Public Health Association of Australia comments on Draft Strategy for Gambling Harm Prevention in the ACT

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# Contents

- **Preamble** ........................................ 3
  - The Public Health Association of Australia ........................................ 3
  - Vision for a healthy population ......................................................... 3
  - Mission for the Public Health Association of Australia .......................... 3
- **Introduction** ........................................ 4
- **PHAA Response to the consultation paper** ....................................... 4
  - Overall .............................................................................................. 4
  - Actions .............................................................................................. 4
  - Online wagering ................................................................................. 4
  - Part 4 – Background ........................................................................... 5
    - Section 4.1 – A snapshot of gambling in the ACT ................................ 5
    - Section 4.2 – What is gambling harm .............................................. 5
    - Section 4.5 – What contribute to harm ............................................. 5
  - Part 6 – A public health approach to gambling ..................................... 5
    - Section 6.4 – Targeted and tailored initiatives .................................. 5
  - Part 8 – Underpinning principles ....................................................... 5
  - Part 9 – Strategy objectives ............................................................... 6
  - Part 15 – Strategy milestones and timelines ........................................ 6
- **Conclusion** ..................................................................................... 7
- **References** .................................................................................... 8
Preamble

The Public Health Association of Australia

The Public Health Association of Australia (PHAA) is recognised as the principal non-government organisation for public health in Australia working to promote the health and well-being of all Australians. It is the pre-eminent voice for the public’s health in Australia.

The PHAA works to ensure that the public’s health is improved through sustained and determined efforts of the Board, the National Office, the State and Territory Branches, the Special Interest Groups and members.

The efforts of the PHAA are enhanced by our vision for a healthy Australia and by engaging with like-minded stakeholders in order to build coalitions of interest that influence public opinion, the media, political parties and governments.

Health is a human right, a vital resource for everyday life, and key factor in sustainability. Health equity and inequity do not exist in isolation from the conditions that underpin people’s health. The health status of all people is impacted by the social, cultural, political, environmental and economic determinants of health. Specific focus on these determinants is necessary to reduce the unfair and unjust effects of conditions of living that cause poor health and disease. These determinants underpin the strategic direction of the Association.

All members of the Association are committed to better health outcomes based on these principles.

Vision for a healthy population

A healthy region, a healthy nation, healthy people: living in an equitable society underpinned by a well-functioning ecosystem and a healthy environment, improving and promoting health for all.

The reduction of social and health inequities should be an over-arching goal of national policy and recognised as a key measure of our progress as a society. All public health activities and related government policy should be directed towards reducing social and health inequity nationally and, where possible, internationally.

Mission for the Public Health Association of Australia

As the leading national peak body for public health representation and advocacy, to drive better health outcomes through increased knowledge, better access and equity, evidence informed policy and effective population-based practice in public health.
Introduction

PHAA welcomes the opportunity to provide input to the Strategy for Gambling Harm Prevention in the ACT. The PHAA strongly supports the public health approach taken in the draft Strategy, including the broad definition of gambling harm, to encompass harm to people surrounding the gambler such as family and friends, as well as the broader community; the principle of gambling harm as a continuum; and recognition of the problem as being broader than simply an issue of personal responsibility.

PHAA Response to the consultation paper

Overall

Actions

The draft Strategy provides a solid foundation of public health principles to underpin action on preventing gambling harm in the ACT. Vital to the success of the Strategy will be the details of specific targets, actions, responsibilities, reporting and accountability mechanisms, timelines and funding.

The currently listed elements of the annual programs of work (p.22) are priority areas for action, activities, outputs and outcomes, key indicators of success and milestones, plus the separately listed monitoring and evaluation (p.23).

The draft Strategy refers a ‘communication plan’, ‘stakeholder engagement plan’, and ‘annual programs of work’. It would be helpful for the Strategy to clearly state whether these will be instead of, or part of, an Action Plan and exactly what elements they will contain.

PHAA recommends that responsibilities, timelines and funding also be explicitly included.

Online wagering

The draft Strategy refers to online wagering expenditure increasing since 2004, in contrast to other forms of gambling. It also refers to the lack of a statistically significant decrease in the number of Canberrans experiencing high levels of harm.

There are different risk factors associated with online wagering compared with land-based gambling, including ease of online access and the intangibility of online money, compared with social rituals, and the influence of alcohol.\(^1\) Evidence is emerging that the situational risk factors such as availability, accessibility and affordability are particularly attractive for online gambling, which may indicate an increased potential for harm from this form of gambling.\(^2\) PHAA recommends that online wagering be specifically included in this strategy.

For practical reasons the regulation of online wagering is necessarily a federal government responsibility, however the states and territories should be involved through measures within their competencies such as assisting to restrict and reduce advertising, and working with sporting organisations to provide sponsorship alternatives.

The Strategy should explicitly include a commitment to implementing the National Consumer Protection Framework for Online Wagering in Australia – National Policy Statement, released in November 2018.
Part 4 – Background

Section 4.1 – A snapshot of gambling in the ACT

This section of the draft Strategy provides some contextual data on gambling participation and expenditure in the ACT. Evidence is presented of falling expenditures on gambling activities on races, poker machines, casino and lotteries.

It would be helpful to provide an indication of internet gambling expenditure by ACT residents. This has been estimated at about $20 million per annum, which is similar to casino, lotteries and racing expenditure. With poker machines continuing to represent the bulk of the gambling expenditure in the ACT, and the majority of gambling harm, the Strategy should note that the ACT has the second highest density of electronic gaming machines (poker machines) per capita in Australia at 14.7, compared with the average for Australia of 10.5.

Section 4.2 – What is gambling harm

This section of the draft Strategy provides information on the types of harm associated with gambling. It may be helpful to include estimates that each high risk gambler affects six other persons on average, each moderate risk gambler affects three others, and each low risk gambler affects one other person.

This section also refers to the broader community costs of gambling harm. It may be helpful to reference the estimated $214.5 million per annum social harm costs associated with gambling harm in the ACT.

Section 4.5 – What contribute to harm

This section of the draft Strategy notes that different types of gambling activities are associated with different types and amounts of harm. On that basis, PHAA recommends that the Strategy clarify that targeted and tailored initiatives in the annual programs of work include programs and activities for specific types of gambling and gambling harm.

Part 6 – A public health approach to gambling

Section 6.4 – Targeted and tailored initiatives

This section of the draft Strategy specifies universal, selective and indicated levels or groups to target. These may align with types of prevention: primary, secondary and tertiary respectively. The examples provided of universal and selective measures (green boxes, p.15) relate to awareness strategies. It may be helpful to outline examples of other strategies such as access. For example, regulation of operating hours of poker machines or number of permitted machines per venue are universal measures; and time limits or notifications and pre-committments on poker machines are selective measures.

Part 8 – Underpinning principles

The PHAA supports the underpinning principles outlined in the draft Strategy:

- Gambling harm is any negative consequence, caused or made worse by gambling
- Gambling harm lies on a continuum
- Gambling activity is not homogenous; some products are more harmful than others
- A multifaceted approach
- Targeted and tailored initiatives
- A comprehensive and coordinated approach
Part 9 – Strategy objectives

The PHAA supports the strategy objectives:

- ACT Government policy prevents and reduces gambling harm
- Government, the gambling industry, communities, families and individuals better understand the range of harms from gambling that affect individuals, families and communities
- Ongoing development, maintenance and evaluation of accessible, responsive and effective initiatives
- Gambling environments are designed to prevent and reduce gambling harm
- Supporting the evidence base for gambling harm prevention strategies and initiatives.

However, PHAA recommends that the expression of some of these objectives be strengthened.

There also some specific additional objectives that should be adopted:

- Specify a goal to denormalise gambling (particularly with young people)
- Specify a goal to divert vulnerable people from pathways to gambling venues.
- Address the manner in which different social groups engage with and experience harm from different gambling products, considering in particular gender differences in regard to gambling.

The voluntary Code of Practice is insufficient for preventing harm. The ineffectiveness of voluntary codes of practice has been demonstrated repeatedly in other areas of public health such as the marketing of alcohol and unhealthy foods. It should be replaced with mandatory regulation.

Research and evaluation should not be funded by the gambling industry, and industry should not be involved in setting the research agenda. Grant programs should require disclosure of previous funding sources, and exclude researchers who have obtained funding from the gambling industry in the recent past (for example, the previous five years).

Part 15 – Strategy milestones and timelines

The draft Strategy milestones and timelines (p.24) include feedback and information sessions with government, industry and community services sector during October-December 2018 on the draft Strategy. The first half of 2019 sees the development of communication and stakeholder engagement plans, and the 2019-2020 annual program of work.

It is not clear whether there will be an opportunity for consultation and feedback on the communication and stakeholder engagement plans and the 2019-2020 annual program of work. PHAA recommends that this be built into the strategy milestones and timelines.
Conclusion

PHAA strongly supports the broad directions of the draft Strategy for gambling harm prevention in the ACT, with the clear focus on a public health approach. However, we are keen to ensure effective implementation in line with this submission. We are particularly keen that the following points are highlighted:

- The public health approach and shift away from stigmatising and blaming the individual is welcome
- Annual programs of work must include responsibilities, timelines and funding
- Online wagering should be specifically included in the Strategy with a commitment to implementing the National Consumer Protection Framework for Online Wagering in Australia – National Policy Statement

The PHAA appreciates the opportunity to make this submission and the opportunity to contribute to the prevention and reduction of gambling harm in the ACT.

Please do not hesitate to contact PHAA should you require additional information or have any queries in relation to this submission.

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14 January 2019
References


