

The Roles of Technology and Lived Experience in Player Health

The Partnership Think Tank Professional Development Workshop

April 13, 2026



Welcome & *introductions*



Today's *workshop*



The purpose of this workshop is to:

- Explore how **technology & AI** and **lived experience** are, and could, be integrated into player health.
- Create space for shared learning, reflection, and application.

Important context:

- These are emerging and fast-moving topics with limited independent evaluation.
- Many examples are based on publicly available information and reported claims rather than verified outcomes.
- Inclusion is for us to take stock of what is known and does not imply endorsement or effectiveness.
- The purpose of today's workshop is to surface what is happening and where critical questions remain.

Today's *agenda*

Morning:

- 9:00AM • Welcome & Introductions
- 9:45AM • Technology & AI in Player Health –
Current Uses
- 10:40AM • Break
- 11:05AM • Technology & AI in Player Health –
Identifying Opportunities & Risks
- 12:00PM • Lunch

Afternoon:

- 1:00PM • Lived Experience in Player Health –
Current Practice & Shared Principals
- 2:15PM • Break
- 2:35PM • Applying Insights
- 3:50PM • Closing

Roundtable *introductions*

Please share:

- Your name and role
- *What's your current relationship with AI? Are you using it, exploring it, feeling skeptical of it? How does that show up in your work or daily life?*



What we asked:

Survey questions

Survey Questions:

1. What examples have you seen or heard about where technology & AI is being used to support player health? What seems promising, and what concerns you?
2. How is lived experience reflected in your work, decisions, or programs, or in approaches you've seen elsewhere that interest you?
3. Looking ahead to the workshop, what would make the day *most useful* for you?

What we heard:

Response themes

You want to leave the workshop with:

- Practical, evidence-based examples related to technology and AI.
 - Guidance for regulation and decision-making related to technology and AI.
 - Examples of early, proactive technology and AI interventions grounded in lived experience.
 - Others' perspectives on ethical, human-centred use of AI.
 - Cross-sector, cross-jurisdiction learning and actionable takeaways.
- **Discussions about technology and AI are prioritized with the integration of lived and living experience as being a driver in design.**

Points of engagement *for player health*

Exposure & environments

How people are exposed to, influenced by, and understand gambling, through advertising, media, the digital ecosystem, and messaging.

Player engagement

How people are provided tools, behaviorally nudged, and provided supports when they are participating in gambling.

Support, treatment & recovery services

How people experiencing harm are connected to supports and longer-term pathways for recovery.



How we'll *work*



By the end of this workshop, we will:

1. Understand the evolving role of technology in supporting players, including key opportunities, limitations, and ethical considerations.
2. Examine approaches to meaningfully integrate lived experience into program design and decision-making.
3. Apply these concepts through interactive activities, identifying practical considerations for our own contexts.
4. Identify opportunities to strengthen how technology and lived experience are integrated in our work.
5. Engage with one another's perspectives to surface shared challenges, insights, and emerging practices.

Technology & AI *in player health*



What we heard:

Response themes

What you've seen, think is promising, and feel is concerning:

- Real-time behavioural monitoring and interventions.
 - AI-powered chatbots and virtual support tools.
 - Predictive analytics for early risk detection.
 - Personalization to support safer play.
 - Risk of misuse for revenue maximization.
 - Accuracy, bias, and over-intervention risks.
 - Privacy, trust, and governance challenges.
- **AI, and new tech in general, has real potential to meaningfully improve player health—but only if it is governed and aligned around protection first, not profit.**

Evidence and applications *of technology & AI in player health*

We will review the evidence on:

- *How technology and AI are currently being used.*
- *Where activity is emerging or accelerating.*
- *What appears promising, including limitations and ethical considerations.*



Current uses *of technology & AI in player health*



Gambling operators are using AI across three core functions:^{1,2}

- **Optimize operations** - Drafting policy, generating code/assets, data analysis, workforce forecasting.
- **Drive & manage player engagement** - Identifying high-value players, tailoring communications using player data, game recommendations, chatbots, behavioural nudging.
- **Manage risk** - Age verification, transaction monitoring, fraud and risk detection.

Current uses *of technology & AI in player health*



AI is used to monitor behaviour and inform risk detection:^{1,3}

- **Provide real-time feedback** - Nudging protective behaviours based on behavioural algorithms and player activity.
- **Identify risk patterns** - Detecting changes in behaviour that may indicate escalating risk.
- **Use behavioural indicators such as:**
 - Wagering behaviour (e.g., bet size, frequency).
 - Engagement patterns (e.g., interaction with games).
 - Profile information (e.g., demographic or account factors).
 - Account activity (e.g., transactions, use of RG tools like deposit limits or time-outs).

AI applications *for gambling operators*

APPLICATION	HOW IT IS USED IN PRACTICE	EXAMPLES
Player risk detection and behavioural monitoring	AI models analyze player behaviour in real time to identify patterns associated with increasing risk and trigger interventions such as nudges, limits, or account reviews	• Mindway AI – GameScanner (behavioural tracking and risk scoring) • Featurespace – ARIC Risk Hub (anomaly detection for risk and fraud) • Neccton – mentor (real-time player monitoring and alerts)
Personalization and recommendation systems	Algorithms tailor game recommendations, offers, and content based on player behaviour, preferences, and value to increase engagement and retention	• SG Digital / OpenBet – recommendation engines • Playtech – IMS personalization tools • Optimove – AI-driven CRM and segmentation
Customer interaction and support (AI chatbots)	AI-powered chatbots handle customer service inquiries and, in some cases, provide responsible gambling information or direct users to support resources	• Intercom / Zendesk AI (used by operators for support automation) • LivePerson – conversational AI for player interaction • Operator-specific RG chat interfaces (varies by platform)
Marketing optimization and targeting	AI is used to segment players, predict lifetime value, and optimize timing, channel, and content of marketing campaigns to maximize conversion and spend	• Optimove – predictive marketing orchestration • Fast Track – player engagement platform with AI segmentation • Salesforce Einstein – AI-driven campaign optimization
Fraud detection and compliance (including AML)	Machine learning models detect suspicious transactions, bonus abuse, identity fraud, and support regulatory compliance requirements such as AML monitoring	• Featurespace – fraud and AML detection • SEON – fraud prevention and identity verification • GBG – identity and verification tools
Automated content generation and operations	Generative AI is used internally to support drafting communications, generating code, producing marketing assets, and improving operational efficiency	• Microsoft Copilot (internal operator use) • OpenAI / GPT-based tools (internal workflows) • Jasper – AI content generation for marketing teams

Examples reflect publicly available information; inclusion does not imply endorsement or verified effectiveness.

Emerging or accelerating activity *of technology & AI in player health*



AI is emerging in areas that extend beyond platform-based data:

- **Use of financial data to predict risk¹**
 - Lack of an accepted definition of financial risk in gambling.
 - Practical barriers to implementation (e.g., consent, data sharing across platforms).
- **Conversational chatbots for player support^{4,5}**
 - Chatbots engage users and generate context-driven responses.
 - Some early evidence of chatbot use suggests high engagement and potential for improved outcomes (reduced gambling frequency and problematic gambling behaviour); adding humans did not achieve better outcomes than chatbots alone

Emerging or accelerating activity *of technology & AI in player health*



Digital innovation is also emerging in support, treatment, and recovery:

- **Growth in digital health tools for gambling support⁶**
 - Apps and online platforms designed to support behaviour change, self-monitoring, and recovery.
- **Lived experience-informed design^{7,8}**
 - Some tools are developed by or in collaboration with people with lived experience of gambling harm.
- **Ecosystem remains fragmented**
 - Many tools operate independently of gambling platforms and formal care systems.

AI applications *by broader system*

ACTOR	APPLICATION	HOW IT IS USED IN PRACTICE	EXAMPLES
Government	AI Legislation	Establishes legal frameworks governing the development and use of AI systems, including requirements for risk management, transparency, and accountability across sectors	• Canada: Artificial Intelligence and Data Act (AIDA, part of Bill C-27) ◦ Passed Second Reading; under committee review (not yet in force) • European Union: Artificial Intelligence Act ◦ Risk-based regulatory framework for AI systems, including obligations for high-risk uses
Regulators (gambling, financial, technology)	AI Regulatory oversight	No AI-specific regulatory standards currently exist for gambling operators; AI use is governed indirectly through broader requirements, while regulators are also addressing emerging digital products such as prediction markets	• Canadian Investment Regulatory Organization – oversight of investment platforms; has recently approved offering event-based contracts in Canada • Wealthsimple and Interactive Brokers – platforms currently approved to offer prediction-style contracts (not currently AI-driven products)
Prevention and early intervention	AI-enabled population risk modelling and segmentation	Applies machine learning to identify at-risk populations and inform targeted prevention strategies and messaging	• Focal Research – machine learning models for population segmentation and behavioural insight
Treatment	AI-supported screening and digital therapeutic tools	Uses AI to support cognitive assessment, triage, and guided behavioural interventions, typically alongside human care	• Mindway AI GameChanger • Wysa • Woebot Health

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Promising practices

limitations and ethical considerations



AI shows *potential to strengthen risk detection* through:¹

- **Enabling real-time responsiveness**
 - Could support integrated, fluid detection in digital environments and more immediate response.
- **Improving precision of risk identification**
 - Evidence-based algorithms may detect patterns that are difficult to identify manually.
- **Integrating data across sources**
 - Could combine multiple data streams in real time to build a more complete risk profile.

Promising practices

limitations and ethical considerations



AI-based gambling *risk detection is limited* because currently:

- **Does not reliably support early harm prevention⁹**
 - Many models identify issues after harm has emerged, with limited ability to detect lower-risk trajectories.
- **Captures only partial player behaviour¹**
 - Often tied to a single platform and does not reflect player activity across operators and platforms (incomplete risk profiles / cannot coordinate intervention).¹
- **Lacks standardized evaluation and transparency⁸**
 - No common benchmarks to assess performance and outcomes.
 - Limited access to code and training data constrains validation and comparison.

Promising practices

limitations and ethical considerations



System-level *limitations* for AI in gambling:

- **Regulation has not kept pace with AI**^{11,12}
 - Existing privacy and consumer protection frameworks are not designed for AI-driven data use.
- **Lack of clear guidance and standards**^{11,12}
 - Limited consensus on ethical use and implementation in gambling contexts.
 - Need for practical, evidence-informed guidance to support responsible deployment.

Promising practices

limitations and ethical considerations



Ethical risks in the use of AI in gambling:

- **Risk of inaccurate or misleading outputs**
 - Indicators used to predict harm may rely on imperfect proxies and miss nuance.^{9,2,12}
 - Foundation models can generate false or misleading information due to training limitations.¹
- **Risk of unintended harm**
 - Outputs may be inappropriate for sensitive contexts or exceed intended use cases.^{1,13,14}
 - Potential to provide guidance or responses that are not aligned with player protection goals.^{13,14}

Promising practices

limitations and ethical considerations



Ethical risks in the use of AI in gambling:

- **Risk of exploitation of people who gamble**
 - AI may be used to optimize addictive game design and targeted marketing.^{11,12}
 - Even harm reduction tools may steer individuals toward industry-defined pathways.¹¹
- **Risk of bias and inequity**
 - Algorithms may reflect and reinforce existing social biases, particularly affecting marginalized groups.^{3,12}
 - Biases may not be transparent or well understood by those interpreting outputs.^{11,12}

Promising practices

limitations and ethical considerations



The AI paradox in gambling:

- **Same tools can drive harm and enable prevention**
 - Techniques used to optimize engagement and advertising can also be applied to detect, reduce, or counter harmful influences.^{3,11}
- **Requires intentional governance and coordination**
 - Balancing risks and benefits depends on shared understanding, collaboration, education, capacity building, and regulatory oversight as AI use evolves.^{3,11}

Promising practices

limitations and ethical considerations



Some recommendations from the evidence:

- **Enable data sharing and standardization** - Shared metrics to support evaluation of AI tools and outcomes.^{1,9}
- **Increase transparency of AI use** - Clear communication of how AI is applied in practice and decision-making.¹
- **Embed human oversight in AI systems** - Human-in-the-loop approaches to support judgment and accountability.¹³
- **Prioritize evidence-based risk indicators** - Focus on validated behavioural markers over proxy or untested measures.¹
- **Strengthen governance and coordination** - Dedicated roles or task forces to support policy, guidance, and cross-sector collaboration.¹

Promising practices

limitations and ethical considerations



An AI-informed public health approach includes:³

- **Primary prevention - addressing population-level risk**
 - Analyzing marketing practices and public sentiment to inform prevention and health promotion.
- **Secondary prevention - identifying emerging risk early**
 - Detecting behavioural patterns and modelling risk at individual and community levels.
- **Tertiary prevention - supporting intervention and care**
 - Enabling in-platform interventions and facilitating referral to support services.

Points of engagement *for player health*

Exposure & Environment – Less developed for prevention

- Strong use of AI in targeting, personalization, and marketing optimization.
- Limited but emerging use for monitoring and reducing harmful exposure.
- Limited regulatory controls on AI-driven targeting and personalization, with existing frameworks not keeping pace with how exposure is shaped in digital environments.

👉 Evidence Insight:

AI is actively shaping exposure, with prevention-focused uses still limited and emerging—in a context where regulatory frameworks have not kept pace with AI-enabled targeting.



Points of engagement *for player health*

Player Engagement - Most developed and commercially driven

AI is deeply embedded during play:

- Personalization and recommendations.
- Behavioural tracking and profiling.
- Real-time nudges and interventions.
- Identification of high-value or at-risk players.

👉 Evidence Insight:

This is where AI is widely deployed—used to drive engagement and shape player behaviour in real time.



Points of engagement *for player health*

Support, Treatment & Recovery – Underdeveloped overall

- Limited use of Technology & AI for ongoing support and recovery.
- Focus remains on identification rather than sustained support.
- Emerging digital health apps often exist outside gambling systems.

👉 Evidence Insight:

AI and digital innovation for treatment and recovery remain underdeveloped within gambling systems, with emerging support often developing outside of formal systems.



Technology & AI *for player health*



Key Insight:

Technology & AI is highly developed where it **supports engagement and revenue**, less developed where it **identifies risk**, and underdeveloped where it **supports treatment and recovery**.

Activity:

Mapping the landscape of technology & AI

We are going to build a shared picture of what is happening across the system.

Around the room are three flip charts labeled:

**Exposure &
Environment**

Player Engagement

**Support, Treatment
& Recovery**

Together, we will map what is happening, then consider what is promising, key concerns, and what is missing.

Activity:

Identifying current uses

Take a moment to think about:

- What stood out from the evidence
- What specific examples come to mind (e.g., policies, practices, tools, or resources)

Each participant will write down 2–3 examples, or more, on a sticky note. Please put one idea per note.

When you are ready, place notes on the flip chart that best represents where this is happening.



Break



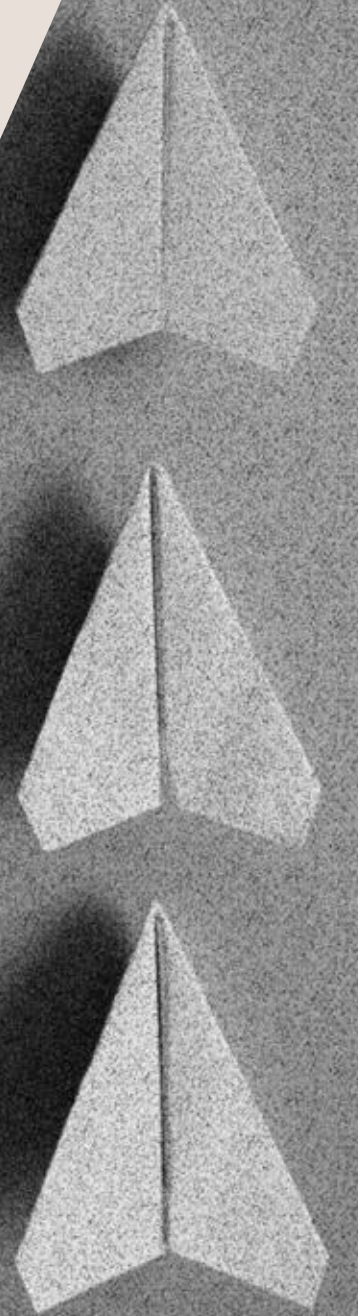
Group discussion

Identifying opportunities & risks

- What stands out across what has been mapped?
- Where is activity concentrated?
- Where is there less activity?
- What looks promising?
- What concerns or risks are emerging?
- Where are there gaps or areas that feel underdeveloped?



Closing *technology & AI* *in player health*



Lunch



Lived experience *in player health*



What we heard: *survey themes*

Perspectives on lived experience and its role

- Use of non-shaming, person-centred approaches.
 - Reliance on external experts and partners.
 - User-centred design and program redesign.
 - Informal and indirect integration.
 - Recognition of gaps and inconsistency.
 - Promising approaches seen elsewhere.
- **Widely valued, applied inconsistently and often indirectly—there is opportunity to move from *listening* about lived experience to *designing with* people who have it.**

Evidence and applications *of lived experience in player health*

We will review the evidence on:

- *What is meant by integrating lived experience, why it's important, and how it shows up.*
- *Different ways it is engaged.*
- *Variation in depth and influence.*
- *Key principals and considerations.*
- *Common challenges and risks.*
- *Promising examples.*



Lived experience

what we mean



Lived experience is understood as:

- **Experiential knowledge** – shaped by direct and indirect experience of gambling and related supports.¹⁵
- **Grounded in good practice** – ensures approaches are relevant and practical, and grounded in real-world experience.^{15,16}
- **A principle of inclusion** – “Nothing about us without us” emphasizes the need to engage people in decisions about products they are impacted by.¹⁷

Lived experience

why it's important



Inclusion of lived experience experts can:

- **Humanize statistics** – making harms more relatable.¹⁵
- **Support critical literacy** – through counter-industry narratives.¹⁵
- **Creates meaningful and respectful engagement** – when designed well, participation is valuable for those involved.¹⁸
- **Bring diverse and underrepresented perspectives** – elevating voices often excluded.^{16,17,18}
- **Provide important insight** – into real-world harms and needs.^{16,18}

Lived experience

how it shows up



Lived experience shows up in practice through:¹⁵

- **Who is engaged**
 - People with direct experience of gambling harms.
 - People affected by others' gambling (family, community).
- **How people enter and participate**
 - Personal networks and community connections.
 - Advocacy and recovery communities.
 - Formal recruitment and advisory roles.

Lived experience *ways of engaging*



Lived experience experts can be engaged through:^{15,17,19,20}

- **Research and evidence generation** - Interviews, focus groups, participatory research.
- **Deliberation and co-learning** - Workshops, forums, co-design sessions.
- **Advisory and governance roles** - Advisory groups, panels, boards.
- **Public engagement and influence** - Advocacy, storytelling, speaker roles.
- **Direct support roles** - Peer support, mentoring, community-based services.

Lived experience *engaging on a continuum*



Lived experience experts may be involved:^{17,20,21}

- **Across multiple stages of an initiative** – from conception to evaluation, including shaping priorities, design, implementation, and use of findings.
- **Across multiple levels of work** – from individual care to program design, policy, and strategy.
- **Along a continuum of engagement** – reflecting the degree of power to shape project outputs.
- **Using established frameworks** – such as the IAP2 spectrum to guide levels of participation and influence — *inform, consult, involve, collaborate, empower*.

Lived experience engagement *variation in depth and influence*



Engagement is shaped by the purpose of the initiative, as well as time and resource constraints.

The focus of initiatives include:¹⁹

- **Power-focused initiatives** – addressing power imbalances between researchers and LE experts.
- **Priority-setting initiatives** – ranking research priorities.
- **Study-focused initiatives** – promoting participation and retention in research.
- **Report-focused initiatives** – guiding how LE engagement is described in publications.
- **Partnership-focused initiatives** – emphasizing governance and accountability.

Lived experience

common challenges and risks



Common risks and challenges in engagement include:

- **Inclusion may not be meaningful or accessible**^{15,17,22}
 - Tokenism is common, and opportunities for input may be designed for other interest holders and not accessible to non-specialists.
- **Participation is complicated by industry funding**¹⁵
 - In industry-funded initiatives, conflicts of interest may shape what can be explored and prioritized, which may not align with the views of lived experience experts.
- **Power imbalances may limit influence**¹⁵
 - Lived experience experts may be included but not meaningfully involved in decision-making, particularly where governance structures remain unchanged.

Lived experience

common challenges and risks



Common risks and challenges in engagement include:

- **Representation may be uneven**^{16,20}
 - Those who participate may not reflect the full diversity of experiences, particularly across gender, culture, socioeconomic status, or severity of harm.
- **Expectations of lived experience experts may be unclear**^{16,20}
 - Roles, responsibilities, and boundaries are not always well defined, which can lead to over-reliance or inappropriate expectations.
- **Risk of stigma and exposure**^{15,17}
 - Participation may involve disclosing personal experiences that can lead to stigma, judgment, or unintended professional and social consequences.

Lived experience engagement

key principles



Principles for meaningful lived experience engagement:

- **Recognition of lived experience as expertise** - Ensure meaningful involvement and reflect diversity of experience.
- **Inclusive, equitable, and respectful engagement** - Use person-first language, reduce barriers, create safe environments.
- **Ethical, trauma-informed practice** - Prioritize safety, consent, confidentiality, and duty of care.
- **Meaningful participation, co-production, and leadership** - Engage at appropriate levels, including design and decision-making.
- **Thoughtful implementation and support** - Provide resources, clarity of roles, and remove barriers.
- **Learning and evaluation** - Assess engagement, share learning, and build sustainable approaches.

Lived experience engagement *capabilities required*



Enabling meaningful engagement requires:

- **Trauma-informed and ethical facilitation** - Ability to recognize and mitigate emotional risk; ensure psychological safety and consent.
- **Equitable and inclusive engagement design** - Skills to design accessible processes, reduce barriers, and support diverse participation.
- **Power-sharing and governance awareness** - Understanding how decisions are made and how to meaningfully shift influence.
- **Compensation and support structures** - Ability to design fair compensation and clear roles.
- **Relationship-building and trust** - Skills to engage communities respectfully and sustain participation over time.
- **Clarity on purpose and influence** - Ability to align engagement approach with realistic levels of decision-making impact.
- **Organizational readiness and capacity** - Internal alignment, resources, and infrastructure to support engagement.

Lived experience engagement

promising examples

ENTITY	TYPE	KEY INITIATIVES	INTERVIEWS & FOCUS GROUPS	WORKSHOPS & FORUMS	ADVOCACY	ADVISORY GROUPS & PANELS	PEER SUPPORT
Gambling Commission (UKGC)	Regulator	- Public consultations - Evidence Maps - Lived Experience Advisory Panel (LEAP)	✓			✓	
Academic Forum for the Study of Gambling (AFSG)	Charity*	Lived Experience Research Hub	✓	✓		✓	
Network to Reduce Gambling Harms	Funded programme delivered by Greo	- Priority setting process - Governance representation - Peer review for Community Impact Programme (commissioning)	✓			✓	
Betknowmore UK	Charity	- Lived Experience Advisory Board - Advocacy & speaker work - Peer support programmes			✓	✓	✓
Gambling with Lives	Charity	- Advocacy and campaigning - Bereaved families network - Policy engagement - Participate in research	✓		✓	✓	

*Began as a funded programme delivered by Greo

Examples reflect publicly available information; inclusion does not imply endorsement or verified effectiveness.

Lived experience engagement *promising examples*

ENTITY	TYPE	KEY INITIATIVES	INTERVIEWS & FOCUS GROUPS	WORKSHOPS & FORUMS	ADVOCACY	ADVISORY GROUPS & PANELS	PEER SUPPORT
Greo Evidence Insights	NFP	- Community Impact Program – commissioning community-led projects - Project work (program design, community engagement, messaging) - Evidence briefs and jurisdictional scans	✓	✓		✓	
Responsible Gambling Council	Charity	Prevention and education initiatives (participant-informed program and campaign development)	✓	✓	✓	✓	
Gambling Crown Corporations	Crown operator	- Education campaigns and RG advertising (informed by player and community input) - Player research (interviews, usability testing, panels) - Frontline staff insights (player interactions and observed harm)	✓			✓	
Centre for Addiction and Mental Health (CAMH)	Health Research & Service	Problem gambling research and treatment studies incorporating patient and lived experience input	✓	✓	✓	✓	✓
Universities (e.g., Calgary, Lethbridge)	Academic	Gambling harm and stigma research incorporating lived experience perspectives	✓		✓	✓	

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Lived experience-led *innovation and products*

Lived experience is driving the development of tools, products, and supports:

- **Blocking and control tools**
 - GamBan
 - BetBlocker
- **Experiential / simulation tools**
 - Game of Streaks
- **Recovery and peer-led support platforms**
 - Evive (digital recovery platform)
 - GRIN (Massachusetts) (peer-led network)
 - GamTalk (peer-led community)
 - Reddit (r/problemgambling) (informal peer community)
 - QuitGamble (recovery app and community platform)

Examples reflect publicly available information; inclusion does not imply endorsement or verified effectiveness.



Lived experience *stigma and public understanding*

Lived experience can play a critical role in reducing stigma and shaping public understanding of gambling harms, through:

- **Public education and awareness efforts** - Designing and informing campaigns that reflect real experiences and reduce misconceptions.
- **Storytelling and narrative change** - Sharing lived experience to humanize harm and challenge stigma.
- **Co-designed messaging and communication** - Ensuring language, framing, and tone resonate with affected communities.
- **Advocacy and media engagement** - Influencing how gambling harms are discussed in public and policy spaces.
- **Improving help-seeking pathways** - Reducing stigma-related barriers to accessing support and services.



Lived experience *in player health*



Key Insight:

Lived experience is often **consulted** (community, research), less consistently **embedded in systems** (government, regulators, service systems), and rarely empowered to **shape decisions, products, or outcomes**.

Lived experience *in player health*



Key Insight:

Peer-led support is growing within community and charitable settings, while **innovation led by people with lived experience** often emerges outside of formal systems and institutions (i.e., they are filling system gaps).

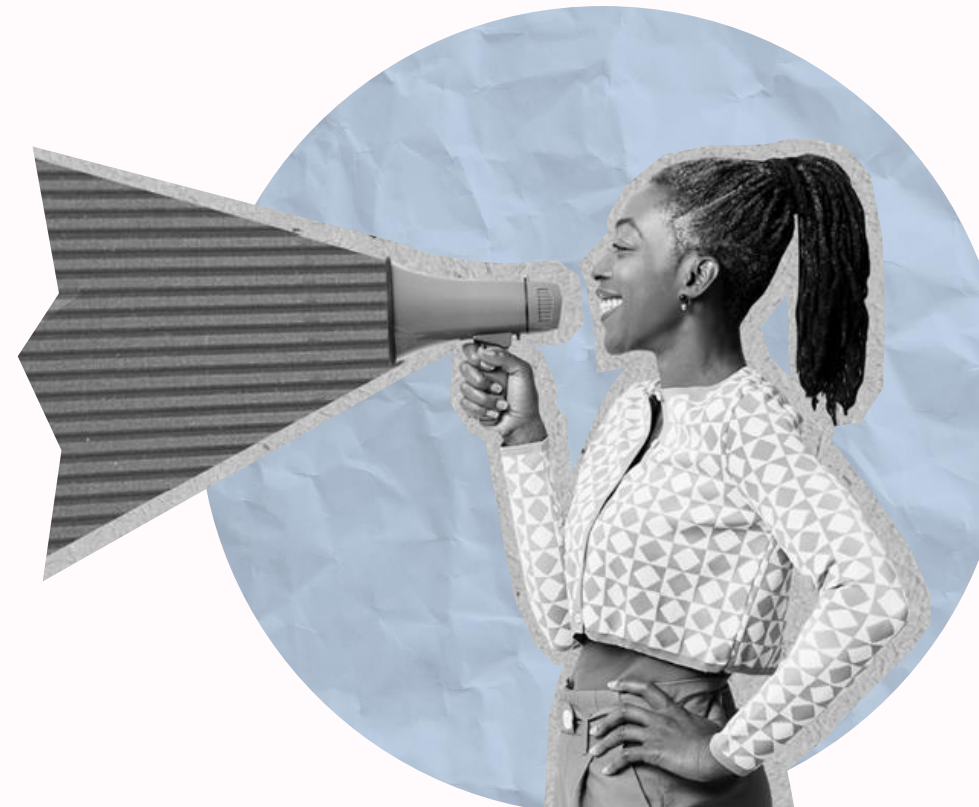
Activity

Exploring lived experience

In pairs or in groups, discuss:

- *How lived experience is currently happening in your work or context.*
- *Where it feels meaningful or impactful.*
- *Where it feels limited, unclear, or problematic.*
- *What creates challenges, risks, or unintended consequences.*

Identify 2–3 key observations. Be prepared to share with the large group.



Group discussion

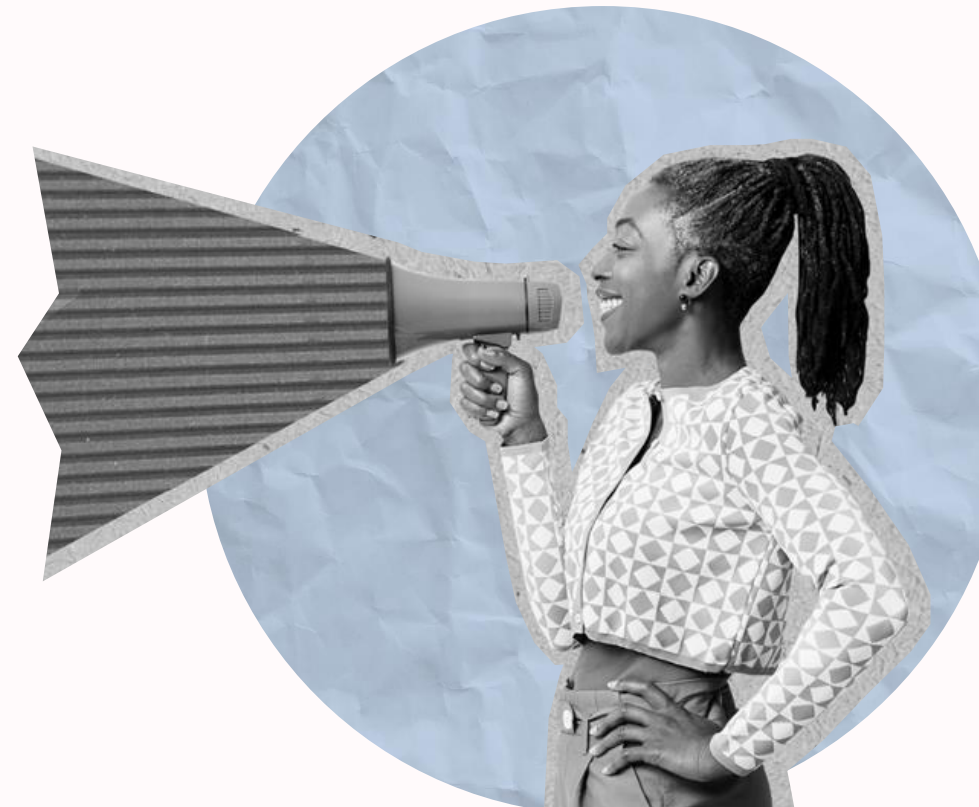
Identifying shared principles

What are we seeing across contexts?

What distinguishes meaningful integration from more superficial approaches?

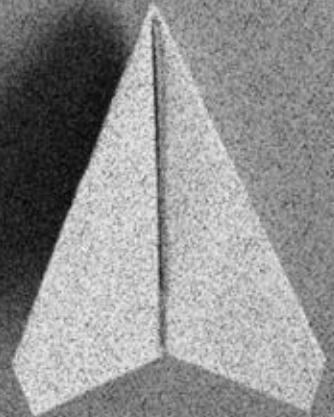
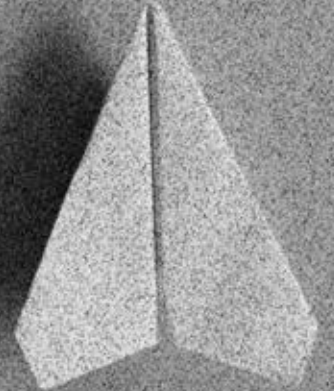
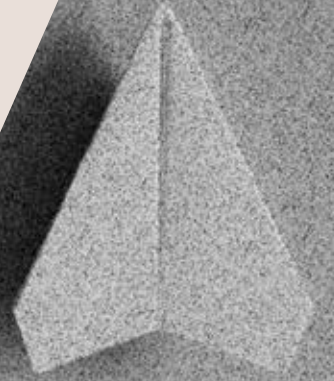
What tensions or risks are showing up?

What feels missing?



Closing

*Lived experience
in player health*



Break



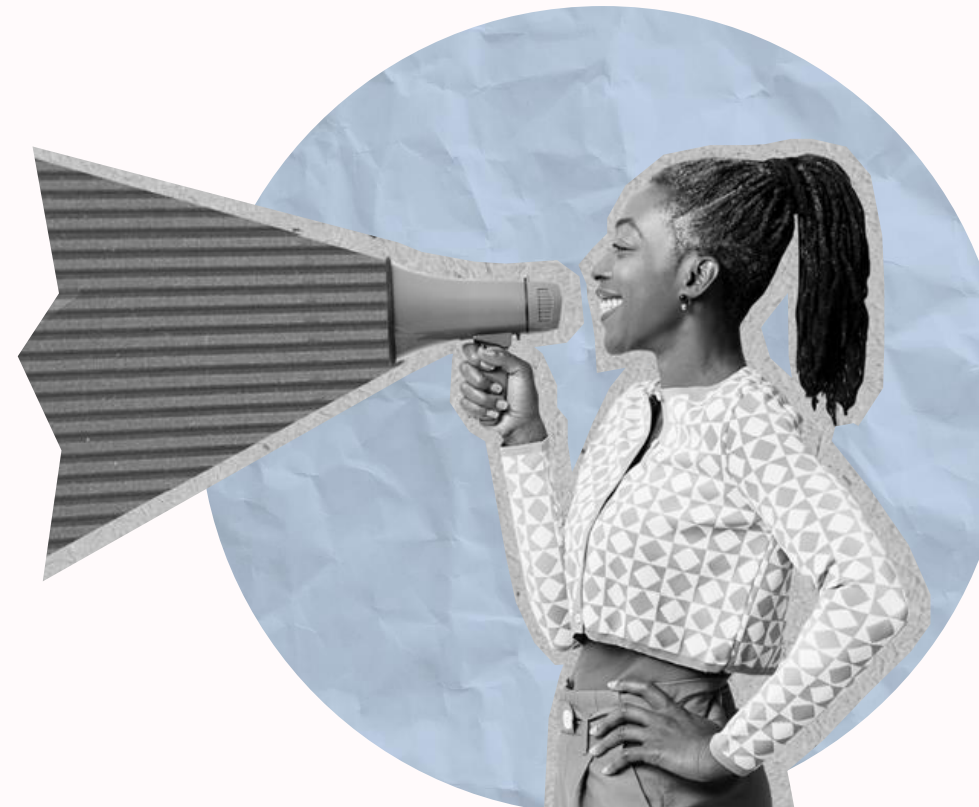
Applying *insights*



Activity

Applying insights in context

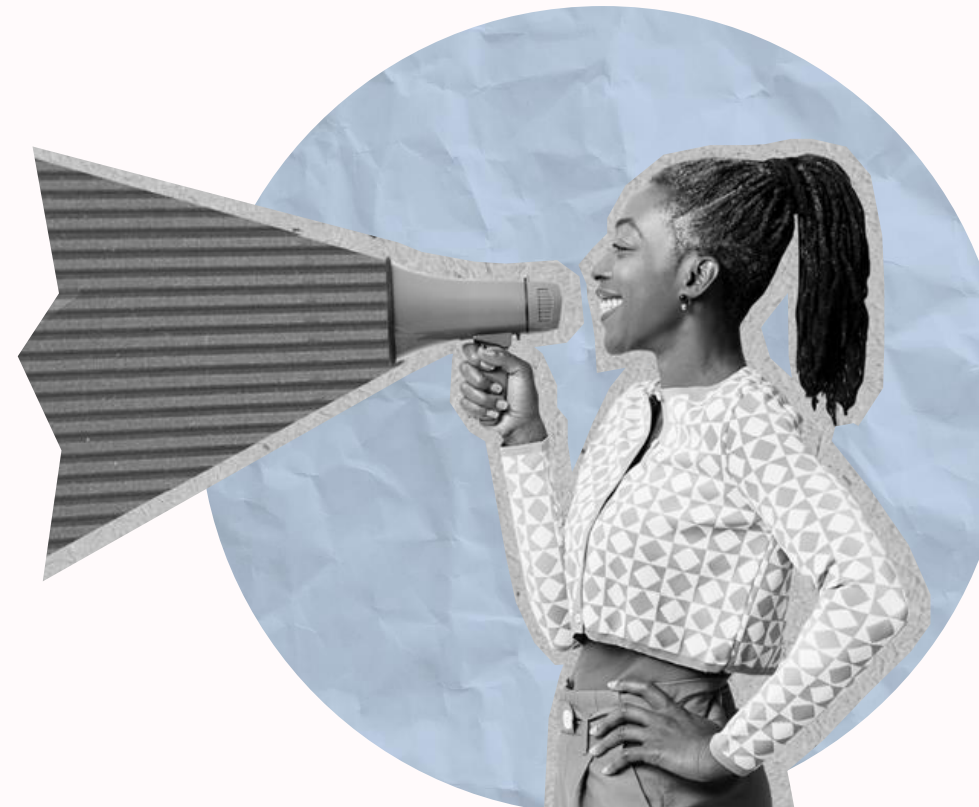
- *What insights from today resonate most for your work?*
- *Where could change have the most impact?*
- *What areas feel most important to focus on for you?*



Activity

Exploring application & key considerations

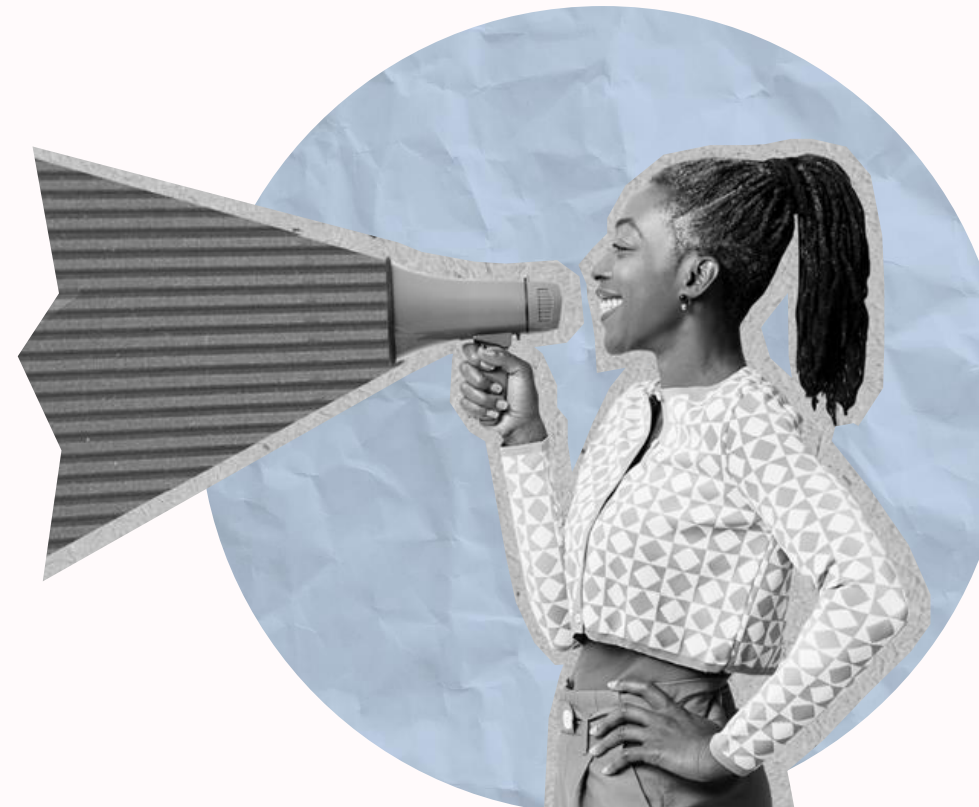
- *What this could involve in practice*
- *Key considerations, constraints, or trade offs*



Group discussion

Consolidating key findings & takeaways

- *What stood out in your discussion?*
- *What feels most important to carry forward?*



Closing & *next steps*



Thank you

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EVIDENCE INSIGHTS

References

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