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## **LICENSING SUB-COMMITTEE**

**TUESDAY, 14 NOVEMBER 2023**

## **SUPPLEMENTARY INFORMATION**

Agenda Item 10 – Application for a Premises Licence (Betting(Other)) under the Gambling Act 2005 for Boylesports, 86A Queen Street, Morley, LS27 9BP

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## Boyles Sports Hearing – Additional Evidence

### Advertising exposure

An umbrella review (McGrane et al., 2023) with 8 systematic reviews and 74 unique studies included found consistent evidence of a causal relationship between exposure to gambling advertising and more positive attitudes towards gambling, a higher intention to gamble, and higher gambling activity at an individual level as well as a population-wide level. A dose-response was observed where the greater the exposure to advertising, the greater the effect of participation and harm and this evidence was strongest for children and vulnerable adults. Reducing exposure to gambling advertising – including shop windows and shop curtilage advertising – by children and vulnerable adults is an evidence-based approach to reducing harm. Lowering exposure to prompts to gamble can protect children and vulnerable adults from gambling-related harms.

### Deprivation and gambling-related harm

A review of evidence of gambling-related harms by the Office for Health Improvement and Disparities (2023) found that although most socio-economically deprived and disadvantaged groups in England have the lowest gambling participation rates they experience the highest levels of harmful gambling and they are also the most susceptible to harm. OHID (2023) found that those at the greatest risk of gambling-related harms are more likely to be unemployed and living in more deprived areas, have poor health, low life satisfaction and wellbeing, and have an indication of probable psychological health problems. The proximity of a gambling premise to vulnerable adults is a risk which can be mitigated through the proposed conditions in the representation.

### Economic cost of gambling-related harm

[The-economic-cost-of-gambling-related-harm-in-England\\_evidence-update-2023.pdf](https://publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1151112/The-economic-cost-of-gambling-related-harm-in-England_evidence-update-2023.pdf)  
(publishing.service.gov.uk)

Table 1. Estimated excess cost of harm associated with gambling in England, by type of harm and type of cost

Type of harm (or domain)	Sub-domain	Cohort	Government (or direct) costs (£ millions)	Wider societal (or intangible) costs (£ millions)	All costs (£ millions)
Financial	Statutory homelessness	Adults	£49.0	N/A	£49.0
Health	Deaths from suicide	Adults	N/A	£241.1-£961.7	£241.1-£961.7
Health	Depression	Adults	£114.2	£393.8	£508.0
Health	Alcohol dependence	Adults	£3.5	N/A	£3.5
Health	Illicit drug use	17 to 24 years	£1.8	N/A	£1.8
Total health harms	All health sub-domains	All health cohorts	£119.5	£635.0-£1,355.5	£754.4-£1,475.0
Employment and education	Unemployment benefits	Adults	£77.0	N/A	£77.0
Criminal activity	Imprisonment	Adults	£167.3	N/A	£167.3
Excess cost (£ millions)	All sub-domains	All cohorts	£412.9	£635.0-£1,355.5	£1,047.8-£1,768.4

Notes: Figures may not sum due to independent rounding. N/A means that analysis was not undertaken.

'Table 1 shows our estimate that the annual excess direct financial cost to

government associated with harmful gambling is equivalent to £412.9 million. It also shows that our estimate for the annual societal value of health impacts is equivalent to between £635 and £1,355.5 million (in 2021 to 2022 prices). This provides a combined estimate of approximately £1.05 to £1.77 billion.’

## Healthy Highstreets

In June 2023 Leeds became a Marmot City joining a national 2-year project to tackle health inequalities [New partnership aims to deliver a fairer and healthier Leeds](#) . The programme focuses on 'social determinants' – the circumstances in which people are born, grow, live, work and age – and which give them the right building blocks for good health.

The Marmot Review (2020)<sup>1</sup> sets out the features of an unhealthy high street and this includes higher density of gambling outlets which can contribute to poorer health including addiction and poorer mental health.

[the-marmot-review-10-years-on-full-report.pdf \(instituteofhealthequity.org\)](#) (p106, Table 3.5)

Table 3.5. Features of an unhealthy high street

High street feature	Inequalities	Direct impacts on health	Indirect impacts on health
<b>Lack of diversity in retail offer</b>	Higher density of payday loan, alcohol, <b>gambling</b> and fast food outlets in areas of deprivation. Impacts on less mobile populations disproportionately.	Increased risk of obesity, diabetes, cardiovascular disease and certain cancers. Higher levels of alcohol addiction and alcohol-related harm and an increased risk of depression, trauma, heart disease and stroke.	Increased likelihood of poor mental health, including depression, cognitive impairment and dementia linked to social isolation. Increased levels of stress and poor mental health associated with financial insecurity. Poor mental health of family members, associated with alcohol addiction and <b>gambling</b> addiction.

## Highstreet betting

Harmful gambling may include use of both online and land-based gambling opportunities and products. Harmful gamblers may use a range of different products both online and land-based. Therefore, it is important to ensure that identification of gambling-related harms and referral to treatment is available in land-based premises.

‘Harmful gambling has a different activity profile to general gambling. It includes low National Lottery participation and high participation in online gambling (including online slots), casino and bingo games, electronic gambling machines in bookmakers, sports and other event betting, betting exchanges and dog racing.

Harmful gamblers are far more likely to participate in 7 or more gambling activities. Overall participation in online gambling for at-risk gamblers (23.4%) was more than double that of the general population (9.4%) in 2018.'

[Gambling-related harms evidence review: summary - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/research-data-and-analysis/gambling-related-harms-evidence-review)

### Local authority powers

The DCMS white paper 'High Stakes: Gambling Reform for the Digital Age' (2023) published in April advised that:

- 'Licensing authorities have an important regulatory role alongside the Gambling Commission in licensing local premises. Empowering local leaders to take decisions in their area is a priority for this government and **we support them in the use of the broad powers which the planning and gambling regulation frameworks give them to set licence conditions and consider applications.**'
- 'Licensing authorities have a wide range of powers under the 2005 Act to refuse or place conditions on applications for gambling premises licences where there is cause for concern, and we fully support use of these powers.'

The setting of licence conditions is encouraged by Central Government in this report.

### Treatment services

Leeds City Council primarily works with the NHS Northern Gambling Service and GamCare Yorkshire & Humber as the main gambling treatment services. These services cover a wider geography than just Leeds.

### Triage and referral to effective treatments

It is important that people with gambling disorder receive the right intensity of support for their problems and are not referred between many different services as this could cause treatment delays and dropouts.

[Triage and completed treatments \(gamblingcommission.gov.uk\)](https://www.gamblingcommission.gov.uk)

"a two-stage triage process is not consistent with established best practice as it means that an individual can pass through several stages until a clear referral can be made. Individuals can move in and out of harm quickly – so a timely triage system is important. Evidence from other addictions services suggests that access to highly specialist expertise at the triage stage can lead to better outcomes in the longer term".

**NHS Northern Gambling Service** covers the whole of the North of England including the north Midlands. This covers 20 current Boyles Sports sites (not including proposed site in Leeds).

Information from NHS [website](https://www.nhs.uk):

*We are a specialist NHS service and as such we have a set of referral criteria. We have been commissioned to provide support for people with:*

- *Gambling Addiction (less severe problems are usually referred to GamCare)*
- *Long term gambling problems with little or no abstinence*
- *Mental health difficulties such as depression, anxiety, trauma and suicidal feelings*
- *Alcohol/drug misuse or other compulsive behaviours*
- *Concerns about risk of harm to self or others*
- *Homelessness or unstable housing or chronic social isolation*
- *Frequent involvement with criminal justice system or history of serious offending*
- *Developmental problems, such as attention deficit hyperactivity disorder (ADHD), autism spectrum disorder (ASD) or difficulties with cognitive or intellectual functioning*
- *Adverse experiences in childhood that may underlie the gambling problem*
- *Serious physical health difficulties*

As outlined, the NHS Northern Gambling Service covers many more specialist areas of gambling treatment and are able to support people experiencing the most severe levels of gambling-related harm. It is therefore vitally important that this service is promoted in order to ensure that those most at risk are able to access the information they need to self-refer or be referred by staff.

**GamCare Yorkshire and Humber**, in partnership with NECA, cover the whole of the Yorkshire and Humber region. This covers 3 current Boyles Sports sites (not including proposed site in Leeds).

Their website advises:

We offer a range of support which can be provided face-to-face, online or over the phone. We can support gamblers as well as those who are affected by the gambling behaviour of a family member or friend. All of our services are free of charge and confidential.

## References

What is the evidence that advertising policies could have an impact on gambling-related harms? A systematic umbrella review of the literature. Public Health. 2023 Feb;215:124-130. doi: 10.1016/j.puhe.2022.11.019. Epub 2023 Jan 26. PMID: 36725155.

OHID (2023) [Gambling-related harms evidence review: summary - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/118448/gambling-related-harms-evidence-review-summary.pdf)

OHID (2023) [The-economic-cost-of-gambling-related-harm-in-England evidence-update-2023.pdf \(publishing.service.gov.uk\)](https://publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/118448/the-economic-cost-of-gambling-related-harm-in-england-evidence-update-2023.pdf)

DCMS (2023)

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/1153228/1286-HH-E02769112-Gambling\\_White\\_Paper\\_Book\\_Accessible1.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1153228/1286-HH-E02769112-Gambling_White_Paper_Book_Accessible1.pdf)

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