Strengthening local approaches to tackling problem gambling

Purpose
For discussion and direction.

Summary
This paper provides an overview of recent initiatives to understand and address problem gambling, and makes recommendations on how the LGA can support councils on this agenda.

Recommendation
That the Safer and Stronger Communities Board members note the report, and agree or amend the proposed next steps.

Action
Officers to take forward as directed.

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Strengthening local approaches to tackling problem gambling

Background

1. At the Board meeting in March, members requested a paper on problem gambling, prompted by publication of a recent piece of work on this issue by Leeds City Council.

2. This paper provides an overview of the Leeds project and existing architecture to support problem gamblers, and considers how councils and the LGA could more effectively contribute to this support.

Context

3. Problem gambling is a behavioural issue defined as ‘gambling to a degree that compromises, disrupts or damages family, personal or recreational pursuits’; the broader term of people being ‘at risk of gambling related harm’ generally refers to people who are experiencing some difficulties with their gambling but are not yet at the point of being problem gamblers.

4. The vast majority of support for problem gamblers is commissioned by GambleAware (formerly the Responsible Gambling Trust (RGT)), an independent national charity funded by donations from the gambling industry. Although the Gambling Act allows for a levy to be imposed on industry to fund research, education and treatment, to date a voluntary approach has been preferred, with gambling operators free to choose to whom and how much they donate. GambleAware aims to raise £10 million a year from the industry, although in the year ending 31 March 2017 a figure of over £8 million was raised.

5. GambleAware is responsible for delivering the priority actions set in the National Responsible Gambling Strategy 2016-19, developed by the Responsible Gambling Strategy Board (RGSB), the Gambling Commission’s expert advisers on minimising gambling related harm. Membership of the RGSB includes academic, public health, medical and gambling sector experts.

6. In recent years, there has been a clear attempt by the RGSB (and therefore GambleAware/RGT) to promote a ‘public health approach to problem gambling’. Arguably, this doesn’t mean public health simply in terms of the service provided by local government; the RGSB ‘gambling-related harm as a public health issue’ paper defines a public health issue as one that causes (or has potential to cause) harm to some or all of the population, and which cannot be tackled by interventions directed solely at individuals; and a public health approach as recognising both that prevention is better than cure, and that a broad range of measures must usually be taken by different people and organisations.

7. However, more problematically, the RGSB’s 2016-19 responsible gambling strategy included as one of its five priority objectives for the period ‘the acceptance by a wider range of organisations in the public and private sectors (including those with a remit for public health) of their responsibility to help address gambling-related harm and to use their expertise and resources to work co-operatively in addressing them.’ This has
prompted some pushback from local authority public health professionals concerned at the suggestion that councils, rather than the gambling industry or NHS mental health services, should be increasing their support despite gambling, as a behavioural addiction, quite clearly not being part of the transfer of public health responsibilities from the NHS to local government.

**Leeds’s problem gambling research project**

8. In March this year, Leeds City Council published the findings of a research project into problem gambling. The research was commissioned by the council’s financial inclusion team and aimed to develop an in-depth understanding of problem gambling in Leeds in advance of the opening of a new large casino in the city.

9. The researchers reviewed national and local data and evidence on problem gambling, held detailed discussions with gamblers and operators in Leeds and assessed the support services available in the city.

10. The project concluded that the gambling market and gambling patterns in Leeds reflect those in other large metropolitan areas. Notably, it concluded that gambling behaviour and problem gambling are not equally distributed across England, with problem gambling rates higher for those living in more northern areas (or London), major urban areas, urban areas which are more densely populated, English Metropolitan boroughs, London boroughs, and wards classified as industrial, traditional manufacturing, prosperous and multi-cultural.

11. The researchers estimated that problem gambling rates in Leeds, at 1.8 per cent, are broadly twice the national average of 0.9 per cent. Rates of at risk gambling appeared to be consistent, at 5-6 per cent.

12. The research found that there was a variety of services and suppliers able to provide some advice and guidance to those at risk of gambling related harm, including the single supplier of specialist gambling services commissioned by GambleAware, generic advisory services and specialist addiction and recovery services. It concluded that the specialist service was operating in almost total isolation, despite the fact that that many problem and at risk gamblers have other addiction issues (typically alcohol, tobacco or drugs, and referred to as ‘co-morbidity) and were accessing other services related to these issues. Typically, there was a lack of screening or assessment in other services to be able to identify gambling issues, and a lack of connectivity between the different services.

13. The research found that where services were engaged with problem gamblers, support tended to be centred on the first issue presented or on issues related to their gambling behaviour (e.g. debt, family, health issues) rather than gambling itself; and that dedicated support for problem and at risk gambling in Leeds was seen to lag behind the comprehensive and integrated approach taken in the city to address other addiction issues, poverty and homelessness.

14. The researchers made a series of recommendations in response to the findings, specifically to enhance data collection, including around first contact assessment; improve co-operation across agencies, including early identification and referrals, and raising awareness, among both agencies and professionals and those at risk. It was also
suggested that some of the suggested actions could be supported as pilot approaches by GambleAware.

15. Recent feedback from officers in Leeds suggests that the project has been very positively received as having highlighted the issue of problem gambling. Meetings are now taking place between relevant third sector agencies; a publicity campaign has encouraged self-referrals by problem gamblers, and frontline staff have been provided with training to help them identify potential problem gambling issues.

GambleAware

16. Officers met recently with officials from GambleAware to find out more about the work it is doing with local areas to support its remit of research, education and treatment.

17. GambleAware are extremely keen to work with a council that has a strategy for dealing with gambling related harm, including evaluating the business case for taking a preventative approach to the issue, but to date have not identified a council in a position to do so.

18. They are similarly keen that the Leeds research project should be followed up, and are expecting in due course to consider a proposal to support the development of a northern hub for dealing with problem gambling. This may be an initiative that Board members in the region are interested in exploring further.

19. GambleAware are starting to work with Public Health England, but would also like to work with the LGA on this agenda, although they accepted that it is ultimately up to individual councils how they approach this and whether they participate in any pilot work. They emphasised that they are keen to explore the options for working with councils, rather than seeking a financial commitment from public health teams.

The wider gambling regulatory agenda

20. As the Board will recall, in 2016 the previous Government launched a review of gaming machines and social responsibility following repeated concerns raised by councils and others about the impact of B2 gaming machines (or Fixed Odds Betting Terminals, FOBTs) on problem gambling and betting shop clustering on high streets. Although the review was paused during the election, the reappointment of Tracey Crouch MP as Gambling Minister is encouraging news, and we hope that the Government's response and proposals will be published in autumn.

21. At this stage, it is not clear what recommendation the Government's review is likely to make on B2 machine stakes, although the Minister is believed to be personally sympathetic to concerns about FOBTs. Councils’ wider powers under the Gambling Act were not within the scope of the review, although the LGA’s response of course highlighted this issue, and with betting shops being sui generis in planning terms since last year, it is not expected that there will be any further changes to the planning system in regard to betting shops.

22. The Board will also recall that following a consultation in 2014, the Gambling Consultation’s Licensing Conditions and Codes of Practice for gambling operators and Guidance to Licensing Authorities were significantly updated, with changes coming into
effect over 2015 and 2016. The aim of the changes was to strengthen the social responsibility provisions binding on operators, and to encourage licensing authorities to take a more localised approach to gambling regulation. Operators are now required to undertake risk assessments for individual premises, to assess the risk of breaching the Gambling Act licensing objectives, while councils are encouraged to develop local area profiles providing an overview of the local area and any specific risks that operators should be aware of. The Geofutures research project for Westminster and Manchester councils, which was part-funded by the LGA and developed a series of maps setting out local area vulnerability to gambling related harm, was intended to support this approach.

23. Since the new requirements were introduced, there is evidence to suggest that not all operators have taken an appropriately premises, localist approach to the new risk assessment process; but also that some licensing authorities have not updated their gambling statements of policy, or developed a local area profile and accompanying approach to operator risk assessments. This is despite the new approach being promoted in the LGA’s councillor handbook on gambling and by the Gambling Commission’s guidance.

24. The LGA has been exploring the scope for incorporating the Geofutures approach into its LG Inform data tool. A condition of our original grant to Westminster was that the project methodology should be made available, and this has enabled some councils to develop their own local risk maps.

25. Having redeveloped the original Westminster/Manchester maps for the LGA to demonstrate how maps using national datasets only would appear in LG Inform, Geofutures’ recommendation is that the differences with the original maps (which included local datasets as well) are statistically different and should not be pursued. Our research team are intending to review this issue again once capacity allows later in the year.

**Future LGA support and lobbying**

26. Although there are some sensitivities regarding local public health involvement with problem gambling, LGA regulatory and public health leads believe that recent changes to the regulatory framework, the Leeds project and ongoing approaches to public health make it timely to produce a new LGA guidance document on gambling, targeted at councillors and regulatory / public health officers.

27. This would update an earlier LGA public health document on problem gambling (attached to agenda email), providing a more practical focus on:

27.1. councils’ responsibilities under the Gambling Act, e.g. the new recommendations around local area profiles, inspection approaches to gambling premises etc.

27.2. where councils may come into contact with problem gamblers through existing services, and how they can ensure they are aware of residents and communities suffering from gambling related harm.

27.3. best practice approaches for managing the issue, including engaging with other agencies and effective signposting.
28. The guidance would draw on the learning of the Leeds project and some of the support already available from GambleAware; the charity has advised that it could support this work by creating a starter pack with information materials about gambling related harm.

29. This type of document would respond to the undoubted councillor interest in this issue while also helping to raise awareness of the issue of problem gambling. While not suggesting that problem gambling is a public health responsibility, it would nevertheless assist councils to think about whether they understand the issue of problem gambling, how they interact with problem and at risk gamblers and whether appropriate signposting mechanisms are in place to ensure they get the right support.

30. As a broader lobbying point, the LGA could also highlight the fact that GambleAware did not raise its target of £10 million donations from the gambling industry in 2016-7, and argue for the industry to make a greater contribution to the cost of gambling related harm.

Implications for Wales ¹

31. Gambling licensing and public health are both reserved matters, and an LGA guidance document would therefore be of benefit to Welsh council as well as English councils.

Financial Implications

32. The proposed work can be undertaken within existing budgets.

Next steps

33. Members are asked to:

   33.1. Provide a view on the issues outlined in this paper.

   33.2. Agree to or amend the actions outlined above.

¹ The WLGA pays a membership fee to the LGA on behalf of all Welsh councils and we lobby for them on “non-devolved” issues - e.g. DWP work. The WLGA provides “top-slice” for workforce support, but none for “improvement”.