

Commentary: Joining of Māori and Feminist Perspectives on Gambling

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Phillida Bunkle has had a distinguished history in forging the development of a women's perspective in relation to health and gambling issues. Whilst a member of the Alliance Party in New Zealand and a member of Parliament in the 1990s, she introduced a Bill to restrict the explosion of gambling in New Zealand. In addition, she was also the patron of the Compulsive Gambling Society Incorporated. In her role as politician, she was very supportive of hearing of the damage that problems of gambling created in people's lives and how gambling harm could be addressed at different levels of policy making, health, social, economic and cultural interventions.

From a feminist and economist perspective she, with Lepper, has analysed gambling data and has identified that there has been significant changes for New Zealand women in the area of gambling. In 1990 problem gamblers were largely a male domain but by the end of the decade women had reached the same level of problems with gambling as men (Bunkle & Lepper, 2004).

Dr Laurie Morrison (2004; 2005) has also interviewed Māori women about their history of gambling in the Rotorua area and has found that gambling is an enjoyable social activity for many Māori women, whether on the marae through Housie or now in gambling venues. Her research has focussed on the impact and reasons why Māori women in her area enjoy playing the gambling machines, irrespective of the damage they create for themselves, their whanau and their communities.

Many Māori women along with their Pākehā counterparts are now seeking help with problems with gambling. In 2007 more women than men presented to a gambling treatment service, with just 80% identifying that their major mode of gambling and problem with gambling was with pokie machines (Ministry of Health, 2008).

Operators of gambling venues are now required to operate within harm minimisation regulations to promote and ensure responsible safe gambling and venue operators are required to identify actual and potential problem gambling and to encourage them to seek help or for them to be banned from premises. In the development of the Gambling Act (2003) no feminist perspective was actively visible or involved in the development of policy, harm minimisation regulations and health interventions. Those who have advocated as women have generally been dismissed or their views marginalised along with Māori, Pacific and Asian interests.

It is within this context that I have reviewed the paper submitted by Phillida Bunkle 'Women and Gambling: What can be learned from the New Zealand experience? A Women's Studies Approach' (this issue). This article was interesting to read. Bunkle has presented the paper at the National Lotteries Commission Women and Gambling Conference in London (June, 2008). The questions asked by the author and their discussion are important and link to Māori kaupapa research in which we, as Māori in the gambling area, are questioning the value and interpretation of gambling research and how such information is used by the Crown in particular

government agencies such as the Ministry of Health, Department of Corrections and Department of Internal Affairs involved in developing policies to reduce gambling related harm.

I have written a number of articles related to the Treaty of Waitangi and gambling and the harm gambling creates for Māori, women, children and young people, communities, the misuse of advertising of gambling, the exploitation of vulnerable populations, and overall national and indigenous politics associated with gambling (Dyall, 2002, 2004, 2006; Dyall & Hand, 2003; Dyall & Manaia, 2005; Dyall, Tse & Kingi, 2007).

The situation between Britain and New Zealand has distinct parallels. When new settlers came to New Zealand they brought gambling to Aotearoa, for it was part of the English culture at all levels of society. Chinese people also brought gambling to our shores. An historical account of the development of gambling in New Zealand has been written (Grant, 1994). In this account, the impact of gambling on Māori and women is limited. Historical analyses however, show that gambling, along with alcohol consumption was and is very much part of the culture of New Zealand, especially historically for men. Furthermore, Māori are one of a unique group of indigenous peoples of the world that prior to settler contact did not have a culture that drank alcohol, smoked tobacco or was involved in gaming (Dyall & Morrison, 2002). All of these three activities are destructive to health and wellbeing and are now part of the destruction of the wellbeing of tangata whenua (Durie, 2001).

The question why women are taking to the pokie machines is an extremely important question to ask in relation to today's society. It is perhaps one of the downsides of the effects of feminism, in that the work and contribution women have traditionally made to their families, communities and organisations have been devalued. Perhaps we, like many men, are also lost and look to gambling as a form of diversion and sense of hope when we have completed specific roles in life.

The impact of gambling on women is a serious matter in New Zealand and if you look at the pattern of Māori women and smoking there is a similar pattern to Māori women and gambling. Māori women used to have the highest prevalence of smoking in the world and this was reflected in our lung cancer rates (Robinson & Harris, 2007). We now see the effects of the increasing use of pokie machines by Māori women; rising crime committed by wahine Māori, even from older women who are grandmothers and now the rapid growth of Māori women and imprisonment (Abbott & McKenna, 2000).

The paper asks, "what questions should we be asking for gambling research and are they the questions we should be asking"? I too have been considering this question while recognising that that addictions are often related to pohara wairuatanga, that is, spiritual poverty. Addictions, from my analyses of interviews with problem gamblers relate to personal trauma, boredom or looking for excitement. From my research related to gambling as an emerging public health issue for Māori, I have found that we all have the potential to develop addictions if we feel we live unhappy lives.

To improve the quality of life for Māori generally and for Māori women in particular, in the area of gambling and addictions I would offer the following questions for gambling related research. They are:

- How do we address addictions for Māori from a spiritual poverty perspective?
- How do we help Māori maintain their values and sense of cultural identity as a preventative strategy to reduce tangata whenua risk of addictions?
- What interventions do we need to put in place across the continuum to prevent, treat and rehabilitate people from addictions?
- How effective is a mental health perspective in treating and rehabilitating people who

suffer from one or more addictions?

- What does a public health perspective offer to Māori to prevent the risk and harm those addictions create for Māori individually and collectively?
- What are the gender needs of Māori women and men in relation to addictions?
- What are the needs of middle age and older Māori in relation to addictions?
- What are the needs of Māori youth in relation to addictions?
- What are the full social, economic, cultural and spiritual costs of addictions for Māori?

In conclusion, Bunkle's interest in gambling and its effects on people and in particular, women, through her career in health issues and politics in New Zealand is to be commended. There is a need for more women along with Māori demanding that their perspective on the world is included in the development of legislation, policies and strategies to eliminate gambling related harm. If women worked along Māori we may be able to reduce significantly gambling related harm in our whanau, communities and nation generally.

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