

Briefing Note

Gambling Harm Reduction



This briefing note has been produced on request from EHC Scrutiny Board in response to a publication from Centre of Governance and Scrutiny in partnership with the Gambling Commission titled “10 questions to ask if you are scrutinising gambling harm”. As well as providing the ten questions and several supplementary questions, this document also provides valuable background information for each question topic.

Leeds City Council (LCC) takes the issue of gambling harm very seriously. The measures and provisions described in the responses to the ten questions have allowed the council to lead in this area, and the first step of which was commissioning research into identifying those vulnerable to gambling harm. This research provided the catalyst for further work, including supporting local treatment services, providing education on interventions for front line staff with support organisations, running marketing campaigns to publicise support services (Beat the Odds), undertake further research through school surveys to understand children’s experience with gambling and so on.

Background

In 2016, LCC commissioned Leeds Beckett University to [undertake research into ‘problem gambling’ in Leeds](#). This was due to the lack of research available nationally in this area and the need to establish a baseline of gambling harm in the city to understand the impact of land-based and online gambling on the local population. The research provided useful insight and identified that Leeds is likely to have around twice the national average ‘problem gamblers’ (people experiencing severe gambling harm) and that there was insufficient gambling treatment available in the city. This research was the starting point for the council to take a partnership approach to tackling harmful gambling in Leeds, through working with the NHS Northern Gambling Service, GamCare and Northeast Council on Addictions (NECA) to establish a local treatment offer.

As part of this work, the Leeds Gambling Harms Group was established, bringing together key partners in the city, including advice services, universities, treatment service and Council services. This partnership collectively delivers projects that address gambling harms across a range of key areas.

Question 1: How well does the council understand the scale of gambling harm locally, and the impact on communities and council spend?

In 2016 LCC commissioned Leeds Beckett University to undertake research into problem gambling in Leeds ([Problem Gambling in Leeds; Kenyon, Ormerod, Parsons and Wardle, 2016](#)). This research focussed specifically on gambling harm in Leeds and established that Leeds and areas like Leeds are broadly likely to have problem gambling rates at double the national average. The research also looked specifically at identifying groups in society that could be considered vulnerable to, or at higher risk of, problem gambling. The aim was to provide a baseline and guide funding of projects to prevent and mitigate adverse effects of gambling harms.

The research highlighted that there are approximately 10,000 'problem gamblers' in Leeds (1.8% of the adult population) and a further 30,000 people (5/6% of adult population) who may be at risk of harm from gambling. This is around double the national average. The research also highlighted a lack of support services in the city.

In addition, the council also collects data in relation to children and young people. There are currently four questions in the Leeds 'My Health, My School' survey, which is an annual health survey aimed at children and young people in primary, secondary and post-16 settings. In 2020-21, 24% of secondary pupils reported they had gambled within the last 12 months. Skin betting through gaming was highlighted as the most popular type of gambling in this age group (11-16 years).

Question 2: How does the council recognise gambling harm as a public health issue and take a whole-systems approach to tackling it?

Following on from the research undertaken in 2016 the Council's Financial Inclusion Team and Public Health established the Leeds Gambling Harms Group. This working group looked at how best to implement change to mitigate the harm of problem gambling. This group included officers from all relevant part of the council, but also external partners such as Citizens Advice, GamCare, and the city's universities.

LCC Public Health officers set up and led the Yorkshire and Humber Harmful Gambling Working Group in 2018. The coordination of this group transferred to the Office for Health Improvement and Disparities (OHID, formerly known as Public Health England). LCC officers continue to contribute to this group. In 2021, PHE (Y&H) secured a 3-year £800k grant from the Gambling Commission for a regional gambling harm reduction programme, which LCC Public Health have played a key role in shaping.

Question 3: How does the council, and its partners, identify and engage with those who are most at risk from gambling harm, and what is being done to assist the most vulnerable?

As already discussed, the research into problem gambling was the most important tool for identifying those groups of people most at risk, and this research informs the work that we, as a council, do to mitigate the harms.

Public Health, Financial Inclusion and Licensing colleagues are continuing to work closely with GamCare's Leeds Community Gambling Service (LCGS) and the NHS Northern Gambling Service. GamCare is a UK charity which provides information and support to anyone negatively affected by gambling.

LCGS and the NHS Service were established in 2019, building on needs identified by the Leeds Beckett research and strong partnership work across Leeds and Yorkshire & Humber. Services are co-located on LCC premises. Examples of joint working include:

- LCGS Engagement Plan to include outreach in low income, ethnically diverse areas of Leeds. Engagement work has taken place in Armley, New Wortley and Harehills, with a particular focus on South Asian communities and awareness raising with businesses such as barber shops where community members congregate and socialise.
- In 2022, LCGS started to provide in-reach into Armley Prison, as research suggests that 'problem gamblers' are 4.4 times more likely to be in prison compared to the general population.
- Gambling awareness training for students and staff from Colleges and Universities

- Joint communications/campaign messages during Safer Gambling Week and in parallel with major sporting events such as Cheltenham Festival and Football World Cup.
- Work with new gambling premises, such as Merkur Slots in Harehills, as per conditions agreed as part of their licensing agreement.

It should be noted that Leeds City Council do not directly commission LCGS, or NHS Northern Gambling Service so has less influence on training, treatment, and support provision. The commissioners are the national grant-making charity GambleAware and NHS England (part-funding for NHS Service only). However Leeds City Council provides and funds office accommodation for the two services including the back office and client facing services being based at Merrion House and some Community Hubs. They are co-located with the Financial Inclusion Team.

Financial Inclusion and Public Health officers meet regularly with Leeds Community Gambling Service to support their work streams, guide outreach, co-deliver training and raise awareness of their offer within the city.

Question 4: How does the council, and its partners, raise awareness of gambling harm in the community?

Following the publication of the Leeds Beckett University research, the Leeds Gambling Harms Group was set up. This group brings together public and third sector agencies that work collectively on tackling gambling harms.

Discussions within the Leeds Gambling Harms Group have led to the following work areas, led by the Financial Inclusion Team and Public Health:

- Beat The Odds Marketing and Communications Campaign
- Training and awareness sessions – both internally and externally
- Improving the provision of support in the city, with GambleAware providing funding from 2019 to 2023 for the NHS Northern Gambling Service and Leeds Community Gambling Services which is run by GamCare.
- Developing a regional network for Public Health leads around gambling harms
- Deliver training and communications around children and young people’s gambling and gaming.
- Developing internal HR guidance for staff around gambling harms, with an ambition to roll out across other organisations in Leeds.

LCC are also working to deliver training and communications around children and young people’s gambling and gaming within education settings. Public Health convene a training sub-group, which focuses specifically on the children and young people’s workforce, including education providers. To date this has been supported by GamCare, the Young Gamers and Gamblers Education Trust (YGAM) and the NHS Northern Gambling Service. However, in February 2023 there are plans to deliver a pilot ‘train the trainer’ programme to targeted schools in Leeds. This will be delivered by the charity Gambling with Lives, who are a non-industry funded charity who offer training which incorporates the views of those with lived experience and it will be delivered to Personal, Social, Health and Economic education (PSHE) leads.

Targeted communications to raise awareness of gambling among children and young people has included messaging for Children Mental Health week and the World Cup. Gambling information has also been included on the MindMate website for children and young people and a LCC One Minute Guide has been created to raise awareness amongst the LCC workforce.

Question 5: How does the council tackle gambling harm through its licensing policy?

Licensing of gambling premises is regulated by the Gambling Act 2005. The legislation provides the framework under which premises are licensed, and the basic objectives underpinning the legislation. However, the legislation also provides that in exercising their functions, a licensing authority shall aim to permit the use of premises for gambling in so far as the authority think it is in accordance with codes of practice, Gambling Commission guidance, that it reasonably consistent with the licensing objectives and in accordance with the authority's statement of licensing policy. Notably, in these principles the legislation explicitly put the licensing policy fourth in the list of considerations.

Leeds City Council, as the licensing authority for Leeds in respect to premises licences under the Gambling Act, does publish a statement of licensing policy. In this document, gambling harm is discussed in detail in the section relating to the objective "Protection of children and vulnerable adults" on pages 19 to 24. The policy describes the research undertaken on behalf of the authority into gambling related harm by Leeds Beckett University in 2016 and identifies those persons who are vulnerable to gambling harm. It goes on to provide examples of measures that could be offered by applicants to mitigate harm, including:

- Reduced opening hours.
- Working with local authority and treatment partners in training staff in gambling harm prevention.
- Training for staff members which focuses on building an employee's ability to maintain a sense of awareness of how much (e.g. how long) customers are gambling, as part of measures to detect people who may be vulnerable.
- Training for staff members which focuses on identifying and providing support to vulnerable people
- Restrict single manning operations (no lone working) due to concerns over timely age verification, safety of staff, supervision, ability to comply with company policies on problem gambling, and the ability to provide brief interventions.
- Use of security to minimise risk of disturbances including CCTV, SIA licensed security presence at the venue.
- Outline the amount and content of gambling harms support advertising that should be in the premises, including advertising of local treatment support.
- The level of detail that will be collected in the incident log, including interventions made by staff to support customers who are gambling problematically. Define how often this information should be shared with the local authority.
- Provision of leaflets aiding problem gamblers should be available on gambling premises in a location that is both prominent and discreet, such as toilets
- The administration and enforcement of self-exclusion schemes
- Windows, entrances, and advertisements to be positioned or designed not to entice children or vulnerable people.

In addition, it is a requirement for all applicants to complete a local area risk assessment. This is a requirement under the Gambling Commission Licence Conditions and Codes of Practice. The authority has provided specific guidance relating to the local area risk assessment which has the protection of children and vulnerable persons at its core.

Public Health and Financial Inclusion worked with the licensing authority to develop a mapping tool to inform local area risk assessments. This mapping tool, readily available to all on request, provides an indication of cumulative impact through layering of area specific data relating to crime and

disorder, vulnerable children and adults and has been used successfully to advise Licensing Committee on the area.

However, it must be noted that the number of licence applications received by the licensing authority is very low – perhaps one application for a new licence every two years. Therefore the level of impact the licensing authority can achieve through licensing alone is small. As noted in the CFGS publication, the wide availability of remote gambling via phone apps or websites, advertised and marketed at every sporting event and on TV and more control and regulation of that marketplace is needed.

Question 6: How does the council tackle gambling harm through its planning policy?

In 2015 betting shops, along with pay day loan companies were put into a planning class of their own. This sui generis use class meant that betting shops were no longer able to take over empty bank buildings without having to apply for a change of use under the Town and Country Planning Act. This afforded the council more control over the placement of new betting shops on high streets. However since 2017 the change of use applications has been almost entirely the other way, with change of use being sought from betting shop (sui generis) to other use classes. In 2017 there were 3 applications to change the use from a betting shop, 1 construction of a new betting shop and 1 change of use to a betting shop. Since then there have only been applications changing the use to something other than betting (15 applications). This correlates with a change in the stake and prizes of gambling machines which was implemented in 2018. This change has led to the closure of betting shop premises in Leeds.

Question 7: How has the council reviewed its own actions in promoting or normalising potentially harmful gambling activities and products?

The Financial Inclusion Team and Public Health have worked together on human resources guidance on Gambling Harms, based on good practice developed in Sheffield which will be implemented by Leeds City Council. This guidance builds on existing wellbeing initiatives for Leeds City Council employees and recognises the council is one of the area's largest employers.

The guidance aims to support employees who are worried about their own gambling but equally those that are impacted by the gambling of someone close to them. Research shows that between 6-10 other people are impacted for each 'problem gambler'. This may also include children.

The HR guidance sits alongside other workplace wellbeing guidance and policies, in particular relating to alcohol, financial wellbeing, and mental health, as the Public Health England evidence review showed that these are strongly correlated with harmful gambling. Men are disproportionately affected, particularly those gambling online. There is also (less strong) evidence around the links with domestic violence including financial abuse.

The 'harmful' gambling terminology has been chosen deliberately, instead of 'addiction' and 'problem gambling', as staff may perceive they do not fit that description and therefore not engage in a conversation. The guidance promotes a 'trigger question' rather than validated screening tools which are generally used by clinicians or gambling support services.

This guidance aims to support both managers, union reps/stewards, staff champions (e.g. Wellbeing Champions, Safeguarding Lead Officers, Mental Health First Aiders) and all staff to direct Leeds City Council colleagues to the most appropriate support as early as possible, so that they can receive the

appropriate support and ultimately be well at work. This might be those that gamble themselves, or those that are the affected by the gambling of someone close to them.

The document provides useful tools to guide conversations with colleagues and outline routes to support. We have consulted with HR, Occupational Health, Trade Unions, Adults Social Care senior managers (in relation to safeguarding) IT, Payroll, NHS Northern Gambling Service, Leeds Community Gambling Service, and people with lived experience of gambling harms, including Council staff to ensure that the document is robust and accurately reflects all relevant Council processes.

In addition LCC Corporate Communications have confirmed that the council does not allow the promotion of gambling across LCC channels or brands. The main reason for this is that the council cannot be seen to endorse commercial products or services.

Question 8: How is the council supporting and working with relevant public, private and civic actors in the area towards integrating gambling harm treatment services?

The Council through Public Health, Financial Inclusion and Entertainment Licensing are continuing to work closely with GamCare's Leeds Community Gambling Service (LCGS) and the NHS Northern Gambling Service. GamCare is a UK charity which provides information and support to anyone negatively affected by gambling. LCGS and the NHS Service were established in 2019, building on needs identified by the Leeds Beckett research and strong partnership work across Leeds. Services are co-located on LCC premises. Examples of joint working include:

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- Work with new gambling premises, such as Merkur Slots in Harehills, as per conditions agreed as part of their licensing agreement.

Public Health and Financial Inclusion have produced an HR Guidance document on Gambling Harms, based on good practice developed in Sheffield, to be implemented by Leeds City Council. The guidance builds on existing wellbeing initiatives for LCC employees.

Licensing has updated its Statement of Licensing Policy with reference to groups and communities most vulnerable to gambling harms and comorbidity, with the expectation of new premises to consider this data as part of local area risk assessments.

Leeds City Council officers are represented on the Association of Directors of Public Health (Yorkshire & Humber) Gambling Related Harms 'Community of Improvement'. PHE (Y&H) have secured a 3-year £800k grant from the Gambling Commission for a regional gambling harm reduction programme.

Question 9: How is gambling harm recognised in the council’s wider commitment to reducing inequalities and an equitable post-covid recovery?

Reducing gambling harm is not formally recognised as a strategic priority for the council in relation to reducing inequalities. However, due to its strong correlation with financial difficulty, poor mental health, and alcohol misuse in particular, the council may consider gambling harm as an indirect contributor to inequalities.

Gambling harm was a concern through the COVID period, especially as support services became restricted due to social distancing measures. Similarly there is concern that gambling participation had shifted from land-based premises to online and with that, reduced opportunities for face-to-face customer intervention, where identified by the operator(s).

Question 10: How can the council learn lessons from the actions taken by other authorities on tackling gambling harms, or from tackling other public health issues?

Council officers were consulted by the Centre for Governance and Scrutiny as part of the development of the document to which this Briefing Note is responding. Since the publication of the Leeds Beckett research in 2016, council officers have been advising and liaising with other local authorities across the country on the Leeds approach to reducing gambling harm. A recent example was that officers advised Barnsley Council, as part of their Scrutiny Inquiry on Gambling Harms and Northeast Lincolnshire Council on their marketing campaign. In addition, officers engage with national organisation such as GambleAware and the Gambling Commission on an ad-hoc basis.

Examples of regional and national fora that council officers contribute to include:

- Association of Directors of Public Health (Yorkshire & Humber) Gambling Related Harms ‘Community of Improvement’
- Strategic Steering Group overseeing the 3-year Gambling Commission funded Yorkshire and Humber gambling harm reduction programme
- Local Government Association Licensing Forum
- Institute of Licensing Northeast Regional meetings and training days
- Core Cities Licensing Group (with Westminster, Manchester, Birmingham, Brighton and Hove, York, Selby)
- Research advisory groups such as King’s College London’s research into gambling harm ‘trigger questions’ used by local authority contact centres in England

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