



# The Association of Directors of Public Health

## Policy Position: Gambling

### As a priority, the Government should:

- Adopt a new Gambling Act based on core public health principles.
- Strengthen local government's ability to address gambling harm.
- Introduce a gambling advertising, promotion, and sponsorship ban.

## Background

### Gambling harm

- In the UK, 37% of people gamble online and 29% do so in person.<sup>1</sup> 1.4 million are experiencing harm, with a further 1.6 million 'at risk' of experiencing harm.<sup>2</sup>
- Men are more likely to gamble than women. This difference is most obvious for online activity where, excluding lottery draws, 21% of men participated over a four-week period, compared to 12% of women.<sup>3</sup>
- Gambling harm is most prevalent among people with poor health and wellbeing and in deprived communities. Those at the greatest risk tend to be from lower socioeconomic backgrounds, facing higher unemployment rates and living in the most deprived areas.<sup>3</sup>
- Gambling harm can be indirectly experienced by an individuals' family, friends, community, and wider society. Of those who reported someone close to them gambled, 5.3% had experienced one or more severe consequences, including financial difficulties, relationship conflict and family breakdown, and increased risk of suicide and domestic violence.<sup>4,5</sup>
- Public understanding of the risk of harm has been undermined by a narrative promoted by the gambling industry that if people participate in moderation, it is enjoyable and safe.

### Current gambling environment

- The current gambling environment is shifting. Land based gambling remains a significant threat to public health, as it is highly accessible, premises are often clustered in more deprived areas, and it normalises the presence of gambling as a part of people's daily life.
- The rise of online gambling presents a unique and novel challenge. Gambling products and the tactics used to market them have transformed significantly in recent years to continue to retain their userbase, with a shift to online play presenting a 24/7 opportunity and global event-driven marketplace.<sup>6</sup>
- People's lives – both online and offline – are increasingly saturated with advertising.
- A common 'playbook' of tactics, which includes the use of advertising, aimed at increasing profits at the expense of the population's health, has been adopted from the tobacco industry and identified across a range of different industries, including gambling.<sup>7,8</sup> These actions escalate levels of avoidable ill-health, planetary damage, and inequity through their direct and indirect influence.

## ADPH Position

### Embedding a public health approach

A public health approach is guided by a vision that prioritises the promotion of health and safety, based on core values of prevention, human rights, equity, and collective responsibility.

A shift to an evidence-based and independently evaluated population-level approach is required to address gambling harm, such as the one taken in the UK to address the harm from the tobacco industry and its products. A public health approach draws on the substantial body of evidence demonstrating that the gambling industry is a powerful commercial determinant of health whose products and practices, and a lack of effective regulation, represent the drivers of gambling harm. Based on the global evidence base an independent framework of policies is needed.

- **Government must protect policy from undue influence by gambling industry through mandating an agreed policy approach.**
- **Public health expertise should be increased within the Gambling Commission**, with joint accountability to the Department of Health and Social Care, and the Department for Digital, Culture, Media and Sports to protect the public from addictive, harmful products. This should include a statutory requirement for the Gambling Commission to publish regular, independent evaluations of prevention performance.
- Alongside this, **gambling harm prevention objectives should be integrated into relevant national strategies** such as mental health, suicide prevention, and substance use, to reflect the impact of gambling harm across society.
- Locally, local authorities (LAs) should **embed gambling harm prevention across public health and other council departments' functions.**

### A new Gambling Act

The current regulatory environment is not fit for purpose to protect the public from gambling harm, nor keep pace with the ever-changing landscape. **A new Gambling Act is needed to prevent gambling harm and should:**

- Reframe gambling as a public health issue.
- Allow for the development of adaptable, flexible, robust, and independent regulation of industry products and practices.
- Be developed independent of industry involvement.

### Independent funding and regulator

The gambling industry currently remains largely self-regulating, which is based on the flawed assumption that the gambling industry can grow while reducing harm.

- **Government must ensure the regulator is completely independent from industry.** This includes disbanding the current industry advisory group and ensuring the regulator is funded through general taxation.
- **Government must integrate long-term funding for gambling research, harm-reduction initiatives, and treatment into general taxation** to ensure sustainability and independence. It must ensure

strategic investment is transparent, with national, regional, and local delivery regularly reviewed for impact.

### **Empower local areas to tackle gambling harm**

LAs are best placed to address gambling harm for their population, but at present they do not have the appropriate levers to adequately determine the development and licensing of gambling premises. This is particularly important for those in most deprived areas, as health-harming industries actively target their products at those who will face greatest harm.<sup>9, 10</sup>

**Reform to national legislation is required to allow LAs to reduce gambling-related harms and safeguard their communities** by:

- **Removing the ‘Aim to Permit’** in a new Gambling Act to prioritise harm prevention, repositioning gambling as a public health issue rather than a leisure pursuit.
- **Introducing ‘public health’ as a fifth statutory licensing objective** so councils can refuse applications on harm grounds.
- **Expanding planning powers** to prevent clustering of outlets and limit new premises in vulnerable communities.
- **Ensuring adequate resourcing for councils** to enforce licensing and run local harm prevention initiatives.

### **Address marketing strategies used by the gambling industry**

A significant proportion of gambling industry revenue is spent on advertising, marketing, sponsorship, and promotion to retain and supplement the gambling industry’s user base, with estimated expenditure increasing from around £1bn in 2014 to over £1.5bn in 2017.<sup>11, 12</sup>

Greater gambling advertising exposure increases gambling activity which leads to a greater risk of harm – a dose-response effect.<sup>13</sup> Gambling marketing stimulates specific kinds of gambling activity that is higher risk and more lucrative for companies, including increased frequency, spending, and intensity, and being triggered to restart gambling.<sup>11</sup>

Gambling marketing produces these behaviours for those experiencing harm at all levels. However, it is those already experiencing the greatest harm who are subject to the most aggressive marketing. 35% of people suffering so-called ‘problem gambling’ receive daily incentives to gamble, compared to 4% of those not suffering gambling harm.<sup>14</sup>

Children and young people are also often exposed by online influencers who endorse these products or demonstrate gameplay to their large online followings. Subliminal marketing, which remains unregulated, is also used on social media to socialise gambling companies and products, creating brand familiarity through indirect exposure from an early age. This normalises the activity and reinforces harmful behaviours.<sup>15</sup> Aggressive marketing strategies must be addressed by:

- **Introducing a gambling advertising, promotion, and sponsorship (GAPS) ban**, based on the tobacco advertising, promotion, and sponsorship (TAPS) bans, which are a cornerstone of tobacco control.<sup>16</sup> This ban should include tactics used to retain at-risk gamblers, such as loyalty schemes, VIP reward programmes, gamification, and the use of personal account managers.
- **Phasing out all forms of gambling advertisement across LA owned estates.**

## Address diversification of gambling products

Online gambling has allowed the industry to utilise data-driven tactics to pervasively market their products and drive engagement. Gamification of gambling, the use of game attributes to drive game-like behaviour in a non-gaming context, serves as an online entry point for young people into gambling, specifically through the purchase of loot boxes in otherwise free and easy to access games. Loot boxes are virtual items in video games that contain randomised contents but can be paid for with real-world money.<sup>17</sup> Prior research has established that there is a strong causal relationship between the purchasing of loot boxes and problematic gambling behaviours.<sup>18</sup>

There should be a framework developed to determine what products can be considered relatively 'safe' or least harmful for release onto the market, with the result being:

- **A ban on the most harmful product designs.**
- **A duty on industry to prove their products are safe before release onto the market.**
- **A review process on those that have already been released to ensure they are not harmful.**

## Regulate industry use of data

Current policy does not effectively regulate the sheer diversity of data, algorithms, artificial intelligence, choice architecture, or nudges in the marketing or products of online and land-based gambling. These 'stealth' tactics give gambling companies disproportionate power to induce habitual activity.

**The Government should introduce robust and adaptive legal requirements for transparency and accountability in the use of data, algorithms, and behaviour tracking.**

## Prohibit industry partnerships

There is growing evidence that gambling industries have an unhealthy reliance on those harmed for substantial portions of their profits.<sup>19</sup> It is therefore a fundamental conflict of interest for the gambling industry to be involved in policymaking, research, public education, and professional practice. They should not be treated as a legitimate stakeholder in policy formulation, including industry-linked representatives in any formal working group directly inputting recommendations into Government.<sup>20</sup>

- **Clear principles should govern engagement with the gambling industry,** including prohibiting inducements to MPs, excluding industry-linked representatives from policy shaping taskforces, and ensuring full transparency around lobbying and funding. This should include a public register of all meetings and lobbying activity between industry actors and public officials to protect policy integrity and public trust.
- **Gambling research should be free from industry-influence, including through funding mechanisms or as a partner.** Instead, it should be interdisciplinary, informed by those who have direct experience of gambling-related harm, such as those with lived-experience or public health professionals, to ensure that findings are accurate and a true reflection of the harm caused.

Without these measures, there is a risk that research will under-report harms, overstate benefits and inaccurately suggest doubt in relation to product harms,<sup>21</sup> leading to policies that fail to protect individuals and communities from harm.<sup>22</sup> International good practice should be drawn upon to inform policy.

Youth education programmes are used to promote industries as socially responsible actors and are claimed to help ‘safeguard’ children and young people from harm, often promoted as evidence-based and evaluation led. In reality, these programmes distort the true harm caused and legitimise industry-favourable policies,<sup>23</sup> promote discourses of personal responsibility, moderate consumption and narrowing of the problem definition and causes.<sup>24</sup> They also promote familiarisation and normalisation of their products and associated consumption behaviours. Locally, **LAs should protect schools from gambling industry funded programmes and partnerships.**

### **The importance of framing**

Like other health-harming industries, the gambling industry uses the ‘individual responsibility’ narrative to shift blame onto consumers, diverting attention away from corporate practices that produce the harm in the first place. Framing gambling as a leisure activity with a limited risk of harm for the so-called ‘responsible majority’, deliberately disregards the addictiveness of products, the relentless marketing used to sell them, and the targeting of groups at greater risk of harm.

It is important to move away from stigmatising, industry-favourable framings which prejudices individuals suffering from harm and conceals the role of industry and harmful products. Instead, framing needs to increase understanding and build public support for effective policies needed to prevent gambling harm. **National and local government must adopt a public health framing of gambling.**

### **You might also be interested in...**

- [A language guide for gambling harms](#), developed by Greater Manchester Combined Authority, ADPH Yorkshire and Humber and ADPH North East.
- Journal articles on a [public health approach to gambling regulation](#) and [learning from tobacco control to tackle gambling industry harms](#).
- Official [statistics and research](#) from the Gambling Commission.
- [Guidance to Licensing Authorities](#): Interested Parties from the Gambling Commission.

### **About ADPH**

The [Association of Directors of Public Health](#) (ADPH) is the membership body for Directors of Public Health (DsPH) in the UK. It represents the professional views of all DsPH as the local leaders for the nation’s health. The Association has a heritage dating back over 160 years and is a collaborative organisation, working in partnership with others to strengthen the voice for public health. It seeks to improve and protect the health of the population through collating and presenting the views of DsPH; advising on public health policy and legislation at a local, regional, national and international level; facilitating a support network for DsPH; and providing opportunities for DsPH to develop professional practice.

**This policy position statement has been developed in collaboration with the ADPH Council, ADPH Addiction PAG and ADPH CDOH leads.**

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