

Neil McArthur  
Chief Executive  
Gambling Commission  
Fourth Floor, Victoria Square House  
Victoria Square  
Birmingham  
B2 4BP

Delivered by E-mail: [safergambling@gamblingcommission.gov.uk](mailto:safergambling@gamblingcommission.gov.uk)

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Dear Neil,

**Re: Consultation on a national strategy to reduce gambling harms**

We are pleased to respond to the Gambling Commission's public consultation on i) a national strategy to reduce gambling harms, and ii) proposed amendments to licence conditions and codes of practice (LCCP) requirements on gambling businesses to contribute to research, education and treatment.

**Introduction**

GambleAware is a national charity committed to reducing gambling harms across Britain.<sup>1</sup>

We work to achieve this by broadening public understanding of gambling-related harms, in particular as a public health issue; advancing the cause of harm prevention so as to help build resilience, in particular in relation to the young and those most vulnerable to gambling-related harms; and, helping those who experience gambling-related harms get the support that they need quickly and effectively.

Regulated by the Charity Commission, trustees are obliged to carry out the charity's purpose for the public benefit, and specifically on behalf of our beneficiaries who are those affected, or at risk of being affected, by gambling harms. The charity is independent of the gambling industry, and we have a responsibility to advocate for action that helps achieve our charitable purpose.<sup>2</sup>

GambleAware is a strategic fundraiser, commissioning and grant-making body uniquely positioned within an ecosystem of national and local government, regulators, academics, research institutions, health professionals, charities, treatment and other service providers, service users and others with lived experience of gambling harms,

<sup>1</sup> <https://about.gambleaware.org/about/charitable-objects/>

<sup>2</sup> <https://about.gambleaware.org/about/governance/campaigning-and-political-activity/>

as well as gambling and other gambling-related industries. Our added-value derives from our internal expertise, experience and knowledge allied to our ability to leverage extensive networks and relationships nationally and internationally, and to broker engagement to affect positive and sustainable change. We are an evidence-based organisation. Our priority is to ensure that sufficient core funding is raised through the current voluntary system and is strategically allocated in accordance with the priorities set by the Gambling Commission and its advisors the Responsible Gambling Strategy Board (RGSB).

## Background

The current arrangements for prioritising, commissioning, funding and evaluating research, education and treatment (RET) in relation to reducing gambling harms are set out in a ‘statement of intent’ agreed between the Gambling Commission, the Responsible Gambling Strategy Board (RGSB) and GambleAware (previously operating as the Responsible Gambling Trust), and published in August 2012.<sup>3</sup>

Under these arrangements, GambleAware is responsible for fundraising and commissioning activity to deliver a rolling three-year strategy to reduce gambling harms, subject to the availability of sufficient funds. These arrangements are predicated on all three parties working openly and in active partnership, a condition underlined by the addition of a protocol in 2014.<sup>4</sup>

The Department of Digital, Culture, Media and Sport (DCMS) has acknowledged these arrangements, and it is intended that their success mitigates against the need to introduce a statutory levy rather than the voluntary donation system of industry funding that has been in place since 2002.<sup>5</sup>

In February 2018, in formal advice to DCMS regarding its consultation on proposed changes to gaming machines and social responsibility measures, the Gambling Commission wrote: “*GambleAware is the only organisation with a formal commitment to commission research, education and treatment in accordance with the National Responsible Gambling Strategy. It is part of a tri-partite arrangement with the Commission and its advisers, RGSB, which the Government has acknowledged as being key to the success of the voluntary system. This central role means that it is ideally positioned to ensure that activities are funded according to clear priorities.*”<sup>6</sup>

In its response in May 2018, DCMS noted: “*The voluntary system for funding RET provides vital support to help those suffering from gambling-related harm and to help prevent further harm. We call on industry to continue to give full support to this system, providing the funding needed to meet current and future priorities in the National Responsible Gambling Strategy, and working with the Commission and GambleAware to help strengthen the current system.*”<sup>7</sup>

These statements give support to the principle that the successful delivery of a national strategy to reduce gambling harms requires partnership working, allied to sufficient resources, including appropriate expertise. And that such working needs to be directed and co-ordinated if it is to be coherent, efficient and effective. This is in essence what the current tripartite arrangements are intended to achieve.

We agree with the Gambling Commission that there have been significant improvements in the delivery of RET in the two years to February 2018, and we think that further positive changes, particularly in relation to independence and transparency, have been made in the last twelve months.

<sup>3</sup> <https://about.gambleaware.org/media/1211/statement-of-intent-document-final-with-logo-v2.pdf>

<sup>4</sup> Ibid

<sup>5</sup> Ibid

<sup>6</sup> <https://www.gamblingcommission.gov.uk/PDF/Review-of-gaming-machines-and-social-responsibility-measures-%E2%80%93-formal-advice.pdf>

<sup>7</sup> [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/707815/Government\\_response\\_to\\_the\\_consultation\\_on\\_proposals\\_for\\_changes\\_to\\_gaming\\_machines\\_and\\_social\\_responsibility\\_measures.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/707815/Government_response_to_the_consultation_on_proposals_for_changes_to_gaming_machines_and_social_responsibility_measures.pdf)

In July 2018, GambleAware published a two-year delivery plan<sup>8</sup> that sets out its strategic priorities through to April 2020, and in September 2018 the charity completed its transition to a board of trustees wholly independent of the gambling industry. Also, full details of the charity's funding receipts are now published on a quarterly basis.

The publication by the Gambling Commission of a research programme in support of the emerging national strategy was another important step forward. GambleAware's role is identified as "*developing and delivering a commissioning plan based on the research programme, seeking to deliver as much as possible within available funding.*"<sup>9</sup>

In common with the Gambling Commission, trustees' most significant ongoing concerns are around funding, stakeholder engagement, and perceptions of independence, and they support the Gambling Commission's earlier proposals to build on the current arrangements: in particular, working more closely with GambleAware to ensure RET monies are distributed transparently, efficiently and effectively.<sup>10</sup>

## National strategy to reduce gambling harms, 2019-21

### Overall approach

- We agree that gambling is a public health issue that requires a cross-government approach to reducing harms via prevention and treatment, supported through research and evaluation.
- We welcome the Gambling Commission's commitment to lead the development of a new strategy and to leverage where applicable its regulatory powers to ensure effective implementation, in as far as its regulatory remit permits.
- We agree with the proposed focus on reducing gambling harms rather than promoting 'responsible gambling', and that attention must go beyond the individual to include products and the broader gambling environment, in line with a public health approach.
- GambleAware has collaborated with the Gambling Commission and RGSB to commission and publish research that establishes a framework for action to measure gambling-related harms, including costs, on resources, health and relationships<sup>11</sup>. This should underpin the whole strategy to reduce gambling harms, so we suggest it is relocated within the structure of the strategy document to reflect that, and that this work is expedited. Such work would benefit from the focus of an independent research centre, which we believe is necessary to ensure substantive, independent and dynamic measurement, and to secure a realistic approach to policy development.
- We welcome the intention to reduce the emerging strategy into five priority areas, and we think it is particularly important to focus on protecting children and young people,
- We agree that the language around RET needs to evolve to reflect the role that prevention plays when taking a public health approach to reducing gambling harms, and the important part regulation plays in prevention of harm through ensuring access to gambling, gambling products and industry practice is safer. The label 'education' can have different meanings for different people, and, in any event, is better understood as being just one element of 'prevention'.
- Evaluation, like research, is a fundamental and cross-cutting priority and it may be helpful to link these together, as both research and evaluation are crucial to bringing to light the evidence to inform action.

<sup>8</sup> <https://about.gambleaware.org/media/1735/gambleaware-strategic-delivery-plan-2018-20.pdf>

<sup>9</sup> <https://about.gambleaware.org/media/1793/research-programme-2018-22.pdf>

<sup>10</sup> <https://www.gamblingcommission.gov.uk/PDF/Review-of-gaming-machines-and-social-responsibility-measures-%E2%80%93-formal-advice.pdf>

<sup>11</sup> <https://about.gambleaware.org/media/1757/measuring-gambling-related-harms-10-july-2018.pdf>

- We are pleased to see that many of the proposed actions in research, prevention and treatment are consistent with the priorities GambleAware has set out in its recent delivery plan.
- **We believe there is significant progress being made across government regarding recognising and reducing gambling harms, in the spirit of ‘Health in all Policies’ (HiAP). Our concern is that any new strategy is clear about these developments and how it builds on and complements these initiatives, and is co-ordinated and appropriately aligned within public sector activities.**

## Priority area 1: Research

- Our research activity is guided by the Gambling Commission's Research Programme<sup>12</sup>, and supports the emerging national strategy to reduce gambling harms. Its independence is ensured by the Research Governance and Commissioning Procedure<sup>13</sup> agreed with the Gambling Commission.
- Commissioned research is peer-reviewed by international academic experts and published via the GambleAware website. We follow Research Council policy regarding research ethics, encouraging and funding open access publication in academic journals and data reuse.
- GambleAware has been approved by National Institute for Health Research (NIHR) as an NIHR non-commercial partner. As such, appropriate research studies funded by GambleAware will be automatically eligible for NIHR Clinical Research Network (CRN) support and therefore entitled to access NHS support via the NIHR CRN, subject to meeting standard study eligibility criteria including that the research has clear value to the NHS and involves NHS patients, staff, premises, facilities, or resources.
- We agree with the six research themes and are pleased to have played our part in helping to articulate the research programme as published in September 2018. The programme is now up and running. The pace of delivery needs to be sustained, recognising that high quality and meaningful research takes time to commission and to deliver. There is considerable skill and expertise necessary to ensure that the right research questions are identified, that data is accessible, that the most appropriate academic disciplines and research methodologies are applied, and that the peer-review processes are robust. For these reasons, good research requires patience as well as sufficient resources.
- We welcome the evidence review being commissioned by Public Health England (PHE) and the call put out by the NIHR Public Health Research Programme for research proposals on gambling. However, we note the challenges that these organisations face regarding the source of funding.
- All stakeholders must have confidence that the research process is scrupulously independent, and avoids conflicts of interest, perceived or real, involving industry, government, regulators, or service providers. This is why we are proactively investigating the potential for funding one or more independent research centres, an independent industry data repository, and an independent national treatment data centre.
- GambleAware has a key role to play in supporting such centres by facilitating and brokering relationships across a range of stakeholders, from the research community, industry, government, prevention, treatment and service users, in order to inform the agenda, design and implementation of research, to enable access for researchers and to move evidence into action.
- Notwithstanding these initiatives, it is important to encourage as wide a range of academics and researchers as possible to participate in delivering high quality research that can help to inform public policy, regulatory and industry action and health responses in relation to reducing gambling harms. GambleAware now occupies a unique and independent space within the existing arrangements in which it is increasingly able to provide

<sup>12</sup> <https://about.gambleaware.org/media/1793/research-programme-2018-22.pdf>

<sup>13</sup> <https://about.gambleaware.org/media/1332/research-commissioning-and-governance-procedure-september-2016-final.pdf>

the necessary confidence to attract academics and researchers previously anxious about industry, government and regulatory influence.<sup>14</sup>

- We will continue to make the current research governance and management processes function impartially and effectively, working with RGSB, Gambling Commission and DCMS. The expertise, experience and networks now available to GambleAware via its management team and trustees will also ensure that we are able to evolve new ways of delivering research.
- We are developing approaches to grant-making that strengthen delivery and build capacity in relation to gambling studies. There will be larger grants funding thematic programmes, delivering efficiencies in grant-making and to attract high quality researchers. This will enable interest from a greater variety of researchers, multi-disciplinary teams and inclusion of early career researchers, building capacity in gambling studies. This approach will also more coherently provide answers to research questions.
- We are using a variety of processes for grant-making, in addition to open tenders, while ensuring transparency. For example, greater engagement with the researchers during the grant-making process, competitive dialogue, framework agreements, preferred suppliers and consortia. This is because research is a specialist skill and a suite of approaches is needed to get the right team for a project.
- There is a commitment to develop the infrastructure necessary to support gambling research by providing access to data for multiple research projects, thus limiting the necessity to recruit participants and enabling insights from data that extend beyond individual operators and sectors. This includes research into changes in gambling behaviour and an independent repository of player characteristics and behaviour data.
- We are seeking collaboration and co-funding with other research agencies, to leverage research commissioning expertise and credibility, and to increase interest in gambling as an important topic of research. For the longer term, we will be working with partners to assess alternate models for delivering research, for example, centres of excellence or consortium approaches. The principle is to harness the wider British research infrastructure to deliver policy-focused research and to foster wide-ranging academic-driven research.
- Importantly, the quality and impact of research can be improved through ensuring those with lived experience are involved in setting the research agenda and in the implementation of research projects. Our plans for developing engagement include ensuring those with lived experience inform both the research we commission and the wider field of gambling research.

## Priority area 2: Prevention

- As noted earlier, GambleAware has collaborated with the Gambling Commission and RGSB to commission and publish research that establishes a framework for action to measure gambling-related harms, including costs, on resources, health and relationships<sup>15</sup>. This should underpin the whole strategy to reduce gambling harms, rather than solely underpinning the ‘prevention’ aspect of the strategy, so we suggest it is relocated within the structure of the document to reflect that. While it is clearly vital to preventing harms that we understand how and where those harms present, to not ensure that the proposed strategy has a focus on prevention activity seems a missed opportunity.
- Prevention covers a broad range of activity, which can be placed within a framework covering universal, targeted and intensive prevention programmes. GambleAware is working to deliver interventions at all levels (see below), however the development of a broader prevention strategy within which this work, and the work of others, including policy and regulation, is situated would be a major step forward.
- GambleAware is working in partnership with public health bodies in England, Scotland and Wales, NHS Foundation Trusts, and regional and local health commissioning agencies to raise awareness of gambling-

<sup>14</sup> Innovation ITT attracted 23 bidders in January 2019 – see [https://about.gambleaware.org/media/1809/itt\\_innovative-applied-research-iargs.pdf](https://about.gambleaware.org/media/1809/itt_innovative-applied-research-iargs.pdf)

<sup>15</sup> <https://about.gambleaware.org/media/1757/measuring-gambling-related-harms-10-july-2018.pdf>

related harms as a public health issue. So we welcome the Gambling Commission's commitment to support a public health model to tackle gambling harms, and to support national and local health plans, including working with central Government as it coordinates these plans.

- We welcome the acknowledgement that not all action in the space of reducing gambling harms will happen under the auspices of the proposed strategy, and that the Gambling Commission's role will focus on sharing its expertise as a regulator, and in turn reflecting the learnings of research in its regulatory approach.
- The recent initiative by DCMS and the Department of Health & Social Care (DHSC) to joint-chair a Steering Group with the express purpose to improve co-ordination and promote a sustainable, joined-up approach to work across research, education and treatment activity is a significant and positive step-forward. GambleAware welcomes its membership of this working group alongside the Gambling Commission, RGSB and others such as PHE.
- GambleAware is leading a national multi-media 'safer gambling' campaign that will launch in February 2019.<sup>16</sup> However, we do believe that PHE (and its devolved counterparts) are best placed to lead on the broader population level prevention activity.
- GambleAware is advocating for the inclusion of gambling education as part of the Personal, Social, Health and Economic (PSHE) curriculum in schools<sup>17</sup>, and encourages its inclusion in all conversations in youth settings around resilience to risky behaviours, working towards parity with drug and alcohol education, particularly for target groups such as youths not in employment or education and participants in grassroots sport.
- Elsewhere, GambleAware is participating in the National Suicide Prevention Strategy Advisory Group, and is at an early stage of collaboration with the Ministry of Defence in relation to gambling as a health issue for serving military and veterans.
- GambleAware has been thoughtful about building strategic partnerships with other organisations well placed to respond to gambling-related harms, including NHS England, PHE, Royal Society for Public Health, Citizens Advice, ParentZone, PSHE Association, Fast Forward, Personal Finance Research Centre (PFRC), AdFam and GamBan.
- We have developed and published a brief intervention guide aimed at professionals who are non-specialists in the treatment of problem gambling, but who work with potentially vulnerable groups. The guide offers practical tips on identifying a problem, how to talk to someone about their gambling, offering immediate brief support and when to signpost to specialist services.<sup>18</sup>
- We have agreed to fund the Royal Society for Public Health (RSPH) to establish a Gambling Health Alliance to bring together a wide range of professional health-related bodies to promote responding to gambling as a health issue.
- In collaboration with the Local Government Association (LGA), GambleAware has funded the dissemination to all local authorities of the document produced jointly by LGA and PHE in July 2018, [Tackling Gambling-related Harm: a whole council approach](#).
- We are pleased to be working with PHE on their recent mental health initiative, Every Mind Matters and welcome their promotion of information about gambling and where to find help and advice. And, we look forward to contributing to consultations about the future development of mental health services by NHSE as well as taking forward early discussions with the NHSE Offender Health team to explore the scope for joint working in relation to gambling harm-prevention and treatment.

<sup>16</sup> <https://about.gambleaware.org/education/safer-gambling-campaign/>

<sup>17</sup> <https://about.gambleaware.org/media/1681/gambleaware-submission-to-department-of-education-re-phse-12-february-2018.pdf>

<sup>18</sup> <https://www.about.gambleaware.org/media/1817/gambleaware-brief-intervention-guide.pdf>

- In other work, we are collaborating with PHE, RSPH and others to include gambling conversations on the Make Every Contact Count + (MECC+) agenda as well as working with professional membership bodies to ensure workers in health and mental health settings have training and awareness of gambling-related harms, and are able to identify need, deliver brief interventions and refer on to specialist services where necessary. In this way GambleAware is able to ensure a holistic approach to public health as seen in its Leeds Hub initiative that melds prevention and treatment services across the community.

## Priority area 3: Treatment

- GambleAware commissions a national treatment service for problem gambling. This provides a range of interventions across England, Scotland and Wales, free at the point of delivery. Telephone support is available via the National Gambling Helpline which is also able to direct people to local services provided by GamCare and its partner network, by Gordon Moody Association and by Central and North West London NHS Foundation Trust. In the 12 months to 31 March 2018, the national treatment service helped almost 8,800 people.
- Treatment is tailored to the needs of the individual, recognising that there is a spectrum of severity and complexity among the population seeking help. Residential treatment at Gordon Moody Association and the clinics at Central & NW London NHS Foundation Trust, and Leeds & York Partnership NHS Foundation Trust have a higher-cost base than other treatment options, and form part of the treatment that GambleAware commissions in order to meet the needs of people with severe and complex needs.
- Services provide a mix of one-to-one and group work, and include counselling and more intensive interventions. Where individuals are identified as needing treatment for other conditions, such as poor mental health, they are referred to appropriate statutory services. Outcome monitoring is undertaken to measure the effectiveness of services in supporting clients to achieve behavioural change.
- GambleAware has been developing systems to assure the delivery of safe, effective treatment. To supplement its own programme of data collection and performance management, independent, external validation has also been pursued. The National Gambling Helpline has been externally accredited. A number of organisations providing gambling treatment are registered with the Care Quality Commission (CQC) because of other services that they provide. GambleAware would welcome CQC inspection of all providers of gambling treatment, and in conjunction with the Gambling Commission and RGSB is in discussion to explore whether CQC could take on that role.
- There has been significant progress under the existing strategy, particularly in changing the conversation to place gambling alongside other public health concerns. In those areas where progress has taken longer, the reasons are complex, historic and in many ways structural. For example, the voluntary system of funding has created financial uncertainties, and for some there remains a lack of trust in the voluntary arrangements; more broadly, there remains poor awareness and minimal acceptance by the public at large of gambling as a health issue; and, in making the transition from a system of direct industry funding of disparate, charitable treatment providers to an integrated, professional commissioned national treatment service, it has taken time to build the trust we now have between the various organisations.
- GambleAware has commissioned a team of researchers at the University of Huddersfield and Flinders University, Australia, to undertake a systematic review of treatment and support on offer for those experiencing gambling problems.<sup>19</sup> The review will explore services on offer ranging from primary care to specialist services and brief to intensive interventions, to identify the efficacy of these interventions, cost-effectiveness or value for money. This work is due to be completed in 2019.

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<sup>19</sup> <https://about.gambleaware.org/research/research-projects/>

- GambleAware has commissioned ACT Recovery & NatCen to undertake a delivery gap analysis of treatment provision across Britain to describe the nature of unmet need in terms of geography, demographics and severity of harm.<sup>20</sup> This work is due to be completed in 2019.
- GambleAware has issued an Invitation to Tender<sup>21</sup> for the evaluation of the GambleAware funded treatment system.
- We welcome the inclusion of treatment for gambling problems in a forthcoming review by the National Institute for Health and Care Excellence (NICE).
- We are working with the health departments of the three nations in Great Britain to develop links between statutory agencies and the national gambling treatment service. This will be vital in improving care pathways so that people with gambling problems get promptly identified and referred into treatment regardless of where they present. It is also essential if people are to get treated holistically for complex problems.
- GambleAware welcomes the commitment in the NHS Long Term Plan for NHS England to take a role in commissioning treatment for gambling addiction. GambleAware is committed to close collaboration with NHS England so that the treatment services commissioned by our respective organisations work alongside each other in a seamless manner.
- Should the NHS in England, Wales and Scotland take full responsibility for funding and commissioning treatment for gambling disorders, GambleAware would step back from its existing role in commissioning NHS-hosted services.
- In the meantime, GambleAware will continue to commission treatment and other support for problem gamblers. Indeed, we think there will always be a role for GambleAware and others to provide alternative models of care and recovery such as mutual aid and other peer support services, as well as amplifying service user insight and lived experience of gambling harms through research and advocating for action in relation to social issues and wider determinants of health and well-being.
- **We are committed to ensuring that health bodies are central to defining and taking forward the research agenda in relation to health aspects of gambling, including prevention and treatment.**

## Priority area 4: Evaluation

- In April 2016, RGSB published an Evaluation Protocol, agreed jointly between RGSB, GambleAware and the Gambling Commission.<sup>22</sup>
- GambleAware has published resources to support the gambling industry to do evaluation<sup>23</sup> and, in 2016, appointed a number of independent organisations to a three-year framework contract to supply evaluation services.<sup>24</sup>
- GambleAware takes the lead on evaluating all commissioned projects and programmes, and we are committed to proportionately evaluating our own activity, in public awareness, prevention and treatment, so we know what works and can continuously improve.
- The approach of the last strategy for industry harm minimisation was to allow 'a thousand flowers to bloom' - to expect operators to initiate and evaluate their own approaches to harm minimisation and share the outcomes of these evaluations. In support of this approach, GambleAware provided training for industry on evaluation and developed an evaluation toolkit for industry. However, operators demonstrated they did not have the capability to take on complex evaluations of interventions with vulnerable people, and this is

<sup>20</sup> Ibid

<sup>21</sup> <https://about.gambleaware.org/media/1897/gaittevaluation-of-ga-supported-treatment-revised-0219.pdf>

<sup>22</sup> [https://about.gambleaware.org/media/1228/evaluation\\_protocol - april 2016.pdf](https://about.gambleaware.org/media/1228/evaluation_protocol - april 2016.pdf)

<sup>23</sup> <https://about.gambleaware.org/research/evaluation/resources-to-support-the-gambling-industry-to-do-evaluation/>

<sup>24</sup> <https://about.gambleaware.org/research/evaluation/>

understandable as this is not core business. In some instances, commercial interest prevented sharing across operators or with other stakeholders. Industry also expressed frustration at being criticised for not doing enough without clear guidance as to ‘what good looks like’. It has not been clear who leads for turning evidence into best practice and assessing its application.

- In this context, GambleAware has taken on the commissioning of projects to innovate, test trial and evaluate harm minimisation in industry and central commissioning of evaluation of the self-exclusion schemes. Questions remain as to whether this is an appropriate use of RET contributions or regulatory settlements, whether industry should in fact be investing in its own initiatives and evaluations beyond RET contributions, and whether licensing fees should be used for evaluation of regulatory policy. This is an area which would benefit from more clarity from the Gambling Commission, including articulating its model of regulation in relation to driving up quality and setting best practice, beyond compliance.
- GambleAware has successfully provided a service for industry in commissioning independent evaluations of their initiatives, funded in addition to RET, this is a useful model that offers a central independent coordinating function to collate and share evidence.
- It would be helpful to consider why the suggested central/coordinating body for evaluation would be conceived of as separate to research programmes or centres. A component of what GambleAware is currently pursuing with regard to research centres is to replicate the ‘what works’ model being effectively used across other areas of government. This includes evidence reviews with implications to inform design of policy and practice, identification of gaps, and evaluation of policy and practice to further build the evidence base for action. It would be possible for the Gambling Commission or government or industry to contribute payment for evaluation services from such a centre. As above, GambleAware has a key role to play in supporting such centres by facilitating and brokering relationships across a range of stakeholders, from the research community, industry, government, prevention, treatment and service users, in order to inform the agenda, design and implementation of such a centre, to enable access for researchers and to move evidence into action.
- We welcome the emphasis on implementation and transparent evidence-based ways of measuring progress and transparently holding all parties to account. The absence of an implementation plan and measures for the last strategy has meant RGSB progress reports have been narrative assessments, not measured against pre-defined goals, and risked making judgements that are not evidence-based but influenced by opinion which can of course be partial. It will also be important over time to move from activity measures (i.e. achievement of an action) to some way of assessing outcome or impact.

## Priority area 5: Gambling businesses

- GambleAware has undertaken some projects, with the strong encouragement of the Gambling Commission and RGSB that might have been better owned by gambling businesses. The programme of research to identify, develop and share best practice in player, product and social messaging, led most recently by Revealing Reality, is a good example. Trustees had to impose tight limitations on the work to ensure it fell within the charity’s objectives.
- More generally, we think it is necessary to make a clear distinction between activities that fall within the RET arrangements and are therefore funded from its limited income, and those activities that deliver operator compliance with their duties under their licences. In respect of the latter we would welcome more action led by operators, and hope the vacuum for delivering cross-industry collaboration can be filled other than by GambleAware.

## Licence conditions and codes of practice (LCCP)

- In relation to the proposed change to the LCCP requirements on gambling businesses to contribute financially to research, education and treatment, we support the principle that the recipients of such funding ought to be subject to approval by the Gambling Commission and we agree that contributions ought to be *“focused on actions to reduce gambling harms, and coordinated to enable the most effective delivery of the strategy”*.

- While it can be argued that the British gambling industry, over many years, acted in good faith in financially supporting various RET initiatives, including helping to establish and maintain the National Gambling Helpline and various treatment services, the result was a lack of accountability, poor value for money and with important questions raised about proficiency and effectiveness.
- The need for co-ordination goes to the heart of the current tripartite arrangements and specifically to GambleAware's role as the primary commissioning body for research, prevention and treatment. This is not to say that there are no other competent commissioning bodies available. But self-evidently gambling businesses are not sufficiently expert to undertake this role, individually or collectively and, as we know, many of the pre-eminent research, prevention and treatment institutions that need to be involved if we are to reduce gambling harms across Britain will not take money directly from the industry.
- Public, political and professional confidence in the system for distributing relatively limited monies in a coherent and joined-up fashion requires the industry to step back from commissioning RET.
- Although not perfect, the current arrangements that bind the partnership between GambleAware, RGSB and the Gambling Commission to raise funds and deliver research, prevention and treatment in a coherent and co-ordinated fashion has improved significantly in the last 12 months. However, it would be helpful if these arrangements were more explicitly reflected in the LCCP.
- While the Gambling Commission requires gambling businesses operating in Britain to make an annual financial donation to RET it does not stipulate either the amount to be donated or the organisation/s it should go to on the basis that to do so would effectively 'introduce a statutory levy by the backdoor'. The relevant LCCP states: "*In line with our approach elsewhere, we do not seek to tell you how much your contribution should be, nor do we insist that GambleAware is the beneficiary. However, donating to GambleAware does provide you with a clear audit trail detailing your contribution.*"<sup>25</sup>
- By way of contrast, the Gambling Commission's statement of principles in relation to payments made in lieu of financial penalties as part of a regulatory settlement, states: "*Where payments are made with the aim of addressing gambling-related harm, the presumption is that the money would be paid to GambleAware (formerly Responsible Gambling Trust) to be used for specific agreed purposes that accelerate their commissioning plans.*"<sup>26</sup>
- **The success of the voluntary funding arrangements relies upon clarity of our role, and the Gambling Commission is best placed to promote this unambiguously to the industry and others.**

## Conclusions

There is a great deal of positive progress being made in relation to gambling being better understood as a health issue. A coherent and co-ordinated approach between the Gambling Commission, RGSB and GambleAware is vital to maintain the good work to date.<sup>27</sup>

The current tripartite structure has shown significant and continuous improvement, but must further evolve to address outstanding issues without losing the essence of its primary benefit – the strategic distribution of limited industry funding.

The systems architecture that has been in place for nearly a decade for the delivery of services to members of the public to reduce gambling harms is a delivery model without parallel in other areas of public policy. The work to date has demonstrated the extent of achievements that can be realised in a partnership between government, the statutory sector and the charitable sector with industry funding. In theory we have the beginnings of a national, regional and local infrastructure to reduce gambling harms across Britain.

<sup>25</sup> <https://www.gamblingcommission.gov.uk/for-gambling-businesses/Compliance/General-compliance/Social-responsibility/Research-education-and-treatment-contributions.aspx>

<sup>26</sup> <https://www.gamblingcommission.gov.uk/PDF/statement-of-principles-for-determining-financial-penalties.pdf>

<sup>27</sup> <https://about.gambleaware.org/media/1836/gamble-aware-annual-review-2017-18.pdf>

The voluntary system of funding allows the industry to restrict, withdraw or redirect funding to frustrate the strategic and sustainable delivery of the proposed strategy. There is a clear and present danger that the industry is increasingly going back to direct funding of multiple organisations in a strategic vacuum. The introduction of a statutory levy or alternative source of guaranteed funding mechanism would remove this concern.

As we have argued, a compulsory levy would produce a consistent and predictable flow of funding, and significantly improve transparency and public confidence in the commissioning process overall. A compulsory levy would have the additional advantage of being fairer since all gambling businesses would be obliged to pay it. However, we must deliver our goals under the funding system as it is, not as we might hope it to be. In this light, it is essential to re-establish clarity for all concerned regarding the roles and responsibilities originally set out in the 'statement of intent' published in 2012.

In the meantime, we welcome the Gambling Commission's review of the current arrangements for funding RET. We hope it will lead to an increased and more reliable source of funding for our commissioning of the core elements of the proposed national strategy, and will at the same time allow for additional, innovative contributions from other third sector and government bodies.

Our priority is to ensure that sufficient core funding is raised through the current voluntary system and is strategically allocated in accordance with the priorities set by the Gambling Commission. We would welcome additional funding towards RET as a whole, and we are excited by the prospect of working alongside, and in collaboration with, the multiple organisations it will take to deliver this at greater scale. However, our essential task is to ensure the core requirement is delivered, and to set the standard for quality across all three areas of RET. In the last two years, we have demonstrated our independence, strengthened governance arrangements, increased capacity, and sharpened our focus. We now have a solid foundation to deliver our commissioning plans more efficiently and more effectively.

Kind regards,



Marc Etches  
**Chief Executive**