (right to be informed).

a. Information about the composition of the game.
b. The way in which the offered game of chance is played.
c. The amount of money that can be won.
d. The odds of winning.
e. The payout percentage.

(2) No access to or loitering by gaming environments for minors, persons who are intoxicated, and those unwilling to abide by the rule of the gambling venue.

(3) Ensuring fair play.

a. Gaming equipment (e.g., tables, slots, etc.) must meet and is subjected to periodic inspection by an inspection body (i.e., the SMGA).
b. Staff working within gambling establishments must be reliable and suitably qualified.

(4) Consumer data protection.

a. Visitors and players entering gaming establishments must have at a minimum their identity and age verified.
b. Playing behavior of the individual and interventions by the operator must be recorded for the prevention of disordered and problem gambling.
c. Data must be stored in an automated system of the operator and shared with the inspection body.

(5) Design in a careful and balanced manner recruitment and advertising activities.

a. Advertising activities are not misleading, geared towards youths, or vulnerable people.
b. The risk of excessive participation in games of chance are pointed out in activities.

11.2 Prevention of Addiction

It has been proven that gambling addiction has negative personal and social consequences. As a result, gambling addiction can cause serious psychological, physical, health, and financial problems, such as aggression, relationship problems and debts that the person concerned cannot get out of. Many at-risk and problem players turn out to commit crimes such as theft and fraud, and problem gamblers often do this in connection with their gambling addiction. These risks necessitate a robust prevention policy.

Prevention efforts are most effective when they are categorized and geared towards the type of people whom efforts are directed (Williams et al., 2012). **Primary Prevention** is an effort to prevent individuals in the general populace from becoming problem gamblers. **Secondary Prevention** is an effort to prevent the development of problem gambling in individuals with risk factors for the condition. **Tertiary Prevention** is an effort to stop and potentially reverse the problems occurring in existing problem gamblers with treatment. Regarding the first two steps, which are regarded as initiatives (educational and policy), government can tangibly work towards preventing the development or onset of problem gambling.

11.2.1 Education Preventative Initiatives

Like in most instances the prevention of problem gambling entails information campaigns targeted specifically at gambling. These are known variously **as information or awareness campaigns, mass media campaigns, and social marketing** (Williams et al., 2012). Such initiatives are directed at the public and usually contain information consisting of one or more of the following elements:

- Encouragement to 'know your limits' or 'gamble responsibly'.
- Warnings about the potential addictive nature of gambling.
- Identification of the signs/symptoms of problem gambling.
- Information about where people can go for help or more information on problem gambling (i.e., treatment agencies; 24-hour telephone helplines, and tertiary prevention.
- Provision of the true mathematical odds of various gambling activities.
- Efforts to dispel common gambling fallacies and erroneous cognitions.
- Provision of guidelines and suggestions for problem-free gambling.

These initiatives are to be developed and delivered by gambling providers, governmental health, social service agencies, and schools. The information itself is provided:

- On the gambling product (e.g., odds printed on the back of lottery tickets, 'responsible gambling messages' on EGMs).
- On posters and pamphlets at gambling venues and elsewhere throughout the community.
- In the form of 'public service announcements' on radio, television, newspapers, etc.
- By means of presentations, info sessions, workshops, digital media (most often presented in educational settings), etc.
- Responsible gambling information centers within the gambling venue.
- On government, social agencies, and gambling provider websites.

11.2.2 Policy Preventative Initiatives

Policy initiatives encompass measures intended to prevent problem gambling through the introduction of external environmental controls on the availability and provision of gambling (Williams et al., 2012). Policy initiatives is organized in three categories:

(1) Restrictions on the General Availability of Gambling

a. Number of venues
b. Harmful types (continuous and internet gambling)
c. Dedicated venues
d. Locations

(2) Restrictions on Who Can Gamble

(3) Restrictions or Alternations on How Gambling is Provided

Restrict the number of Gambling Venues (availability)

The increased availability of a product is typically related to corresponding increases in use of the product, especially among products or services with dependency-forming potential. Examples of this would be alcohol and illegal drugs. The availability of both is positively associated with higher levels of consumption, which in turn, is correlated with higher levels of alcohol- and drug related problems (Babor et al., 2010; Cook, 2007; Cook & Moore 2002; Gruenewald et al., 1993; Rush & Brook 1986; Stockwell & Gruenewald, 2003).

Similarly, there is a positive association between gambling availability and product consumption and therefore venue restriction (i.e., moratoriums) makes the most sense. Studies have unequivocally linked the prevalence of problem gambling to opportunity, (residential) proximity (10, 30 – 50-mile radius), and increased venue density (General Audit Chamber, 2021; Lester, 1994; the National Gambling Impact Study Commission, 1999; Welte et al.,2004; Shaffer et al., 2004; New Zealand Ministry of Health, 2008; Pearce et al., 2008; Williams et al., 2011).

It has been determined that St. Maarten has 6.9 registered lottery booths per square mile but, when the 360 lottery facilities considered, we have 22.6 lottery opportunities per square mile. Compared to Curaçao, which is approx. 10.6 square miles larger than St. Maarten, our island offers 3.3 times[83] more lottery locations (if we only regard the 111 registered lotteries). And if the 360 locations are taken into account, it would be 10.7 times[84] more lottery locations than Curaçao. Either way, whether looking at the number of lottery location per capita or the number of available of gambling opportunities (2, 618 that's accounted for) St. Maarten, for its size, has unquestionably a problematic amount of available gambling venues. It is therefore imperative that the number of gambling venues are restricted from here on out.

Restrict more types of Harmful types of Gambling

Governments commonly adopt policies that prohibit or restrict inherently more "dangerous" or potentially harmful forms of a product. Examples of prohibited products are handguns, assault rifles, and automatic weapons (Williams et al., 2012). Similarly, drugs with greater perceived addictive potential (e.g., cocaine, methamphetamine, heroin) are usually illegal, while psychoactive substances perceived as less harmful are either controlled (e.g., prescription drugs) or legally available but regulated (e.g., alcohol).

Under the same principles, it's reasonable that policies aimed at reducing gambling-related harm should include restrictions on the most dependency-prone forms of gambling. As described below, certain forms of gambling have these characteristics that warrant greater restriction.

- **Continuous Forms of Gambling** entails **electronic gambling machines** (EMGs; slots, video lottery, electronic bingo, etc.), **casino table games**, and **continuous lotteries** (Williams et al., 2012). Continuous forms of gambling initiate a new draw with every play or spin, for instance, lottery games like 'electronic keno' and 'Rapido', which are addictive. Similarly, casino table games (e.g., baccarat, blackjack, roulette, craps) have continuous play and a high frequency of reinforcement (Williams, Volberg, & Stevens, 2012; Welte et al., 2007).

[83] St. Maarten's 6.9 /Curaçao's 2.11 (lottery locations per square mile) = 3.27 or 3.3
[84] St. Maarten's 22.5 /Curaçao's 2.11 (lottery locations per square mile) = 10.66 or 10.7

- **Internet Gambling** has a higher risk potential because of its 24-hour accessibility (anything that significantly increases gambling availability significantly increases risk) in combination with its provision of online forms of continuous gambling. There are three primary legal approaches to limiting illegal online gambling.

    1. The most common approach is legislation which prohibits consumers from participation, whether it be any form of online gambling or accessing foreign online gambling sites.
    2. Another approach is to legally prohibit financial institutions from processing payments to online (usually foreign) gambling sites.
    3. A final approach is to legally constrain what citizens have access to via their Internet Service Provider (ISP).

For St. Maarten, it is necessary to limit and prohibit access to continuous and internet forms of gambling. Given the amount of gambling opportunities, and how unreported internet gambling is for instance, the SMGA needs to thoroughly assess what constitutes as an acceptable amount and ban anything exceeding that amount. In its investigation, this report has shown that the island has access to over 220 online casino sites (Table 17), one known lottery app (Chatochi), and various continuous forms of gambling outside of designated venues that are all not regulated structurally or legislatively.

Restrict Gambling to Dedicated Gambling Venues

Convenience Gambling pertains to gambling that is available outside dedicated venues like bars, arcades and clubs, restaurants, motels, and various types of retails outlets (e.g., gas stations, supermarkets, stores, booths, etc.) (Williams et al., 2012). This form of gambling is cited as an important contributing factor for problem gambling. EMGs especially are found outside dedicated gambling venues. This report was unable to ascertain the number convenience gambling on the island, however, it's well known and visible throughout the island that many convenience gambling places exist and provide continuous and online forms of gambling. Although our legislation stipulates that gambling is restricted to operators and venues with a license to do so, convenience gambling continues to exist. Convenience gambling locations must be prohibited on St. Maarten.

Restrict the Location of Gambling Venues

Historically, places like Europe, the United States, Asia, and Africa have strategically placed casinos in tourist centered destinations and away from major urban centers. Justifications are based on:

- **a.** the economic benefits of casinos are strongest when they draw new money and wealth into the community rather than simply redirecting local money (Williams, Rehm, & Stevens, 2011),
- **b.** casinos would be deleterious for urban and working-class populations.
- **c.** social problems created by gambling go home with the tourist, rather than impacting local social service and health care system (Grinols, 2004; Williams, Rehm, & Stevens, 2011).
- **d.** urban residents (poorer neighborhoods and lower incomes) are much more susceptible and positively associated with problem gambling (Welte et al., 2004; 2007; Williams, Volberg, & Stevens, 2012)

The SER has also reported major issues with the placement of lottery booths (75%) on island's most populated and largest portion of low-income communities in the districts of Cole Bay, Lower Princess Quarter, and Simpson Bay. Therefore, because the placement of gambling venues has a direct impact and correlation to problem and disordered gambling, local venues should not reside in low-income areas.

Restriction on Who Can Gamble

St. Maarten has six (6) vulnerable groups that are susceptible to gambling harm and disordered gambling: **youths, elderly, women, immigrants, the poor, and low educated individuals**. Therefore, any attempts towards safeguarding our most vulnerable should be geared towards those groups. However, although each group deserves equal attention regarding gambling prevention and protection, we must first prioritize those who have been studied to be most susceptible within a population, i.e., youths and young adults. Their exposure to gambling due to proximity, accessibility, and family and peer ties encourages gambling prematurely and can derail their future.

From a clinical perspective, youths and young adults with gambling problems exhibit higher rates of depressive symptomatology, increased risk of suicide ideation and attempts, higher anxiety (Gupta & Derevensky, 1998), as well as an increased risk of alcohol and substance abuse disorders (Hardoon & Derevensky, 2002; Winters & Anderson, 2000). In addition, there are a multitude of negative behavioral, psychological, interpersonal, and academic problems associated with problem gambling.

Among youths and young adults, problem gambling has been shown to result in increased delinquency and criminal behavior, poor academic performance, higher rates of school truancy and dropout, and disrupted familial and peer relationships (Hardoon et al., 2002; Wynne, Smith, & Jacobs, 1996).

Our country was once conservative in its approach to gambling by having enforced legislation and policies for the protection of its residents, although primarily centered on adults. This was made clear in our 1948 federal ordinance of a 6 days per month limit and Coopers and Lybrand's 1996 report on warning letters issued by the Lieutenant Governor's Office.

Gambling was once considered to be a sin or vice only to be found within hotels, is now generally perceived as harmless adult entertainment that has become mainstream in our society in various ways. Today, St. Maarten youths and young adults are a unique generation because they are raised in an environment where a various gambling types and venues exist, are widely available, easily accessible, and heavily advertised which was not the case in 1948 when the ordinance was established.

On the other hand, individuals that were youngsters when the ordinance was established have experienced a paradigm shift from being sheltered and adhering to laws, to seeing a rapid gaming industry expansion and unenforced laws. In many ways gambling has not only been normalized for our past, current, and upcoming generations but it has also desensitized them.

With the normalization of gambling locally, the shift of unenforced laws and policies for protecting our most vulnerable, especially our youths, has become the status quo. Examples would be the **Rouge et Noir Casino** in Philipsburg next to the St. Maarten Library and Sundial High School, **Paradise Casino** in Cole Bay that's adjacent to the family movie theatre Megaplex and INDISU Dance Theatre, and **Porto Cupecoy (Stars) Casino** in Cupecoy near CIA Highschool and the American University of the Caribbean.

Additionally, when Lottery offices, booths, and resellers within or near places like gas stations, supermarkets, restaurants, churches, schools, sports auditoriums, healthcare offices, and other places where families, youngsters, and the elderly frequent the overall social and health well-being those individuals are not regarded or prioritized by government. If anything, the allowance of casinos in particular near sensitive sites directly negates TEATT's Casino Policy on location determinants. Although well intended to a degree, TEATT's Casino and Lottery policies have also failed our society when it comes to other aspects of protection. For instance, no consideration on loitering in front or near gambling facilities, marketing advertisement that discloses the dangers of gambling or places to contact if you or someone you know is experiencing gambling related harm.

Therefore, given the island's unique disposition of its existing gambling industry and plausible undeniable likelihood of undiagnosed problem and disordered gambling, it is governments duty to protecting its most vulnerable as best as possible.

Increasing St. Maarten's Legal Gambling Age from 18 to 21

Worldwide gambling ages range 15 – 21 depending on the types of gambling and jurisdiction. The section provides six (6) justifiable reasons as to why gambling on St. Maarten should be moved to the age of 21.

1. The nature of the gambling industry. The gambling industry is not a regular business and therefore should not be regarded as such. The design of the casino industry for instance, is based on Bill Friedmans and Roger Thomas principles that have scientifically been proven to entice, put individuals in a trance, and make them less aware of their spending. Friedmans classic casino interior design has no clocks or windows, so visitors lose track of time; maze-like walkways with enticing games by bathrooms and exits meant to disorient; vision (based on color theory[85]), hearing, and scent stimuli; and has an intimate setting where rooms splinter into smaller sections to create different vibes and atmospheres. Thomas's modern design is more playground-like in its décor and layout navigation, has high ceilings, and fine European-style furnishings. This design induces a sense of security, intimacy, freedom, and vitality (Hirsch, 1995; Finlay et al., 2006; Friedman, 2000; 2010; Lehrer, 2012).

   Therefore, whether a person is working as a blue-collar employee or is a player, the casino industry in particular presents higher levels of harmful and disordered gambling than other service-based industries.

[85] Color theory: rules and guidelines which designers use to communicate with users through appealing color schemes in visual interfaces.

2. If we approach harm, problem and disordered gambling, and the protection of those most vulnerable in our society from an ethical reasoning standpoint, critical thinking should guide our decisions. Utilitarianism[86] is a consequentialist ethical theory that strives to maximize the overall good of the whole rather than individuals or situational factors. It judges whether something is good or bad based on its outcome or consequence. In other words, whether the end justifies the means. Therefore, when considering the welfare of all within St. Maarten's society and the ramifications associated with having years of unenforced laws, policies, protocols, and lack of institutional frameworks to protect our most vulnerable, our decision should be weighed against the greater good and proven scientific facts that illustrate the occurred consequences of an unchecked gambling industry. A "lack of gambling addiction data" cannot and should not be the sole justification for not bringing about needed structural changes and reform when this report has outlined, within context, damaging ongoing local factors of gender, poverty, unemployment, low education, and housing instability which are high risk contributors to gambling addiction. Moreover, our inability to take the likelihood of gambling seriously over the years has probably led to increased consequences of co-addictions and disruptions such as alcohol and substance abuse, mental illness, suicide ideation and attempts, domestic violence, divorce rates, etc. Although we cannot say those issues are correlated to gambling, we also cannot say that they are not. Therefore, the betterment of this country in this regard should be based on proven negative consequences of our inactions.

3. The developmental differences between 18- and 21-year-olds. Research has shown that the brain undergoes significant development having the transition from adolescence to early adulthood, with important changes in regions of the brain involved in decision-making, impulse control, and reward processing (Casey et al., 2008; Luna et al., 2004). These changes continue into the mid-20s, which is why some experts have proposed that the age of 25 may be a better marker of when the brain is fully matured (Arnett, 2000). These changes in brain development have important implications for gambling behavior and addiction. The prefrontal cortex, which is responsible for decision-making and impulse control, is not fully developed until the mid-20s.

[86] Utilitarianism: https://plato.stanford.edu/entries/utilitarianism-history/

This means that younger individuals may be more susceptible to making impulsive decisions and taking risks, which could lead to gambling problems (Shaffer & Martin, 2011).

Additionally, the reward processing system in the brain undergoes significant changes during this period of development. The mesolimbic dopamine system, which is responsible for the release of dopamine in response to pleasurable stimuli, including gambling, is highly sensitive during adolescence and early adulthood. This means that younger individuals may experience more intense pleasure and reward from gambling, which could increase the likelihood of developing a gambling addiction (Casey et al., 2008). Overall, while there are certainly individual differences, scientific evidence suggests that 21-year-olds are generally more developmentally advanced than 18-year-olds, particularly in areas related to brain, social, emotional, and cognitive development.

Noteworthy, in 2016, St. Maarten Government sought it fit to lower the age of sex workers, another sensitive business by nature, from 25 to 21[87, 88, 89, 90] and not to the age of 18. The reason behind the decision was based on the premise that cognitively a 21-year-old makes sounder decisions than an 18-year-old[91].

4. Research has vigorously described the life domains in which the gambling industry infringes on, factors of harm, and the complexity of diagnosis and treatment. This study has proven that **(1)** youths and young adults are most susceptible to gambling harm brought on by familial gambling exposure, being employed within the industry, and excessive availability of casino and lottery venues, online gambling, and gaming. Currently, our **18-year-olds have access to 2, 618 gambling (accounted for) opportunities locally**, which have been unregulated for years, especially lotteries and online gambling. **(2)** St. Maarten young adults ages 18 – 21 seem to indicate no major interest in being employed within the gaming industry in the past 4 years (**Table 10**). **(3)** Local trends attest that young adults experience invisible homelessness due to lack of financial means. **(4)** If gambling addiction were to be researched locally, there is currently no infrastructure in place to deal with potential influx of cases.

[87] Beleid tot regulering van seksbedrijven en stripclubs op Sint Maarten, 2003
[88] Prostitutiebeleid en handhaving in Sint Maarten. Raad voor de rechtshandhaving. 2016.
[89] SXMNews: https://stmaartennews.com/judicial/supervision-sex-industry-completely-inadequate/
[90] SXMNews: https://smn-news.com/index.php/st-maarten-st-martin-news/24199-law-enforcement-council-presents-adult-entertainment-inspection-report-to-justice-minister.html
[91] This information was provided by a former VSA policy worker that worked on the amended policy change.

Therefore, it can be deduced that local youths and young adults gambling susceptibility is high; although unemployed the gaming industry seems not to be their preferred place of employment; youths also don't have the financial means to sustain gambling habits if they cannot afford to live on their own; and there is limited to no resources for treatment and support in place for them. For perspective, young adults (20 – 24 years) represent 5% of our population and even less if we're only considering those that are 18 years of age (Table 2).

5. Our country's Civil Book 1 *(Burgerlijk Wetboek Boek 1)* article 395a[92] states that parents are obligated to provide for the cost of living and education of their adult children who have not yet reached the age of 21 years. Therefore, although young adults aged 18 are adults, we also consider them to not be responsible enough to care for themselves education and housing wise.

> **Article 395a**
> 1. Parents are obliged to provide for the costs of living and education of their adult children who have not reached the age of 21 years.
>
> 2. During his marriage, a stepparent is obliged to provide for the costs referred to in the first paragraph towards the adult children of his spouse who are part of his family and who have not reached the age of 21 years.

6. Although benchmarking results (**Table 17**) depict countries within the Kingdom and region all have the age of gambling at 18 years, our government should also weigh the situational differences between our country and others. St. Maarten's size, size of gaming industry per capita, socioeconomic developments and hardships, multicultural (ethnic) composition, and lack enforcement of rules sets it apart from other countries.

   Notably, infamous gambling cities like Las Vegas, Atlantic City, and countries like Japan and Singapore have taken a stance on young adult gambling. Taking the US as an example, each state is obligated to address problem gambling autonomously. The minimum age for gambling is 18 but differs based on state and gambling type.

[92] Burgerlijk Wetboek Boek 1: https://lokaleregelgeving.overheid.nl/CVDR142362/1

Each state independently decides their legal gambling age based on **(1)** lawmakers, **(2)** native tribal groups[93], **(3)** and the country's age (21) for alcohol consumption[94]. For context, of the 50 US states, only 12 allow 18-year-olds to play in casinos[95], and although permitted, individual state counties and casino properties can decide their own regulations such as limiting youngsters access to certain games. Nevada, one of the US's largest gambling states, is adamant on the gambling age being 21. Nevada's reasoning is both from a public health and economic perspective. Public health-wise having the gambling age at 21 helps prevent young people from developing gambling problems, which has been proven by research (Shaffer & Martin, 2011, Casey et al., 2008). From an economic perspective, setting a higher age limit for gambling Nevada positions itself as a destination for adults-only entertainment (American Gaming Association, 2021; Ivanov et al. 2023).

An assemblyman attempted in 2017 to change the gambling age from 21 to 18 but was unsuccessful due to these reasons:

- *Would lowering the age draw more gambling patrons?*[96]
  - The consensus was no.
- *How much are young patrons expected to spend with their freedom to gamble?*
  - The majority felt that the difference was not much and thus not worth the investment.
- *Young people should be kept from gaming activities until they become old enough to be responsible.*[97]

Nevada Law "**Gaming or employment in gaming prohibited for persons under 21; exception**" [98]

> Nevada law states that those aged below 21 years shall not "play, be allowed to play, place wagers at, or collect winnings from, whether personally or through an agent, any gambling game, slot machine, race book, sports pool or pari-mutuel operator; loiter, or be permitted to loiter, in or about any room or premises wherein any licensed game, race book, sports pool or pari-mutuel wagering is operated or conducted or be employed as a gaming employee except in a counting room."

[93] Native tribal groups/ Native American groups are indigenous Americans that own Indian reservations or tribal land. In the US these groups have their own gambling operations and laws (Wilkenson, 2005).

[94] Legal minimum age for casino gambling as of 2023: https://www.casinos18.com/laws/

[95] 18-year-olds in casinos: https://www.casinos18.com/states/

[96] Nevada age justification https://www.gamblingsites.org/news/vegas-bill-to-lower-gambling-age-doa/

[97] Young people are not responsible enough to gamble https://www.roulettesites.org/blog/gambling-laws/gambling-age-in-las-vegas.php

[98] Chapter 463 - Licensing and Control of Gaming, NRS 463.350 https://www.leg.state.nv.us/nrs/nrs-463.html#NRS463Sec350

Therefore, upping the age of gambling from 18 to 21 is a more than justifiable endeavor. Given our island's unique context (i.e., excessive gaming and gambling availability and exposure, years of unenforced policies and laws, our multicultural society, low education, and high poverty and unemployment rates) the probable irreputable harm, damage, and cultural normalization of gambling is deeply embedded and not a simple matter to reverse or rectify. Even with the institution of a regulated gaming sector by the SMGA, the practical, cultural, and financial restructuring of our society will not be a "quick fix" with new legislation and regulations.

Alternations or Restrictions on how gambling is provided.

This entails modifying Electronic Gambling Machine (EGM) parameters. Specifically, when it comes to win/Loss patterns, game play speed, near misses, number of play lines, bill acceptors, stake and prize size, payback percentages, interactive features, pop-up messages, on-screen clocks, mandatory cash-out, privacy (the placement of gambling machines in backroom, bars, etc.), money versus credit, and lights, sounds, and seating (Williams et al., 2012).

Player pre-commitment

Pre-commitment is a strategy where a pre-set limit on gambling time, frequency, or money is registered to the start of the play (Williams et al., 2012). This is well suited for online and land base gambling. With online an electronic record that is linked to an identifiable person is kept. Whereas land base pre-commitment is done using a 'smart card[99]', which are usually linked to player loyalty or reward card. However, studies have argued that reward/ loyalty cards should either be eliminated, or their parameters should be changed because they likely help heavy gamblers and problem gamblers to reconcile their losses. Therefore, if used, pre-commitment cards should reward responsible play, rather than amount of play. Solutions would be that players receive no points after exceeding a reasonable operator-set daily level of spending, and/or lose points after exceeding this threshold. Providers could also award points for socially responsible and self-protective behavior, such as viewing educational resources, completing personal risk assessments, or comparing personal consumption patterns to normative standards.
Another useful strategy would be to use the data concerning the player's gambling behavior to proactively alert the player to patterns of behavior that are associated with future problems.

[99] A smart card is any pocket-sized plastic card with embedded integrated circuits providing some limited memory and/or microprocessor capabilities when interacting with external card-reading devices.

Proactive intervention with at-risk gamblers

Problem gambling awareness training to employees

Problem gamblers in gambling venues are known to display reliable behavioral cues (i.e., anger, repeated withdrawals from ATMs, etc.). It is therefore important to train staff (frontline workers, EGM site holders/staff, and lottery retailers) within gambling venues on behavioral cues and methods of intervention (Williams et al., 2012). In many countries, program design tends to be based on collaborative consultation among government, gambling industries, and prevention/treatment agencies. Staff training for venue staff must be mandated legislatively.

Automated intervention

In the Netherlands, the show of identification is required to track the frequency of casino visits (Williams et al., 2012). If the computer indicates a significant increase in visitation frequency or 20 visits a month over three consecutive months, then the person is automatically approached to see whether they would like to sign a visit limitation or self-exclusion contract.

Self-Exclusion

Self-exclusion is a tool used to support (struggling) gamblers to stay away from gambling[100](Riley, 2017). Depending on the country and law the tool can be applied online or land-based and offers the player voluntarily self-exclusion or mandatory (brought on by probable cause and or suspicion by the operator). Exclusion can be for a lifetime or a set duration (e.g., 3, 6, 9, 12 months). In most countries a multi-operator self-exclusion scheme is executed. This means that a person can make a single request to self-exclude from a type of land-based gambling within an area.

Casino self-exclusion programs/ mechanisms have the potential to reduce harm compared to other initiatives, as they are designed to minimize the harm in existing problem gamblers rather than preventing problem gambling in the first place (Williams et al., 2012). The most unambiguous impact is that most people who enter these programs have a significant reduction in their gambling and problem gambling symptomatology.

[100] Self-exclusion tool for gambling: https://www.gamblingcommission.gov.uk/public-and-players/page/self-exclusion

Undoubtedly, a good portion of this effect is because people taking this step have recognized they have a problem, are highly motivated to do something about it, and have made a public proclamation that they do not intend to reenter casinos. The additional utility of self-exclusion lies in its potential to provide additional external constraints on the person's gambling when his/her motivation falters. Such a modernized tool would better equip the gaming industry to minimize resident play in our local casinos.

Restricting the access to money

Automated teller machines (ATMs) are commonly located in gambling venues, and there are often no limits on ATM withdrawal amounts. In research it is well established that problem gamblers access cash machines more frequently than regular gamblers (Williams et al., 2012). Many gambling venues in Philipsburg and the Simpson Bay area are near ATMs. In restructuring our local industry, access to money outlets also needs to be addressed and restricted.

Restricting the concurrent use of alcohol and tobacco

Gambling and drinking often co-occur, particularly in places where gambling occurs at problematic levels. A study on consumption of alcohol during video lottery terminals[101] play found that length of play, rate of double-up betting, and play of losing hands increased during moderate alcohol intoxication, especially for probable pathological gamblers (Ellery, Stewart & Loba, 2005). Kyngdon and Dickerson (1999) found that alcohol consumption prolonged gambling sessions, with the potential for greater financial loss arising from increased risk taking. Other research consistently replicates the finding that alcohol has a disinhibiting effect on gambling restraint and increases risk taking (Baron & Dickerson, 1999; Cronce & Corbin, 2010; McDonnell-Phillips Pty Ltd, 2006; Phillips, Triggs, Coman, & Ogeil, 2005; Sjoberg, 1969). The aspect of alcohol and tobacco consumption in gambling establishments is missing within St. Maarten's policies and legislation.

[101] A video lottery terminal is like a slot machine in which it offers a variety of chance-based games and the outcome is determined by a random number generator.

Restricting Advertisement

Almost all countries have consumer protection legislation that requires 'truth in advertising', which should theoretically curtail attempts to portray gambling as harmless, safe, or a good way to make money (Williams et al., 2012). Beyond this, many countries have specific legislation that places additional constraints on gambling advertising. For example, most European countries limit the amount of gambling advertising and/or make it mandatory to inform people of the associated dangers. The nature of gambling advertising is also of concern locally because there are no guidelines or restrictions geared towards responsible gambling, or odds of winning, for instance.

11.3 Fraud Prevention

Institutions such as casinos, lotteries, and online are natural places for fraudulent practices, such as money laundering, to occur (Williams et al., 2012). Reasons why persons commit fraudulent acts in the gambling industry are as follows according to research; **(1)** large amounts of money are often involved, **(2)** comorbid psychiatric disorders, **(3)** job positions (i.e., financial authorities, accounting clerks, managers, operators, lawyers, real estate agents, etc.), **(4)** unemployment, **(5)** criminal groups, **(6)** ex-convicts, etc. (Dougherty et al., 2021). To prevent money laundering within the gaming industry, existing[102] and new legislation along with supportive policies are essential. These legislation should apply to all gaming institutions (i.e., land-based and online).

Besides government, the SMGA, and FIU's role within the anti-money laundering and fraud prevention process, gambling license holder's role is essential. Firstly, license holders must conduct customer due diligence (a.k.a. know your customer). Customer due diligence enables the gambling institution, among other things, to identify the customer and verify his/her identity, determine the purpose and nature of the business relationship and a continuous monitoring of the services performed during the term of this relationship perform transactions.

[102] AB 2016 nr. 12 Ministeriële regeling tot wijziging Regeling indicatoren ongebruikelijke transacties (Sint Maarten) https://cdn.centralbank.cw/media/legislation_guidelines/20190120_ab_2016_no12_ministeriele_regeling_tot_wijziging_regeling_indicatoren_ongebruikelijke_transacties.pdf
AB 2019 nr. 24 Landsverordening, van de 17de juni 2019, houdende regels teneinde te voldoen aan aanbeveling 29 van de Financial Action Task Force omtrent financiële inlichtingeneenheden (Landsverordening Meldpunt Ongebruikelijke Transacties) https://cdn.centralbank.cw/media/legislation_guidelines/20200812_ab_2019_no_24_landsverordening_meldpunt_ongebruikelijke_transacties.pdf

Secondly, license holders must report an unusual event that has been or is planned transaction, without delay after the unusual nature of the transaction is known report to the Financial Intelligence Unit (FIU). In the proposed gaming casino regime, the SMGA will monitor compliance with the law by holders of a license to operate gaming. Thirdly, license holders must take precautionary measures to prevent interplay between a visitor and an employee of an institution, for example. Interplay can occur under false pretenses in which employee and players divide winnings amongst themselves.

The Cost of Gambling

The total sum of social, health, and economic impact related to gambling differs per country and local context and is therefore difficult to ascertain what the overall cost is or would be. The complexity lies with the vast range of intersectoral collaborations such as (healthcare) treatment and prevention, policing, prosecution, incarceration, and probation for gambling-related crime; child welfare involvement for gambling-related family problems; unemployment and welfare payments and lost productivity because of gambling-related work problems. However, because only a small group of problem and disorders gamblers seek or receive treatment the bulk of the impacts tend to be social and health, or nonmonetary by nature.

Healthcare Impact and Financial Costs of Gambling

Lastly, we must consider the overall cost of gambling on our society, especially if we fail to tackle it from a multisectoral perspective. **Appendix 6** of our report provides a detailed overview of addictive disorders and the mental, medical, physical, financial, and criminal burdens associated with gambling. Due to the sedentary nature of gambling, individuals with a gambling disorder experiences more stress, breath more secondhand smoke, participate in fewer health-related activities, which are risk factors that causes them to develop serious and chronic medical conditions (Morasco et al. 2006). Also, individuals with preexisting medical conditions and those with physical limitations are more at-risk of becoming gamblers because gambling is a form of recreation that requires minimal activity.

Medical costs

Disordered gamblers and problem gamblers have higher rates of medical utilization (Morasco et al. 2006). Populations with at-risk individuals, disordered and problem gamblers are more likely than low-risk gamblers to be treated in the emergency room (ER) and experience severe injury. Research shows that lifetime gambling problems are associated with current health functioning and medical utilization.

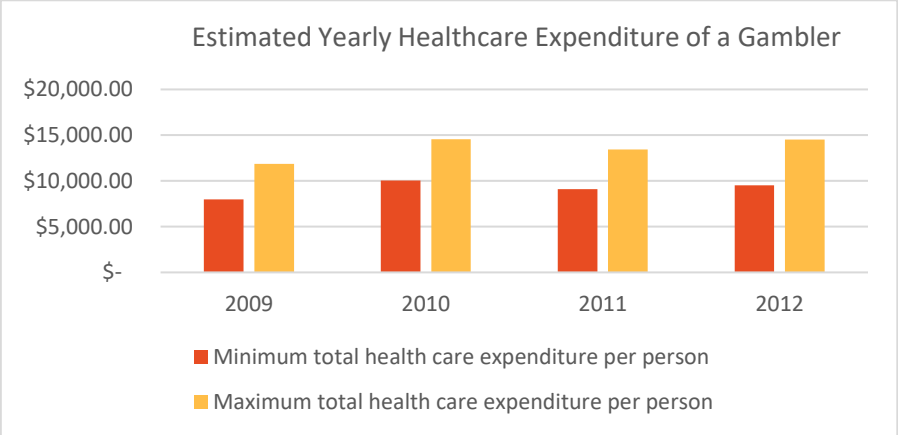
For context, a 4–year (2009 – 2013) US study with 599 patients investigated medical and pharmaceutical claims of residents (Rodriguez-Monguio et al., 2018). The subjects were individuals ≥18 years old, in possession of healthcare insurance, diagnosed with problem gambling, and sought care. Healthcare cost components included outpatient, inpatient, ER visits, and prescription drugs.

Results showed 50% had impulse control issues, 31% has episodic mood disorders, 14% had anxiety disorders, and 9% had psychoactive substance[103]. Results were bias corrected with a 95% confidence interval. The total expenditures on health care per person diagnosed with disordered gambling were as followed (**Figure 11**):

- **2009:** $7,993 – ± $11,847
- **2010:** $10,054 – ± $14,555
- **2011:** $9,093 – ± $13,422
- **2012:** $9,523 – ± $14,505

Pharmaceutical expenditures represented 16% – 22% (or $5,866,08 – $11, 952.38) of total healthcare expenditures, per person.

Figure 11: example of yearly healthcare expenditure per gambler (Rodriguez-Monguio et al., 2018)



Over a 4-year period, yearly estimated healthcare expenditure per gambler ranges from $36,663 – $54, 329. For context, if we considered the exact scenario of ≥18 years old, in possession of healthcare insurance, diagnosed with problem gambling, and sought care for only 20 persons healthcare expenditure would be range over a 4-year period from $733,260 minimally to $1,086,580 maximally.

[103] A drug or other substance that affects how the brain works and causes changes in mood, awareness, thoughts, feelings, or Behavior.

12. Conclusion

The aim of this report is to assess and address the likelihood of problem and disordered gambling on Dutch Sint Maarten. This paper concludes that St. Maarten has a high undeniable likelihood of gambling addiction.

Evidence has shown that the island offers way too many gambling opportunities per square capita and the ancient justification that the gambling sector positively stimulates the economy whilst being a lucrative touristic attraction is primitive and is simply not the case locally.

With an active gambling industry that spans over 60 years, the country's reporting, policies, legislation, and regulatory body has not progressed to reflect modern advancements. Many aspects such as consumer protection, responsible gambling, the prevention of addiction, harmful gambling types, venue locations, convenience gambling, and restricting resident play have not been thoroughly regulated since inception.

Also, considering that presently and likely for quite some time the island has **general risk factors that contribute to gambling** such as a high influx of immigrants, a diverse multiethnic culture, high unemployment, poverty, and low education rates, frequent traumatic events of hurricanes and stressors; **gambling specific factors** of social-political influence in decision making, and an oversaturated nature of gambling exposure, accessibility, and participation; a detected and unresolved local gambling addiction; and over NAF 22 million in uncollected industry fees, not accounting online gambling operators and lottery booths.

Any attempts to address the strong likelihood of local problem and disordered gambling issues are vast, complexed, and not a simple matter to solve. Structural reform will entail a multi-ministerial and sectoral approach and commitment. The Ministry of VSA standpoint on gambling is that a paradigm shift that encompasses responsible gambling, consumer protection, enforced educational and policy prevention incentives (restrictions), and fraud prevention needs to occur expeditiously.

Gambling is and, with the introduction of a new gaming authority such as the SMGA, will remain part of our society. Therefore, creating an environment that will safeguard our islands most vulnerable should be our top priority.

The following restrictions must be instituted:

- Restrict and limit the harmful types of gambling such as continuous and internet gambling.
- Restrict and limit the amount of gambling dedicated venues such as casinos and lottery facilities.
- Restrict and limit gambling from venues such as supermarkets, bars, restaurants, etc. (convenience gambling venues)
- Increase the gambling age to 21.
- Adapt and implement a modern gambling self-exclusion tool.

13. Future Aspirations

Follow-up research will ensue after this report. Therefore, the Ministry of VSA aspirations are as follows:

- Conduct a Country wide Problem and Disordered Gambling Addiction.
- Create addiction policies and legislation (on types most prevalent) for St. Maarten.
- Conduct a feasibility study on a gambling self-exclusion program for St. Maarten.
- Conduct a financial feasibility study on how much money would be needed to treat problem and disordered gambling locally.
- Mandate that our Health and Judicial facilities document and report problem and disordered gambling cases in their annual reports (include demographics such as a person's gender, age, district, co-addictions, and family history).

14. Solutions

This section aims to provide tangible solutions to the documented issues highlighted throughout the document. Therefore, it is important to acknowledge the stakeholders that play an integral role in the prevention of problem and disordered gambling.

Roles and Responsibilities of Stakeholders

Government

It is Governments role to coordinate, make provisioning, and actively prevent addiction to safeguard its citizens as much as possible. Their role entails providing a regulatory framework that considers all specific aspects and risks associated to games of chance, bearing groups that are particularly vulnerable and at-risks in mind. Notably it is of essential importance that the Ministries of TEATT, VSA, Justice and Finance collaborate to address and support responsible gambling, the prevention addiction and fraud.

The Ministry VSA

- **Develop an addiction policy**. The ministry of VSA should develop an addiction policy that recognizes addiction as a mental health disorder and covers various types of addiction such as alcohol, substance use, gambling, etc.
- **Develop addiction prevention legislation**. Once a policy has been created, VSA should establish legislation geared towards addiction prevention. In such legislation aspects like the introduction of sin/hazard taxes on sensitive industries like brothels, gambling, liquor, tobacco, etc. should be instituted to provide the necessary funds (to government coffers) that will help combat and assist the islands' most vulnerable that are plagued by addiction.
- **Create a social healthcare fund** in which the collected taxes can directly be funneled to so that annual budget cuts and agenda priorities do not affect the continual flow that is needed for the sustainability and effectiveness of programs, initiatives, subsidies, campaigns etc.
- **Set subsidy specific rules and guidelines for health and social care facilities** that treat and support individuals with addiction. Institutions that are requesting subsidies should adhere to set governmental reporting standards/requirements, e.g., international standards of care delivery (tools and resources, training, etc.), quarterly and or yearly reporting on administered care, patient demographics, recovery success rates, facility improvements, bottlenecks, financial projections, etc.

- **Create Public Health Awareness on gambling and addiction.** The ministry should contribute to awareness campaigns that educate the public about responsible gambling practices, potential risks associated with excessive gambling, and available support services for individuals with gambling-related problems. It can collaborate with relevant organizations to disseminate information and promote responsible gambling messages. The provided information should include island-specific data on addiction which should be done in collaboration with (mental) Health Institutions, the gambling authority, the ministries of TEATT, Justice and Education. This way well-rounded, social, health, economic, judicial, and educational data can be represented when the information is provided.
- **Collaborate and support Problem Gambling Prevention and Treatment initiatives and programs.** The ministry should support initiatives related to problem gambling prevention and treatment. This can involve working with healthcare providers, social service organizations, and addiction treatment centers to ensure the availability of appropriate counseling, therapy, and support programs for individuals affected by problem gambling.
- **Collaborate with and support Social Welfare agencies.** The ministry should collaborate with social welfare agencies to address social implications that may arise from gambling-related issues. This can include aiding individuals or families affected by gambling-related harm, facilitating access to social support services, and ensuring that vulnerable populations are protected.
- **Monitor industry compliance pertaining to Labor Relations and Employment Practices**. The ministry should oversee labor relations and employment practices within the gambling industry. This includes monitoring compliance with labor laws, ensuring fair working conditions, and safeguarding workers' rights. It can also promote occupational health and safety measures to protect employees working in gambling establishments.
- **Collaborate with Regulatory Bodies for input, data, and information.** While the primary regulatory role in the gambling industry usually falls under a gambling authority, the Ministry of VSA should collaborate with said authority to ensure the well-being of individuals involved in the industry. This can involve providing input on social and labor-related matters, contributing to policy development, ensuring the protection of public health interests, data collection and information.

Ministry TEATT

- **Revise and create gambling policies for casinos, lotteries and online.** The "rules of the game – casino policy and lottery policy" should be modified to suit the soon-to-be gaming regime as described in draft legislation. Additionally, revisions to the lottery policy should be made to also include lottery booths and their locations, proximity to sensitive venues, the number of venues, etc. An online gambling policy should also be developed.
- **Collaborate and Promote gambling as a Tourist attraction**. Gambling should be portrayed and seen as a tourist endeavor/attraction. The ministry should collaborate with the gambling industry and tourism stakeholders to promote St. Maarten as a destination for gambling tourism. It can support joint marketing efforts, participate in trade shows, and leverage digital platforms to showcase the diverse offerings of the gambling sector.
- **Policy Advocacy and Collaboration.** The ministry should advocate for policies and regulations that support the evolution and sustainability of the gambling industry. It can work with other government bodies and regulatory authorities to create a favorable regulatory environment that balances economic considerations with responsible gambling practices and player protection.
- **Promote and Support Digital Connectivity and Innovation within the industry**. In an increasingly digital world, the Ministry of TEATT should promote and support the integration of technology and digital platforms within the gambling industry. This can involve supporting initiatives related to online gambling, e-gaming, and digital payment systems to monitor the industry's competitiveness and accessibility. In turn it also modernizes the data collection process.
- **Collaboration with Regulatory Bodies**: While the primary regulatory role falls under a gaming authority and the FIU, for instance, the Ministry of TEATT should collaborate with these bodies to ensure coordination and alignment of efforts. This can include sharing information, providing support in policy development, and facilitating cooperation between the gambling industry and other sectors.

The Ministry of Justice

- The Ministry of Justice should be involved in the development and review of **policies and legislation related to gambling**. It can work in collaboration with other relevant government bodies and regulatory authorities (e.g., a gaming authority) to establish a legal framework that promotes responsible gambling, protects players, and addresses issues such as money laundering and fraud.
- **Review and revise law enforcement policies and legislation related to gambling**. The Ministry of Justice works closely with law enforcement agencies and addresses any criminal activities or violations related to gambling. This includes investigating illegal gambling operations, cracking down on unlicensed gambling establishments, and combating activities such as money laundering or fraud that may be associated with the industry. Therefore, in-depth knowledge on gaps, loopholes and best practices can be addressed in law enforcement policies and legislation related to gambling.
- **Collect and report data on the gaming industry from regulatory bodies** as it pertains to criminal offenses (e.g., theft, fraud, embezzlement, child welfare endangerment, etc.), marital dissolution, etc. due to problem and disordered gaming. It is of essential importance that this information be gathered and shared with other relevant ministries and institutions in a standardized manner for the purpose of policy development and revision, legislation adaption (if necessary), and program and initiative development.
- **Continual collaboration with regulatory bodies.** A continual feedback loop between the gaming industry operators, a gaming authority, the Bureau of Unusual Financial Transactions (MOT), Financial Intelligence Unit (FIU/ FATF), and the prosecutor's office (*Openbare Ministrie—OM)*, and the Law Enforcement Council (*Raad voor de rechtshandhaving*) is essential for thorough active surveillance of fraud prevention, detection of suspicious transaction, and prosecution of criminal offenses. This collaboration can involve providing legal guidance, supporting investigations into illegal gambling activities, and ensuring compliance with relevant laws and regulations.
- **Collaborate with relevant organizations on Player Protection**. While player protection primarily falls under the purview of a gaming authority, the Ministry of Justice can support initiatives that aim to safeguard the interests of gamblers. This can involve collaborating with relevant organizations to raise awareness about responsible gambling practices, providing avenues for reporting illegal or unethical gambling practices, and ensuring that appropriate measures are in place to address player complaints and disputes.

- **Continued International Cooperation and Collaboration**. The Ministry of Justice should continue to engage in international cooperation and information sharing with other jurisdictions to address transnational gambling-related issues. This can involve sharing best practices, exchanging information on criminal activities, and participating in initiatives to combat illegal online gambling or cross-border gambling fraud.

The Ministry of Finance

- **Update the current tax system**. The Ministry of Finance should ensure that our country's tax system can adequately contribute to the superfluous and ever evolving economy. Financially St. Maarten has not benefitted from the gaming industry so it's imperative that our tax system can handle the workings of the changing economy and evolving gaming regime.
- **Seek to conduct research or commission studies into the introduction of a sin/hazard tax** on sensitive industries (alcohol, tobacco, sex, gambling, etc.) that will help to combat and tend to the harm those industries are causing.
- **Collect all outstanding fees from the gaming industry** (online gambling and monies accrued from lottery facilities should also be included).
- **Review and amend gambling taxation.** The Finance Ministry together with a gaming authority should formulate, determine, and implement tax policies related to the gambling industry. This includes the appropriate tax rates, assessing, and collecting taxes from gambling operators, and ensuring compliance with tax obligations.
- **Collaborate with regulatory bodies and law enforcement agencies for Financial Monitoring.** The Ministry of Finance should collaborate with regulatory bodies and law enforcement agencies to monitor financial transactions and activities within the gambling industry. This can help identify any irregularities, such as money laundering or fraudulent practices, and take appropriate measures to address them.
- **Budget Allocation.** The ministry should be involved in the allocation of funds generated from the gambling industry within the broader government budget. This includes determining how the revenue from gambling is distributed and utilized, such as funding for public services, infrastructure development, or social welfare programs.

- **Conduct or commission studies on the Economic Impact of the gambling industry.** The Ministry of Finance should conduct or commission studies to assess the economic impact of the gambling industry. This analysis can help understand the contribution of the industry to the local economy, employment generation, and overall fiscal health. It can also inform policy decisions related to the gambling sector.
- **Collaboration with Regulatory Bodies.** While the primary regulatory role falls under the jurisdiction of a gaming authority, the Ministry of Finance can collaborate to provide financial expertise, guidance on tax matters, and ensure financial transparency and accountability within the industry.

The Player

The gambling player/consumer must take responsibility for his/her own playing behavior.

- Players must **take responsibility for managing** his/her own **playing time** and the **amount of money spent** on games of chance.
- Players must take **initiative and responsibility to self-educate themselves** on the dangers of games of chance. Both from self-initiatives and from public information about the dangers of addiction and the resources available for treatment.
- Players must **take the initiative to self-exclude and or seek treatment** at designated treatment facilities.
- Players also **have the right to be informed** on the odds and dangers of games of chance they engage in. It's the responsibility of the license holders to have that information on all devices, tickets, and platforms.

Games of Chance License and Permit Holders

- License and permit holders **should be obligated to take measures and make necessary provisions for the prevention of addiction.**
- **It is essential to develop in-house policies and protocols on the detection and prevention** of at-risk, problem, and disordered gamblers. This includes but is not limited to detection measures, intervention triggers, reporting standards, protocols, etc.
- The license and permit holders **should have sufficient staff who are experts in the field of gambling addiction**. Personnel must identify potentially risky gaming behavior and, where appropriate, inform the player concerned about their gaming behavior and the dangers thereof. It is the

operator's responsibility to advise players about the available options to moderate their gaming behavior.

- **It is essential to develop in-house staff training for the detection and prevention** of problem and disordered gambling, and crime (e.g., fraud).
- **Comply with standards, rules and regulations set by the government and a gaming authority** pertaining to the gaming industry (taxes, annual fees, prevention measures, etc.)

A Gaming Authority

- An independent authority (i.e., the SMGA) should be responsible for issuing licenses to gambling establishments and **ensure that the industry operators meet strict criteria for operation**.

- The authority should also **regularly review and advise the government to update regulations to adapt to changing industry trends and technologies**.

- **Authorized to enforce compliance with regulations**, ensuring that operators adhere to legal requirements, including player protection, fair gaming practices, and responsible gambling measures. This can involve conducting regular audits, inspections, and investigations.

- **Ensure that responsible gambling measures are in place and promote responsible gambling practices**, including implementing player self-exclusion programs, age verification measures, and providing resources for gambling addiction treatment and support.

- **Enable to support Anti-Money Laundering (AML) and Anti-Fraud Measures.** The gaming authority should have robust mechanisms in place to support the prevention of money laundering, terrorist financing, and fraudulent activities within the gambling industry. This can include thorough background checks on license applicants, transaction monitoring systems, and reporting suspicious activities.

- Encompasses a system where **player protection**, **responsible gambling, and the prevention of addiction are centered within the industry**. This can be done by ensuring that operators have appropriate mechanisms in place to handle customer complaints, disputes, and provide fair resolution processes. This can include establishing a dedicated player support unit within the control board.

- **Transparency and Accountability.** The control board should operate transparently, providing public access to relevant information such as licensing requirements, regulatory guidelines, and casino performance reports, etc. It should also be accountable for its actions and decisions, regularly reporting to the public and relevant authorities.

- **Collaboration and Cooperation:** The control board should foster collaboration with international regulatory bodies, industry stakeholders, and law enforcement agencies to share best practices, exchange information, and address cross-border gambling issues.

- **Set gaming standards, surveil, inspect, combat illegal games of chance, report industry developments, negligence, and crime**. In this regard the authoritative body must have close ties with the Ministry of VSA and other relevant ministries and their extended branches so that individual and combined efforts, policies, and legislation are aligned.

Overview of Appendices

Appendix 1: Overview of potential Economic and Social Impacts of Gambling	
Table A1	Overview of potential Economic Impacts of Gambling
Table A2	Overview of potential Social Impacts of Gambling
Appendix 2: Major Caribbean gaming destinations 1995 statistics	
Table B	Major Caribbean gaming destinations 1995 statistics
Appendix 3: Overview of Casinos, Lotteries, and games in 2013 and 2021	
Table C1	HPS Consulting Report 2013. Casino operations based on Equipment and Games.
Table C2	HPS Consulting Report 2013. Inventory of tables and Machines per casino.
Table C3	TEZVT 2021 Verification Report 2021. List of Casinos and Slot Machines.
Table C4	TEZVT 2021 Verification Report 2021. List of Casinos and First Set of Gaming Tables.
Table C5	TEZVT 2021 Verification Report 2021. List of Casinos and Second Set of Gaming Tables.
Table C6	TEZVT 2021 Verification Report 2021. List of Lotteries and games provided.
Table C7	The number of employees on payroll in Casino. National Accounts Survey. TEATT dept. of STATs 2022.
Table C8	The number of employees on payroll in Lotteries. Business Census, 2018
Table C9	Gambling tax in the Collectivity of Saint Martin.
Appendix 4: 1948 – Federal Ordinance	
Appendix 5: Overview of Substance and Addictive Disorders	
Table D	Overview of Substance and Addictive Disorders
Appendix 6: Overview of the complexity of mental, medical, physical, financial, and criminal burdens associated with gambling.	
Table E	Overview of the complexity of mental, medical, physical, financial, and criminal burdens associated with gambling.

Appendix 1

Table A1: Overview of potential Economic of Gambling by Williams et al., 2011)

ECONOMIC IMPACTS (i.e., impacts that are primarily monetary in their nature)	
Government Revenue	Government revenue received directly from gambling provision or indirectly from taxation of businesses providing gambling. Taxes come in the form of licensing fees, property tax, corporate income tax, and goods and services taxes. It is also important to consider whether taxes may have risen if government had not received additional revenue from gambling.
Public Services	Changes in the quantity or quality of government or charity provided services (e.g., health care, education, social services, infrastructure, etc.) as a direct or indirect result of increased government revenue from gambling. *Note: this category could also be put in the Social Impacts section but is kept in the Economic Impacts section because of its close association with Government Revenue and because these services usually have a clear monetary value.*
Regulatory Costs	Changes in the amount of government revenue directed to ensuring that the new form of gambling operates according to government regulation.
Infrastructure Value	The introduction of any buildings (e.g., casino), roads, and infrastructure upgrades which add to the capital wealth of the community, and which are directly or indirectly attributable to the introduction of gambling.
Infrastructure Costs	The amount of revenue allocated by various levels of government to support the infrastructure needed to service new gambling facilities (i.e., road maintenance, utilities, fire services, police services). This does not include regulatory services or services specific to problem gambling.
Business Starts and Failures	The number of new businesses as well as business failures (commercial bankruptcy) associated with gambling introduction. Certain businesses should receive particular attention because research has shown them to be more likely impacted by gambling introduction. Specifically, these are other forms of gambling (i.e., bingo, horse racing, lotteries); the hospitality industry (i.e., hotels, restaurants, lounges); the construction industry; pawnshops; cheque cashing stores; horse breeding and training operations; tourism; and other entertainment industries.
Business Revenue	Changes in overall business revenue/sales in industries that are typically affected by the introduction of gambling. This does not include revenue received by the new forms of gambling.
Personal Income	Changes in average personal income or rates of poverty associated with gambling introduction.
Property Values	Changes in property values in geographic areas proximate to new gambling venues.

Table A2: Overview of potential Social Impacts of Gambling by Williams et al., 2011)

SOCIAL IMPACTS (i.e., impacts that are primarily non-monetary in their nature)	
Problem Gambling	Changes in the prevalence of problem gambling and the main indices potentially associated with problem gambling (i.e., personal bankruptcy rates, divorce rates, suicide rates, treatment numbers). There are also monetary costs associated with changes in problem gambling that should be tabulated (and included in the Economic Impact section). Specifically, these are the amount of money spent on a) treatment and prevention; b) policing, prosecution, incarceration, and probation for gambling-related crime; c) child welfare involvement for gambling-related family problems; and d) unemployment and welfare payments and lost productivity because of gambling-related work problems.
Crime	Change in the rate of crime and gambling-related crime. This would also include any observed decreases in illegal gambling with the introduction of a legalized form.
Employment	The number of full and part time jobs that are directly or indirectly created as a result of gambling introduction and the percentage of the general workforce that this represents.
Socioeconomic Inequality	Evidence that the introduction of gambling has a differential financial impact on people of different socioeconomic levels (e.g., potentially making it more or less 'regressive').
Leisure Activity	Changes in the pattern of leisure behavior associated with gambling introduction.
Public Attitudes	Change in public attitudes associated with gambling introduction. This could include changed attitudes about gambling (e.g., perceived benefits/harms), or changed attitudes about government or the role of government for allowing/providing gambling, etc.
Quality of Life/Public Health/Social Capital/Values	Change in the general quality of life, state of public health, societal interconnectedness, societal values, and related indices. These indices are often difficult to measure and also difficult to attribute to the introduction of gambling. Nonetheless, they are relevant impacts if they exist, and if they can be captured.

Appendix 2

Table B: Major Caribbean gaming destinations 1995 statistics

Country	Resident Population	Land Based	Cruise Ship Tourists	Number of Casinos	Percent of Total
Antigua	78,000	119,000	227,000	3	3.7
Aruba	67,000	614,000	302,000	11	13.4
Bahamas	257,000	1,598,000	1,543,000	5	6.1
Bonaire	10,000	59,000	11,000	2	2.4
Curaçao	164,000	224,000	172,000	12	14.6
Dominican Republic	6,000,000	1,932,000	n/a	22	26.8
Puerto Rico	3,800,000	3,042,000	980,000	16	19.5
St. Maarten	37,000	533,000	564,000	10	12.1
Turk and Caicos	8,000	78,000	n/a	1	1.2
US Virgin Islands	102,000	562,000	1,171,000	0	0
Total	**10,523,000**	**8,761,000**	**4,970,000**	**82**	**100**

Sources: Coopers & Lybrand (1996). Government of St. Maarten Gaming Industry Study.
St. Maarten Tourist Bureau, Caribbean Tourism Organization in 1996

* Totals may not sum due to rounding.

Appendix 3

Overview of Casinos, Lotteries, and games in 2013 and 2021

Table C1: HPS Consulting Report 2013. Casino operations based on Equipment and Games.

Casinos Slot machines only	Slot machines & Betting Book	Full Fledge Casinos
Tropicana Casino	Paradise Casino	Westin Casino
Great Bay Casino	Hollywood Casino	Princess Casino(PDP)
Jump up Casino	Dunes Casino	Rouge et Noir Casino
Beach Plaza Casino		Coliseum Casino
Casino Royale (Maho) Lobby		Diamond Casino
		Atlantis Casino
		Casino Royale (Maho)

Table C2: HPS Consulting Report 2013. Inventory of tables and Machines per casino.

	Slot machines	Black-jack	Poker	Roulette	Betting book	Bingo	Crap table
Westin Casino	184	9		1		1	1
Princess Casino(PDP)	498	3	16	3			
Tropicana Casino	306						
Great Bay Casino	102						
Paradise Casino	202				1		
Hollywood Casino	150				1		
Jump up Casino	230						
Beach Plaza Casino	162						
Rouge et Noir Casino	288	3	4	2			
Coliseum Casino	373	6	3	2			
Diamond Casino	151	3	3	1			
Dunes Casino	182				1		
Atlantis Casino	337	5	17	2	1		
Casino Royale Lobby	52						
Casino Royale (hotel)	357	9	7	4	1	1	1
Total	3574	38	50	15	5	2	2

Table C3: TEZVT 2021 Verification Report 2021. List of Casinos, Slot Machines, and other Machines.

No.	Casino Name	No. of Slot Machines	Other Machines		
			Bingo	Sport Book	Key Master
1	Rouge et Noir	187	1	0	0
2	Jump Up	153	1	0	0
3	Coliseum	168	0	0	0
4	Princess	319	0	0	0
5	Diamond	58	0	7	1
6	Hollywood	128	0	4	0
7	Tropicana	231	1	0	0
8	Porto Cupecoy	88	0	0	0
9	Ultimate	122	0	0	0
10	Paradise Plaza	149	**0**	**0**	**0**
11	Dunes	146	0	0	0
12	Beach Plaza	152	**0**	**0**	**0**
13	Casino Royale	249	0	0	2
Total		**2,510**	**3**	**11**	**3**

Table C4: TEZVT 2021 Verification Report 2021. List of Casinos and First Set of Gaming Tables.

No.	Casino Name	Number of Gaming Tables					
		Craps	Roulette	Black Jacket	Caribbean Stud	Let It Ride	Total
1	Rouge et Noir	0	2	0	0	0	2
2	Jump Up	0	0	0	0	0	0
3	Coliseum	0	2	3	5	0	10
4	Princess	0	2	3	4	0	9
5	Diamond	0	1	1	2	0	4
6	Hollywood	0	2	6	1	0	9
7	Tropicana	0	0	0	0	0	0
8	Porto Cupecoy	0	2	3	0	0	5
9	Ultimate	0	0	0	0	0	0
10	Paradise Plaza	0	0	0	0	0	0
11	Dunes	0	0	0	0	0	0
12	Beach Plaza	0	0	0	0	0	0
13	Casino Royale	0	3	7	0	1	11
Total		0	14	23	12	1	50

Table C5: TEZVT 2021 Verification Report 2021. List of Casinos and Second Set of Gaming Tables.

No.	Casino Name	Number of Gaming Tables						
		3 Card Poker	4 Card Poker	Regular Poker	Baccarat	Texas Hold' Em	Ultimate	Total
1	Rouge et Noir	0	0	0	0	0	0	0
2	Jump Up	0	0	0	0	0	0	0
3	Coliseum	0	0	0	0	0	0	0
4	Princess	4	0	0	0	4	0	8
5	Diamond	0	0	0	0	0	0	0
6	Hollywood	1	0	0	3	0	2	6
7	Tropicana	0	0	0	0	0	0	0
8	Porto Cupecoy	1	0	0	0	0	0	1
9	Ultimate	0	0	0	0	0	0	0
10	Paradise Plaza	0	0	0	0	0	0	0
11	Dunes	0	0	0	0	7	0	7
12	Beach Plaza	0	0	0	0	0	0	0
13	Casino Royale	2	0	0	1	0	0	3
Total		8	0	0	4	11	2	25

Table C6: TEZVT 2021 Verification Report 2021. List of Lotteries and games provided.

List of Lotteries						
No.	**Lottery Name**	**Lotto**	**Nummerloterij**	**Krasloterij**	**Sweepstakes**	**Total**
1	**Gold Pot N.V.**	V	V	V		**3**
2	**Jamaroma Lotteries N.V.**		V			**1**
3	**Gold Chest Enterprises N.V.**		V			**1**
4	**Kinfolk Lottery Company N.V.**	V	V	V	V	**4**
5	**Smartplay N.V.**		V			**1**
6	**Majula Gaming N.V.**	V	V	V	V	**4**
7	**My Lucky Day N.V.**		V			**1**
Total		**3**	**7**	**3**	**2**	**15**

Table C7: The number of employees on payroll in Casino. National Accounts Survey. **Source:** TEATT dept. of STATs 2022.

No.	LLC/ N.V. Name	DBA	Persons on Payroll	Comments
1	Babitbay Beach Development N.V. (Westin Hotel)	Westin Resort & Casino	0	Currently closed, soft opening planned for November 2023.
2	Corlac Games N.V.	Porto Cupecoy (Formerly Atlantis Casino)	?	?
3	C.M & M Services N.V. (Previously Resort of the World N.V.)	Casino Royale	64	
4	Dutch Caribbean Resort (D.C.R) N.V.	Hollywood Casino	64	
5	Funtime N.V.	Rouge Et Noir Casino	92	
6	G.N. Entertainment N.V.	Dunes Casino	0	Part of the Atlantis World Group (AWG).
7	International Race & Sports Consultants N.V.	Jump Up Casino	41	
8	Millenium Star N.V.	Ultimate Sports Casino	30	
9	Oasis Gaming Company N.V.	Tropicana Casino	32	
10	Play To Win N.V.	Paradise Plaza	0	Part of the Atlantis World Group (AWG).
11	Port De Plaisance Hotel Management N.V.	Princess Casino	0	Our register doesn't have the casino separate from the hotel. Together they employ 97 people.
12	Sint Maarten Games N.V.	Beach Plaza Casino	35	
13	Sint Maarten Resorts Hotel & Casino N.V.	Golden Casino (Divi Little Bay)	0	Inactive in our register. Was located in Sonesta Great Bay.
14	Trimerit N.V.	Diamond Casino	29	
15	Vegas Amusement N.V.	Coliseum Casino	53	
16	Atlantis World Group (AWG) Holding CO. N.V.	Starnet Gaming	140	
Total			**580***	

Noteworthy: the dept of Stats recorded 14 active casinos whereas TEATT recorded 13.

Table C8: The number of employees on payroll in Lotteries. Business Census, 2018. **Source:** TEATT dept. of STATs 2022.

No.	LLC/ N.V. Name	DBA	Persons on Payroll
1	Gold Chest Enterprise N.V.	Mega Lotto	
2	Gold Pot N.V. (Managing company Prodigal Lottery Services N.V.)	Caribbean Lottery (Formerly St. Maarten Lotteries)	7
3	Jamaroma Lottery N.V. (Managing company Smart Play N.V.)	Robbie's Lottery	5
4	Kinfolk Lottery Company N.V.	Freddy Fernandez/ Kinfolk Lotto	5
5	Majula Gaming N.V.	?	?
6	My Lucky Day N.V.	Mega Lotto	?
7	Smartplay N.V.	Robbie's Lottery	?
	Total	**17**	

Table C9: Gambling tax in the Collectivity of Saint Martin.

Percentage	Implemented annual gambling tax per game
37.7%	horse racing
40.8%	Online poker
55.2%	Online sports betting
44.5%	Retail sports betting
54.5%	Lottery
42%	Lottery games; bingo, keno, raffles
Gaming clubs i.e., casino, VIP entrance fee, dress code	
10%	Of revenue up to €100,000
30%	Of revenue €100,000 – €1,500,000
40%	Of revenue €1,500,000 – €2,600,000
55%	Of revenue €2,600,000 – €5,500,000
70%	Of revenue above €5,500,000
Casinos pay 28% first + the following progressive tax on the remainder based on annual gross gaming revenue.	
6%	Up to €100,000
16%	€100,001 – €200,000
25%	€200,001 – €500,000
37%	€500,001 – €1,000,000
47%	€1,000,001 – €1,500,000
58%	€1,500,001 – €4,700,000
63.3%	€4,700,001 – €7,800,000
67.6%	€7,800,001 – €11,000,000
72%	€11,000,001 – €14,000,000
83.5%	€14,000,000
Information for this table was sources from: https://simonsblogpark.com/onlinegambling/simons-guide-to-gambling-in-the-collectivity-of-saint-martin/	

Appendix 4

1948 – Federal Ordinance

St. Maarten's Federal Ordinance of 1948 provided minimal regulatory guidelines for Casino Controllers (Coopers & Lybrand, 1996).

Article 1

Authorizes the Executive Council (EC) to grant gaming licenses; requires entry passes granted by the EC; prohibits minors and persons under the influence of alcohol from entering Casinos; denies entrance to Island residents for a period of 1 year if they visit Casinos more than 6 days in a month; requires the EC to determine instructions and job description of the Casino Controller.

Article 1a

Authorizes the EC to grant dog race, cockfight, and jai-alai licenses in specially designated areas; authorizes the EC to grant Keno, Bingo, Wheel of Fortune and other gaming licenses, subject to a prize limitation of F 500.

Article 2

Indicates that the business licenses mentioned in article 1 and (a) are personal and not transferable.

Article 3

Deem the possessor of the gaming license, who does not uphold the rules and regulation mentioned in articles 1 and 1 (a), to have acted without a license.

Article 4

Retains the EC's right to annul a gaming license at all times, if it is of the option that the rules and regulations are not being upheld.

Article 5

Is an Amendment in the Criminal Act

Article 6

Establishes the Ordinance effect date of November 3rd, 1948.

Appendix 5

Table D: Overview of Substance and Addictive Disorders

Depressants	Stimulants	Hallucinogens	Other
Alcohol-Related Disorders	**Stimulant-Related Disorders**	**Hallucinogen-Related Disorder**	**Non-substance Related Addictive Disorders**
Alcohol Use Disorder	Stimulant Use Disorder	Phencyclidine (PCP, Ketamine) Use disorder	Behavioral Addiction
Alcohol Intoxication	Stimulant Intoxication	Phencyclidine (PCP, Ketamine) Intoxication	Gambling Disorder
Alcohol Withdrawal	Stimulant Withdrawal	Other Hallucinogen (LSD, MDMA) Use Disorder	
Other Alcohol-Induced Disorders		Other Hallucinogen (LSD, MDMA) Intoxication	
	Caffeine-Related Disorders	Hallucinogen Persisting Perception Disorder (HPPD)	
Sedative-, Hypnotic-, or Anxiolytic Related Disorders	Caffeine Intoxication		
Sedative, Hypnotic, or Anxiolytic (Benzodiazepine) Use Disorder	Caffeine Withdrawal	**Cannabis-Related Disorders**	
Sedative, Hypnotic, or Anxiolytic (Benzodiazepine) Intoxication		Cannabis Use Disorders	
Sedative, Hypnotic, or Anxiolytic (Benzodiazepine) Withdrawal	**Tobacco (Nicotine) Related Disorders**	Cannabis Intoxication	
	Tobacco (Nicotine) Use Disorder	Cannabis Withdrawal	
Opioid-Related Disorders	Tobacco (Nicotine) Withdrawal		
Opioid Use Disorder (OUD)			
Opioid Intoxication			
Opioid Withdrawal			
Inhalant-Related Disorders			
Inhalant Use Disorder			
Inhalant Intoxication			

Information for this table was sourced from:

https://www.psychdb.com/addictions/home#:~:text=Substance%20Use%20Disorders%20and%20Addictive,%2C%20and%20other%20(or%20unknown)

- **Depressant:** use generally causes mood elevation, anxiety, sedation, behavioral disinhibition, and respiratory depression during intoxication. Withdrawal symptoms generally cause anxiety, tremor, seizures, insomnia.
- **Stimulant:** use generally causes mood elevation, decreased appetite or anorexia, psychomotor agitation, insomnia, cardiac arrhythmias, tachycardia, and anxiety. Withdrawal symptoms typically include a "post-use crash" that includes symptoms such as depression, fatigue/lethargy, increased appetite, insomnia, and vivid nightmares.
- **Hallucinogens:** are substances that can cause mind and body separation ("dissociative") effects and visual and/or auditory hallucinations. Of note, hallucinogens such as PCP and LSD do not cause withdrawal symptoms, and hence do not have a DSM-5 diagnosis for withdrawal. Other hallucinogens however, like MDMA has strong stimulant properties, and cannabis, can trigger withdrawal symptoms

Appendix 6

Table E: Overview of the complexity of mental, medical, physical, financial, and criminal burdens associated with gambling.

	At-risk gamblers	Gambling disorder (addiction)	Problem gambling
Psychiatric co-morbidities	Mood and anxiety disorder Alcohol use Nicotine dependance	Alcohol use Antisocial personality Attention deficit disorder Anxiety disorders Bipolar disorder Depressive disorders Nicotine use/ dependance Personality disorders Substance use Suicide, suicide ideation, suicide attempts Stress	Alcohol abuse and dependance Antisocial personality Attention deficit disorder Bipolar disorder Depressive disorders Mood and anxiety disorder Nicotine dependance Personality disorders Substance use Suicide, suicide ideation, suicide attempts Stress
Medical (co-) conditions	**Cirrhosis** (scarring of the liver) associated with alcohol and drug abuse. **Obesity**	**Angina** (chest pain cause by reduced blood flow to the heart muscles) Cardiac disease associated with cigarette smoking. **Cirrhosis** (scarring of the liver) associated with alcohol and drug abuse. Hypertension Migraines Peptic ulcer disease **Tachycardia** (hear rate over 100 bpm)	**Angina** (chest pain cause by reduced blood flow to the heart muscles) **Atherosclerosis** (the buildup of fats, cholesterol, and other substances in and on the artery walls) **Cirrhosis** (scarring of the liver) associated with alcohol and drug abuse. **Gastritis** (inflammation in the lining of the stomach) **Hypertension** **Myocardial infarction** (heart attack) **Nicotine dependance** **Stomach ulcer**
Physical symptoms	Fatigue Insomnia Poor self-care Headaches	Fatigue Colds Influenza Headaches Gastric pain Nausea Muscle tension	Fatigue Insomnia Headaches Digestive problems Muscle tension
Conditions brought about by the sedentary nature of gambling	Cardiovascular disease Diabetes Obesity Musculoskeletal disorders Poor mental health	Arthritis Obesity Poor circulation Back and neck pain Eye strain Carpal tunnel syndrome	Obesity Poor circulation Back and neck pain Eye strain Carpal tunnel syndrome
Financial troubles	Debt Bankruptcy Loss of assets Legal troubles; theft, fraud, embezzlement Unemployment	Debt Bankruptcy Unemployment Poverty Legal troubles; theft, fraud, embezzlement	Debt Bankruptcy Unemployment Poverty Legal troubles; theft, fraud, embezzlement
Criminal behavior	Theft Fraud Money laundering Prostitution Illegal gambling Domestic violence	Drug trafficking Homicide Prostitution Theft	Drug trafficking Homicide Prostitution Theft
Information for this table was sourced from: ▪ Cunningham-Williams et al. 1998; Gerstein et al. 1999; Welte et al. 2001; Petry et al. 2002; Petry et al. 2005; Morasco et al. 2006Shaffer et al. 2002 ▪ www.psychdb.com			

References

Abbott, M., Binde, P., Clark, L., Hodgins, D., Johnson, M., & Manitowabi, D. (2018) Conceptual Framework of Harmful Gambling: An International Collaboration. 3rd ed. Guelph, ON: Gambling Research Exchange Ontario (GREO).

Abbott, M., Volberg, R., Bellringer, M., & Reith, G. (2004). A review of research on aspects of problem gambling. London: *Responsibility in Gambling Trust*.

Alegría, A. A., Petry, N. M., Hasin, D. S., Liu, S. M., Grant, B. F. & Blanco, C. (2009). Disordered gambling among racial and ethnic groups in the US: Results from the National Epidemiologic Survey on Alcohol and Related Conditions. *CNS spectrums*, 14(3), 132-143.

Arnett, J. J. (2000). Emerging adulthood: A theory of development from the late teens through the twenties. *American Psychologist*, 55(5), 469-480.

American Gaming Association. (2021). State of the states 2021: The AGA survey of the commercial casino industry.

Babor, T., Caetano, R., Casswell, S., Edwards, G., Giesbrecht, N., Graham, K., Grube, J., Hill, L., Holder, H., Homel, R., Livingston, M., Osterberg, E., Rehm, J., Room, R., & Rossow, I. (2010). Alcohol: No ordinary commodity: Research and public policy (2nd Edition). *Oxford: Oxford University Press*.

Barnes, G.M., Welte, J.W., Hoffman, J.H., & Dintcheff, B.A. (2011). Gambling and other risk behaviors among college student-athletes. *Journal of Intercollegiate Sport*, 4(2), 143-161.

Baron, E., & Dickerson, M. (1999). Alcohol consumption and self-control of gambling behaviour. *Journal of Gambling Studies*, 15(1), 3-15.

Baxter, A., Salmon, C., Dufresne, K., Carasco-Lee, A., & Matheson, F. I. (2016). Gender differences in felt stigma and barriers to help-seeking for problem gambling. *Addictive behaviors reports*, 3, 1-8.

Calado F, Alexandre J, Griffiths MD. Prevalence of adolescent problem gambling: a systematic review of recent research. *J Gambl Stud.* (2017) 33: 397–424. doi: 10.1007/s10899-016-9627-5

Caler, K. R., Vargas Garcia, J. R., & Nower, L. (2017). Problem gambling among ethnic minorities: Results from an epidemiological study. *Asian journal of gambling issues and public health,* 7(1), 1-13.

Campbell, C.A., Derevensky, J.L., Meerkamper, E. & Cutajar, J. (2011). The Influence of Cultural Background on Parental Perceptions of Adolescent Gambling Behaviour: A Canadian Study. *International Journal of Mental Health and Addiction*. 1–14.

Casey, B. J., Jones, R. M., & Hare, T. A. (2008). The adolescent brain. Annals of the *New York Academy of Sciences*, 1124(1), 111-126.

Clotfelter CT, Cook PJ. On the economics of state lotteries. *Journal of Economic Perspectives*. 1990;4(4):105-19.

Cook, P.J., & Moore, M.J. (2002). The economics of alcohol abuse and alcohol-control policies. *Health Affairs,* 21(2), 120-133.

Cook, P.J. (2007). Paying the tab: The costs and benefits of alcohol control. *Princeton, NJ: Princeton University Press*.

Cotti C. The effect of casinos on local labor markets: A county level analysis. *Journal of Gambling Business and Economics.* 2008;2(2):17-41.

Cunningham-Williams, R.M., Cottler, L.B., Compton, W.M. & Spitznagel, E.L. (1998). Taking chances: problem gamblers and mental health disorders: results from the St. Louis Epidemiological Catchment Area (ECA) Study. *Am J Public Health*; 88:1093– 6.

Cronce, J.M. & Corbin, W.R. (2010). Effects of alcohol and initial gambling outcomes on within session gambling behavior. *Experimental and Clinical Psychopharmacology*, 18(2), 145- 157.

Day, B., Rosenthal, G., Adetunji, F., Monaghan, A., Scheele, C., & Tracy, J. K. (2020). Evaluating for Differences by Race/Ethnicity in the Association Between Income and Gambling Disorder. *Journal of Gambling Studies,* 36(4), 1093-1105.

Department of Statistics, STATS. Factsheet Population. (2018). 1 – 9.

Dougherty, E., Staples, L., McLean, L., Machart, T., Westmore, B., & Nielssen, O. (2021). A comparison of fraud to fund gambling with fraud for other reasons. *Psychiatry, Psychology and Law*, 28(3), 408-417.

Dowling, N. A., Merkouris, S. S., Greenwood, C. J., Oldenhof, E., Toumbourou, J. W., & Youssef, G. J. (2017). Early risk and protective factors for problem gambling: A systematic review and meta-analysis of longitudinal studies. *Clinical psychology review*, 51, 109-124.

Ellery, M., Stewart, S.H., & Loba, P. (2005). Alcohol's effects on video lottery terminal (VLT) play among probable pathological and non-pathological gamblers. *Journal of Gambling Studies*, 21(3), 299-324.

Finlay, K., Marmurek, H. H., Kanetkar, V., & Londerville, J. (2010). Casino décor effects on gambling emotions and intentions. *Environment and Behavior*, 42(4), 524-545.

Finlay, K., Kanetkar, V., Londerville, J., & Marmurek, H. H. (2006). The physical and psychological measurement of gambling environments. *Environment and Behavior*, 38(4), 570-581.

Friedman, B. (2000). Designing casinos to dominate the competition: The Friedman international standards of casino design. Institute for the Study of Gambling and Commercial Gaming.

Gainsbury, S., Hing, N., & Suhonen, N. (2014). Professional help-seeking for gambling problems: Awareness, barriers, and motivators for treatment. *Journal of Gambling Studies*, 30, 503-519.
Gerstein, D., Hoffmann. J., Larison, C., Engelman, L., Murphy, S., Palmer, A., Chuchro, L., Toce, M., Johnson R. & Buie, T., Hill, M. (1999). Gambling Impact and Behavior Study. *Chicago: University of Chicago Press*.

Gupta, R., & Derevensky, J. L. (1998). Adolescent gambling behavior: A prevalence study and examination of the correlates associated with problem gambling. *Journal of gambling studies*, 14(4), 319-345.

Grinols, E.L. (2004). Gambling in America: Costs and Benefits. Cambridge, UK: Cambridge University Press.

Gruenewald, P.J., Ponicki, W.R., & Holder, H.D. (1993). The relationship of outlet densities to alcohol consumption: A time series cross-sectional analysis. *Alcoholism: Clinical and Experimental Research*, 17(1), 38-50.

Hardoon, K. K., & Derevensky, J. L. (2002). Child and adolescent gambling behavior: Current knowledge. *Clinical Child Psychology and Psychiatry*, 7(2), 263-281.

Hirsch, A. R. (1995). Effects of ambient odors on slot-machine usage in a Las Vegas casino. *Psychology & Marketing*, 12(7), 585-594.

Hollén, L., Dörner, R., Griffiths, M. D. & Emond, A. (2020). Gambling in young adults aged 17–24 years: A population-based study. *Journal of gambling studies*, 36(3), 747-766.

HPS Consulting. (Sept. 2013). Gaming environment Sint Maarten Situation Analysis.

HPS Consulting. (Dec. 2013). Final report research phase & Comprehensive recommendation gaming control board Sint Maarten.

Ivanov, S. H., Webster, C., & Lewis, A. (2018). Segmenting the casino entertainment market: A study of travel constraints and cultural motives. *Journal of Destination Marketing & Management*, 9, 157-168.

Kyngdon, A., & Dickerson, M. (1999). An experimental study of the effect of prior alcohol consumption on a simulated gambling activity. *Addiction*, 94(5), 697-707.

LaPlante, D. A., Nelson, S. E., LaBrie, R. A., & Shaffer, H. J. (2011). Disordered gambling, type of gambling, and gambling involvement in the British Gambling Prevalence Survey 2007. *European Journal of Public Health*, 21(4), 532-537.

Lehrer, J. (2012). Royal flush: how Roger Thomas redesigned Vegas.

Lester, D. (1994). Access to gambling opportunities and compulsive gambling. *International Journal of the Addictions*, 29(12), 1611-1616.

Luczak, S. E., & Wall, T. L. (2016). Gambling problems and comorbidity with alcohol use disorders in Chinese-, Korean-, and White-American college students. *The American journal on addictions*, 25(3), 195-202.

Luna, B., Garver, K. E., Urban, T. A., Lazar, N. A., & Sweeney, J. A. (2004). Maturation of cognitive processes from late childhood to adulthood. *Child Development*, 75(5), 1357-1372

McDonnell-Phillips Pty Ltd. (2006). Analysis of gambler precommitment behaviour. Report to the National Gambling Research Program Working party on behalf of the Australian Ministerial Council on Gambling.

Brisbane: Gambling Research Australia. http://www.gamblingresearch.org.au/CA256902000FE154/Lookup/Precommit/$file/Report30March06.pdf.

Messerlian, C., Byrne, A. M. & Derevensky, J. L. (2004). Gambling, youth and the internet: should we be concerned? *The Canadian Child and Adolescent Psychiatry Review*, 13(1), 3.

Miller, W.R., Wilbourne, P.L., & Hettema, J.E. (2003). What works? A summary of alcohol treatment outcome research. In R. K. Hester & W. R. Miller (Eds.), *Handbook of alcoholism treatment approaches: Effective alternatives* (3rd ed., pp. 13-63). Boston, MA: Allyn & Bacon.

Miller, H. (2017). Hidden Harm: Low-risk and moderate-risk gambling. *Victorian Responsible Gambling Foundation*, 1- 20.

Morasco, B. J., Pietrzak, R. H., Blanco, C., Grant, B. F., Hasin, D. & Petry, N. M. (2006). Health problems and medical utilization associated with gambling disorders: results from the National Epidemiologic Survey on Alcohol and Related Conditions. *Psychosomatic medicine*, 68(6), 976-984.

National Gambling Impact Study Commission. (1999). Final report. Washington, DC: Author.

National Council of Problem Gambling, NCPG. (2000). Problem Gamblers and Their Finances. A guide for treatment professionals. *National Endowment for Financial Education*. 1- 53.

New Zealand Ministry of Health. (2008). Raising the odds? Gambling behavior and neighbourhood access to gambling venues in New Zealand. (Public Health Intelligence Occasional Bulletin No. 47). Wellington, New Zealand.

Nyemcsok, C., Thomas, S. L., Bestman, A., Pitt, H., Daube, M. & Cassidy, R. (2018). Young people's recall and perceptions of gambling advertising and intentions to gamble on sport. *Journal of Behavioral Addictions*, 7(4), 1068-1078.

Pearce, J., Mason, K., Hiscock, R., & Day, P. (2008). A national study of neighbourhood access to gambling opportunities and individual gambling behaviour. *Journal of Epidemiology and Community Health*, 62, 862-868.

Petry, N.M. & Oncken, C. (2002). Cigarette smoking is associated with increased severity of gambling problems in treatment-seeking gamblers. *Addiction*; 97:745–53.

Petry, N.M., Grant, B.F. & Stinson, F.S. (2005). Comorbidity of DSM-IV pathological gambling and psychiatric disorders: results from the National Epidemiologic Survey on Alcohol and Related Conditions. *J Clin Psychiatry*; 66:564 –74.

Phillips, J.G., Triggs, T.J., Coman, G.J., & Ogeil, R.P. (2005). Intoxication and decision aiding during computer blackjack: Preliminary analysis. *Gambling Research*, 17(2), 17-24.

Rahman, A. S., Pilver, C. E., Desai, R. A., Steinberg, M. A., Rugle, L., Krishnan-Sarin, S. & Potenza, M. N. (2012). The relationship between age of gambling onset and adolescent problematic gambling severity. *Journal of psychiatric research*, 46(5), 675-683.

Reilly, C., & Smith, N. (2013). The evolving definition of pathological gambling in the DSM-5. *National center for responsible gaming,* 1, 1-6.

Reilly, C. (2017). Gambling and Public Health. A guide for policymakers. *National Center For Responsible Gaming*.

Rodriguez-Monguio, R., Brand, E., & Volberg, R. (2018). The economic burden of pathological gambling and co-occurring mental health and substance use disorders. *Journal of Addiction Medicin*e, 12(1), 53-60.

Rush, B.R., Gliksman, L., & Brook, R. (1986). Alcohol availability, alcohol consumption and alcohol-related damage: The distribution of consumption model. *Journal of Studies on Alcohol*, 47(1), 1-10.

Shaffer, H. J., Hall, M. N. & Vander Bilt, J. (1999). Estimating the prevalence of disordered gambling behavior in the United States and Canada: a research synthesis. *American journal of public health*, 89(9), 1369-1376.

Shaffer, H. J., & Hall, M. N. (2002). The natural history of gambling and drinking problems among casino employees. *The Journal of Social Psychology*, 142(4), 405-424.

Shaffer, H.J., LaBrie, R.A., & LaPlante, D. (2004). Laying the foundation for quantifying regional exposure to social phenomena: Considering the case of legalized gambling as a public health toxin. *Psychology of Addictive Behaviors*, 18(1), 40-48.

Shaffer, H. J., & Martin, R. (2011). Disordered gambling: Etiology, trajectory, and clinical considerations. *Annual Review of Clinical Psychology*, 7(1), 483-510.

Shi, J., Colder Carras, M., Potenza, M. N., & Turner, N. E. (2021). A perspective on age restrictions and other harm reduction approaches targeting youth online gambling, considering convergences of gambling and videogaming. *Frontiers in Psychiatry*, 11, 601712.

Sjoberg, L. (1969). Alcohol and gambling. Psychopharmacology, 14 (4), 284-298

Stockwell, T.R., & Gruenewald, P. (2003). Controls on the physical availability of alcohol. In: Heather, N. and Stockwell, T.R. The Essential Handbook of Treatment and Prevention of Alcohol Problems. *West Sussex: John Wiley & Sons Ltd.* (pp. 213-234).

Suurvali, H., Hodgins, D., Toneatto, T., & Cunningham, J. (2008). Treatment seeking among Ontario problem gamblers: Results of a population survey. *Psychiatric Services*, 59 (11), 1343–1346.

Suurvali, H., Hodgins, D.C., Toneatto, T., & Cunningham, J.A. (2012). Hesitation to seek gambling-related treatment among Ontario problem gamblers. *Journal of Addiction Medicine*, 6 (1), 39.

Tobler, N.S., Roona, M.R., Ochshorn, P., Marshall, D.G., Streke, A.V., & Stackpole, K.M. (2000). School-based adolescent drug prevention programs: 1998 meta-analysis. *The Journal of Primary Prevention, 20*(4), 275-336.

Turner, N. E., Cook, S., Shi, J., Elton-Marshall, T., Hamilton, H., Ilie, G., ... & Mann, R. E. (2020). Traumatic brain injuries and problem gambling in youth: Evidence from a population-based study of secondary students in Ontario, Canada. *PLoS one*, 15(10), e0239661.

Turner, N. E., Zangeneh, M., & Littman-Sharp, N. (2006). The experience of gambling and its role in problem gambling. *International Gambling Studies*, 6(2), 237-266

UNICEF (2020). Situational Analysis on Children and Adolescents on Sint Maarten 2020. https://www.unicef.nl/files/Situation%20Analysis_St%20Maarten_2020_Full%20Report_EN.pdf

van Vuuren, D., van Buiren, K., Donker van Heel, P., Doeve, T., Mak, M., & Tackling, N. (2022) SEO Amsterdam Economics Social Security in Sint Maarten Report. Towards a strengthened system. *Commissioned by St. Maarten Ministry of Internal Affairs and Kingdom relations of the Netherlands* (1 - 87)

Volberg RA, Gupta R, Griffiths MD, Olason DT, Delfabbro P. An international perspective on youth gambling prevalence studies. *Int J Adolesc Med Health*. (2010) 22:3–38. doi: 10.1515/9783110255690.21

Welte, J. W., Wieczorek, W. F., Barnes, G. M., Tidwell, M. C., & Hoffman, J. H. (2004). The relationship of ecological and geographic factors to gambling behavior and pathology. *Journal of Gambling Studies*, 20(4), 405-423.

Welte, J., Barnes, G., Wieczorek, W., Tidwell, M.C. & Parker, J. (2001). Alcohol and gambling pathology among US adults: prevalence, demographic patterns, and comorbidity. *J Stud Alcohol*; 62:706 –12.

Welte, J.W., Barnes, G.M, Wieczorek, W.F., Tidwell, M-C, O., Hoffman, J.H. (2007). Type of gambling and availability as risk factors for problem gambling: A tobit regression analysis by age and gender. *International Gambling Studies*, 7 (2), 183-198.

Wijesingha, R., Leatherdale, S. T., Turner, N. E., & Elton-Marshall, T. (2017). Factors associated with adolescent online and land-based gambling in Canada. *Addiction Research & Theory*, 25(6), 525-532.

Winters, K. C., & Anderson, N. (2000). Gambling involvement and drug use among adolescents. *Journal of Gambling studies*, 16, 175-198.

Winters, K. C., Stinchfield, R. D., Botzet, A., & Anderson, N. (2002). A prospective study of youth gambling behaviors. *Psychology of addictive behaviors*, 16(1), 3.

Williams, R.J., Rehm, J., & Stevens, R. (2011). The Social and Economic Impacts of Gambling. Final Report for the Canadian Consortium for Gambling Research.

Williams, R. J., West, B. L., & Simpson, R. I. (2012). Prevention of Problem Gambling: A Comprehensive Review of the Evidence, and Identified Best Practices. *Ontario Problem Gambling Research Centre & Ontario Ministry of Health and Long-Term Care.*

Williams, R.J., Volberg, R.A., & Stevens, R. (2012). The Population Prevalence of Problem Gambling: Methodological Influences, Standardized, Rates, Jurisdictional Differences, and Worldwide Trends. *Report*

prepared for the Ontario Problem Gambling Research Centre and the Ontario Ministry of Health and Long-Term Care.

Wilkinson, Charles. Blood Struggle: The Rise of Modern Indian Nations. First ed. New York: W. W. Norton & Company, 2005. ISBN 0-393-05149-8.

Wood, R.T. & Griffiths, M.D., (2004). Adolescent lottery and scratch card players: do their attitudes influence their gambling behaviour? *J Adolesc*. 27:467–75.

Wynne, H. J., Smith, G. J., & Jacobs, D. F. (1996). Adolescent gambling and problem gambling in Alberta. *Alberta Alcohol and Drug Abuse Commission (AADAC)*.

Zapata, M.A., Torres de, G.Y. & Montoya, L.P. (2011). Risk of pathological gambling Associated factors and mental disorders in youth from Medellin - *Colombia. Adicciones*. 23:17–25.

* End of Document *