

Response ID ANON-7F6D-N7GN-H

Submitted to **Discussion on a new national strategy to reduce gambling harms, and Consultation on proposed amendments to LCCP requirements on gambling businesses to contribute to research, prevention and treatment**

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Introduction

1 What is your name?

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3 Are you responding as an individual or on behalf of an organisation?

Trade Association

4 What is the name of your organisation (if any)?

Organisation:

The Gambling Business Group

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Yes, I am happy for anonymised comments from my response to be published

The current National Responsible Gambling Strategy

7 Do you have experience of the current National Responsible Gambling Strategy?

Yes

8 What are your experiences of the current National Responsible Gambling Strategy?

Tell us about your experiences of the current strategy:

The Gambling Business Group (GBG) has been attending and contributing to the Responsible Gambling Strategy Board (RGSB) advisory group meetings for a number of years. The GBG was instrumental in making the current NRG Strategy a collective document, open to wider consultation than the previous iteration which was written by the RGSB in isolation.

The RGSB advice explained in the paragraphs leading up to question 7 of the discussion doc that one of the reasons for limited progress with the strategy was '...insufficient connection with statutory powers..' is a tenuous conclusion and lacking any evidence. The more fundamental reasons for the limited progress were;

1. The lack of transparent accountability for the deliverables'.
2. The inability to effectively define Gambling Related Harm(s) – more of this later.
3. Too many (12) priority areas to manage effectively.

The current National Responsible Gambling Strategy was indeed a well-intended document that was poorly executed.

A new national strategy to reduce gambling harms - our approach

9 What are your views on our overall approach to the strategy from defining the problem through to ensuring widespread adoption of good practice?

Views on our overall approach:

We have a grave concern about the approach taken to 'Defining the problem'. This is critical for the success of the new strategy and has arguably been the main flaw in the current version, which was also constructed around the principle of reducing gambling related harm. 'Gambling related harm' was never properly defined making it impossible to measure, whether it had been reduced or not. The 'Definition of Harms' in this new discussion document is equally ambiguous and will therefore be impossible to measure. On this footing the strategy will not move us forwards and we will not know in three years whether it has had an impact or not. We need a strategy built on rock, not on sand.

With the exception of physical harm, all other harms related to gambling whether emotional, financial, time related, relationship or welfare harms are all different for each individual. The aspiration to develop a bespoke set of tools to meet the definition of harms for every individual that gambles is such a big 'ask' that success is highly unlikely. The strategy needs to have a success criteria that progress can be measured against across the three years.

The strategy therefore needs to take a fresh look at 'what the problem actually is' perhaps from a different perspective. 'Gambling related harm' is a consequence (or outcome) of the problem we are dealing with, it is not the problem (or the cause) in itself. The problem we should seriously consider looking at is that 'not all gamblers stay in control of their gambling'. This is a far more tangible 'problem' to define and measure and confront, as we are already doing in some parts of the industry with particular forms of gambling activity.

For this reason and many others besides, 'collaboration' is an important theme in this document, but collaboration needs to be effective, inclusive and not politically motivated.

Ensuring widespread adoption of good practice requires genuine industry engagement (collaboration from all stakeholders) and will follow effective testing, evaluation and positive, evidenced outcomes. Get the process right, produce the evidence and widespread adoption will follow.

Priorities for the new strategy

10 Do you have any views on what should be prioritised under a new national strategy?

Views on priorities:

The National Strategy should be fundamentally focused on protecting the vulnerable by 'treating the cause and not the symptoms'. Far too much valuable time and resource has already been lost on trying to define gambling related harms, when it is not the root of the problem.

Gamblers who lose (or are out of) control of their gambling activity are those who we should be identifying and providing help to. The strategy should be focused on this specifically.

The impact of a vulnerable individual losing control is different in each case and impossible to stereotype other than in broad, general terms.

It is also commonly known that many who lose control of their gambling and become 'problem gamblers' often deal with it effectively themselves. We don't know or understand enough about this group of people and why they are different. If we did, the learning might be exactly what others need to know, to help them come to terms with their own problem.

So we should be asking and understanding why many Problem Gamblers suddenly stop being Problem Gamblers without any formal support?

Chasing the concept of 'gambling related harms' may create sensational headlines, may be lucrative ground for academic research, or good for the negative political agenda. But after another three years has passed with no real progress to show for it, it does beg the question 'is it really helping those who genuinely need support?'

Just because it is the perceived wisdom of the 'Expert Panel' in the RGSB doesn't mean it is correct.

The GBG welcomes the recognition in the draft paper that businesses are vital in helping to deliver the new national strategy and will therefore need to be engaged across all of the proposed priority areas. In this regard, the identification of priority area 5 as 'Gambling businesses' appears to be an after thought and 'at odd's with the theme-based approach of the other priority areas. The structure as it is depicted does not encourage or embrace 'collaboration'.

Rather than restructure the diagram, we would suggest that the fifth pillar could be headed 'Collaboration', which would fall in line with the narrative.

Priority Area 1: Research to inform action

11 To what extent do you agree with the proposed actions for Priority Area 1: Research to inform action?

Agree with actions - Creating an independent data repository to facilitate research:

Agree

Agree with actions - Increasing research capacity and quality through research centres:

Agree

Agree with actions - Improving links between research and policy using a research hub:

Agree

Agree with actions - That creating a data repository should be a Year 1 action:

Neither agree nor disagree

12 Do you have any other comments on Priority Area 1: Research to inform action? For example, what other actions should be considered? How could these actions be taken forward and which organisations should be involved?

Other comments on research priority area:

The GBG is concerned that in the pursuit of 'political correctness', research is being carried out in isolation from the industry to the detriment of the outcomes. The 'perception' implications of industry involvement in research are understood, but are not at times helpful, the end results being of a far less quality than if the industry were involved in (or supporting) 'setting the research priorities and question', even in a non-exec capacity. Poor quality results lead to poor decisions. Not to involve the industry can result in 'wild goose chases' such as researching symptoms rather than causes – see response to Q7.

Furthermore, researching with real gamblers, in real environments, with real products, with real money and real emotions has to produce better results than academic simulations.

Regarding the Data Repository, we already have an 'info-hub' managed by Gamble Aware which begs the question; Is the creation of a new repository just duplication

of something that has already been invested in using voluntary contributions? Either way, before work starts on something like this there needs to be data protocols to abide by and a code of conduct for how data is accessed and utilised.

We need to stop using the unreliable method of reporting problem gamblers or the strategy should have an objective to find a new, more robust method. GGY has increased by 180% since 2013 yet the Problem Gambling rates have not moved. Whilst the Gambling Commission might not like anyone to talk about this, it is an 'elephant in the room' on which things like this strategy become based, not a particularly responsible approach to take. Time and resource should be spent on producing a better way of measuring problem gambling or an alternative criterion that properly informs decisions, otherwise bad decisions will inevitably be made.

The biggest change to the industry since the 2005 Act, a change that was solely implemented with the aim of reducing harm has been the recent Gambling Review.

It seems almost bizarre that there is not mention what-so-ever of this in the document, let alone a desire to learn from its implementation.

This change should deliver a rich seam of evidence to be mined and learning to be established. As the change sits squarely in the first year of this new strategy, so should the task of evaluation, assessment and learning. In the event that the concluding evidence is not clear, we should equally learn from this with similar policies being suggested in the future.

Priority Area 2: Prevention

13 To what extent do you agree with the proposed actions for Priority Area 2: Prevention?

Agree Priority 2 actions - To measure harms of gambling:

Strongly disagree

Agree Priority 2 actions - Support public health model for prevention & education:

Disagree

Agree Priority 2 actions - Support national and local public health plans:

Agree

Agree Priority 2 actions - Significant progress on measuring harms as a Year 1 action:

Strongly disagree

14 Do you have any other comments on Priority Area 2: Prevention? For example, what other actions should be considered? How could these actions be taken forward and which organisations should be involved?

Other comments priority 2: Public health, prevention and education:

The pursuit of the definition of 'problem gambling', or what is a 'problem gambler' has been regular academic work for many, many years. Just as trying to define 'gambling related harms' is today. And every year the Gamble Aware conference will show that we have not moved on very far in these pursuits. None of these terms have been (or perhaps can be) researched successfully to the point of being able to make good, sound decisions based on the results. Yet we keep doing the same thing over and over again in the hope that one day we will. In the meantime the academics do very well indeed, but the problem gamblers and the vulnerable individuals we are aiming to help remain mostly at large.

This priority needs to be changed to focus on something that is more relevant and achievable, such as identifying why most gamblers can stay in control of their activity and what causes those who don't, to lose control? The objective would be to help and support EVERYONE to stay in control of their gambling, which would ironically have a direct impact on reducing gambling related harms.

We will repeat our assertion that gambling businesses and the industry has a significant contribution to make in assisting the Commission to deliver the prevention priority of the strategy and would welcome greater clarity on the specific outcomes the Strategy is looking to secure over the three year period. It would also be appropriate to set out a vision that extends beyond this three year strategy to portray the ultimate cultural shift we need to see for this to be fully effective.

Priority Area 3: Treatment

15 To what extent do you agree with the proposed actions for Priority Area 3: Treatment?

Agree Priority 3 actions - Evaluation and needs assessment:

Strongly agree

Agree Priority 3 actions - Progress towards truly national treatment:

Agree

Agree Priority 3 actions - Strategic partnership for gambling and other harms:

Agree

Agree Priority 3 actions - Evaluation and needs assessment as Year 1 action:

Neither agree nor disagree

16 Do you have any other comments on Priority Area 3: Treatment? For example, have we adequately mapped the current treatment provision? What other actions should be considered? How could these actions be taken forward and which organisations should be involved?

Other comments Priority 3:

We do not agree with the following assumptions (or assertions) made in the discussion document, or the conclusions drawn from them;

- That all of those categorised as 'problem gamblers' either want or need treatment. This strategy has an obligation to be accurate about the real gap between 'need' and 'provision' and steps should be taken as part of this strategy to acquire this knowledge.
 - That the number of problem gamblers reported by the Gambling Commission is reliable/accurate. It is bizarre that there is nothing in this drafting to recognise this fundamental shortcoming let alone any inclination to address it.
 - That residential treatment is less available because of its geographical location. Part of the rehabilitation process for many requires the individual to be physically distanced from their familiar environment, so location needs to be remote as opposed to local.
- We would therefore suggest that any conclusions reached using any of the above should be revisited using factual information.

Priority Area 4: Evaluation

17 To what extent do you agree with the proposed actions for Priority Area 4: Evaluation?

Agree priority actions 4 - Embed use of evaluation through evaluation protocol:

Agree

Agree priority actions 4 - The regulator and government to lead by example:

Strongly agree

Agree priority actions 4 - Explore use of central/ co-ordination evaluation body:

Neither agree nor disagree

Agree priority actions 4 - Embed evaluation protocol as Year 1 action:

Agree

18 Do you have any other comments on Priority Area 4: Evaluation? For example, what other actions should be considered? How could these actions be taken forward and which organisations should be involved?

Other comments priority 4:

The evaluation protocol is a useful document and process, in fact the GBG produced the first iteration a number of years ago. However, as it is currently written it is too thorough and detailed for every purpose for which it is expected to be used. There are some tests and trials that are smaller in nature, perhaps less impactful that require a slightly different approach. We would propose the development of a further 'lighter' version (maybe even two) that would then cater more efficiently for all scenarios and all types and sizes of trials.

We would also encourage more evaluation of tests and initiatives in 'live' environments, which would include the cooperation (and collaboration) of operators and developers by necessity.

As one of the questions here relates to 'leading by example' it seems appropriate to reiterate the requirement for a full and thorough evaluation of the full impact of the removal of stakes above £2 on Category B2 machines in April of this year.

Priority Area 5: Gambling businesses

19 To what extent do you agree with the proposed actions for Priority Area 5: Gambling businesses?

Agree with Priority Area 5 Actions - Focus industry efforts for safer gambling:

Agree

Agree with Priority Area 5 Actions - To properly evaluate and compare initiatives:

Strongly agree

Agree with Priority Area 5 Actions - To ensure widespread adoption of current best practices:

Strongly agree

Agree with Priority Area 5 Actions - Focus industry efforts as Year 1 Action:

Agree

20 Do you have any other comments on Priority Area 5: Gambling businesses? For example, what other actions should be considered? How could these actions be taken forward and which organisations should be involved?

Other comments Priority 5:

We agree with the proposed Year 1 actions to ensure that efforts of the gambling industry are coordinated through targeted collaboration and focused on safer gambling, although it should also include 'Responsible Gambling' which as the authors will know, has different characteristics.

Collaboration is a clear and very welcome priority, but for it to be effective it needs to be inclusive and not politically selective. This would undermine effective industry collaboration and create barriers where they should be being removed.

Effective collaboration can be encouraged by setting clearly defined outcomes and priorities and for the strategy to be clear in what it expects industry to address. Industry can then focus in a collaborative manner on how best and most practicably these solutions can collectively be delivered.

There has already been a move towards better collaboration across the industry over the past year. This is welcome and has been recognised by the RGSB and Commission. We believe this is a strong foundation on which to build the new strategy.

The Gambling Business Group and its members have been working with Industry Leaders and in collaboration with the Senet Group in this regard and there is a growing and encouraging enthusiasm for a more collective approach.

Finally, we think it is important that the new strategy has an objective to understand and consider the commercial realities of all new policies and LCCP

requirements. Whilst we fully support the aim of these proposals, it is far easier for larger businesses who have the capacity and resources to implement such changes more readily. It will be far more difficult for SMEs and businesses who are struggling economically (in a difficult climate) to deliver/roll out safer gambling initiatives at the same rate. This consideration should form part of any evaluation process.

Summary of discussion on the new strategy

21 To what extent do you agree with the emerging content of the new national strategy to reduce gambling harms?

Summary respondents - Overall aim to reduce gambling harms:

Summary respondents - The overall approach: define problem through to adopt best practice:

Summary respondents - Priority Area 1: Research to inform action:

Summary respondents - Priority Area 2: Prevention:

Summary respondents - Priority Area 3: Treatment:

Summary respondents - Priority Area 4: Evaluation:

Summary respondents - Priority Area 5: Gambling businesses:

22 Do you have any other comments on the emerging proposals for the new national strategy to reduce gambling harms?

Any other comments:

Yes we do.

Until we know how to measure 'gambling related harms' we should not set ourselves a task to 'reduce' them. Simply because at the end of the three years we will not know whether we have succeeded or not, rendering the strategy a failure.

And in the meantime, we are not doing everything we can to directly help and protect the vulnerable.

'Define the problem' needs much more work. The definition work should be done 'before' the strategy is entitled 'National Strategy to Reduce Gambling Harm' (which implies the problem has already been identified).

Reducing Gambling Harm is not the problem, it's a symptom. This strategy needs to focus 'treating the cause, not the symptom'.

The approach and structure in this document is good, but the execution is critical and is where the current strategy has arguably failed.

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Consultation on proposed amendment to LCCP requirement for businesses to support research, prevention and treatment of gambling harms

23 Do you broadly agree with the proposed change to our requirements to give clarity to operators on where contributions made under the LCCP requirement may go?

Not Answered

24 Do you have any comments on the proposed drafting of the provision?

Comments on draft requirement on businesses:

Over a year ago we asked the gambling Commission for transparency of where voluntary settlements and other monies have been allocated to date and the impact of those placements. Nothing has been forthcoming. The Gambling Commission need to demonstrate a genuine commitment to openness and transparency in this very sensitive area if they expect other organisations to follow suit.

We welcome the aim of this proposal to provide greater clarity to operators on where contributions should be spent. However, there is a danger here of the unintended consequence of excluding local initiatives and stifling innovation among smaller organisations/social enterprises, which surely is not the aim of this policy? It is important that operators can still have the local ability and option to choose who to partner with – especially as technology is developing. We would therefore disagree with a definitive list of who can and who can't receive RET contributions.

We would also like some understanding on exactly what 'unduly influenced by the industry' is intended to mean as again, we appear to be venturing into the territory of 'political correctness' when it could be counter-productive. and potentially put some organisations off working with the gambling industry.

In the event that a 'white list' is created by the Gambling Commission, there will need to be an appeals process for those organisations who feel they have not been approved in a fair and balanced manner.

It should also be stated that these same principles will apply to all voluntary settlements and such like that have been agreed with the Gambling Commission.

25 Do you have any other comments on the requirement on businesses?

Comments on requirements on businesses:

None

26 To what extent do you agree with the principles for bodies signing up to delivery of the new strategy?

Agreement with governance principles - Independence:

Disagree

Agreement with governance principles - Openness and transparency:

Strongly agree

Agreement with governance principles - Integrity:

Strongly agree

Agreement with governance principles - Clarity of purpose:

Strongly agree

Agreement with governance principles - Effectiveness and accountability:

Strongly agree

27 Do you have any other comments on the proposed principles?

Comments on governance principles:

None

28 We believe it is implicit that most funding under the LCCP requirement will be targeted at reducing gambling harms in Britain. However, in order to promote the principle of international co-operation, we recognise there may be instances where organisations signed up to deliver the strategy are based in other jurisdictions. We are of the view that in these circumstances their work should have a clearly defined link to the impact of reducing gambling harm in Britain. To what extent do you agree with this assessment?

Disagree