6 February 2020

By email: Holly.ramsey@interelgroup.com

Dear Carolyn,

Re: APPG on Gambling Related Harm’s interim report on online gambling harm

Ahead of the APPG finalising its report into online gambling harm later this year, I wanted to take the opportunity to respond to the Group’s interim report published in November 2019.

Though we welcome many of the Group’s recommendations, particularly the need to address gambling harms from a public health perspective, we were disappointed to read of the ‘deep concerns’ surrounding the way that GambleAware operates. Despite the oral and written evidence provided to the Group last year, it is not entirely clear what is driving these concerns, beyond a general question around GambleAware’s independence and effectiveness.

With this in mind, I thought it important to reiterate some key points about GambleAware’s work, our role within the current system and our approach to reducing gambling harms.

GambleAware has a proud record as an independent charity working to keep people safe from gambling harms. We commission prevention and treatment services underpinned by research and evaluation across England, Scotland and Wales, working in partnership with a wide-ranging network of expert organisations and agencies to:

- **Commission a National Gambling Treatment Service** – we work with the NHS and others to ensure that appropriate treatment can be more easily available and free at the point of delivery. As well as funding the National Gambling Helpline, we work with a network of locally-based providers across Britain to deliver a range of treatment services, including brief intervention, counselling (delivered either face-to-face or online), residential programmes and psychiatrist-led care. We launched an awareness campaign on 3 February – see [here](#).

- **Commission NHS-based specialist treatment services** at the Central & North West London NHS Foundation Trust since 2008. We recently opened a second clinic in collaboration with Leeds and York Partnership NHS Foundation Trust and GamCare. In Leeds, we have been working alongside statutory and voluntary sector agencies to support a place-based approach for the local population, and to map care pathways and develop referral routes into treatment, including self-referral – see [here](#). We are seeking to replicate this approach in other regions. We were also pleased to be acknowledged, alongside GamCare, as an NHS partner in the [NHS Mental Health Implementation Plan, 2019-24](#) (pp 40-41) that commits to opening 15 specialist problem gambling clinics in the next five years.
- **Produce public health campaigns** such as *Bet Regret*, which launched last year. The initial two-year campaign is aimed at moderating the gambling behaviour of risky sports bettors and focuses on frequent, higher-risk betting behaviours such as chasing losses and betting when drunk or bored. It is targeted at 2.4 million males aged between 16 and 34 years old, the highest risk group, who gamble regularly on sport, their preferred form of gambling. Also, we are partnering with the FSA (Football Supporters’ Association) in England to help clubs keep supporters safe from gambling harms – see [here](#).

- **Commission national research** to improve knowledge of what works in prevention, education, treatment and support services including proportionate evaluation of all funded activity. This includes a significant research programme of over 30 projects either currently underway or in the process of being commissioned.

As you know, we have delivered this work within the voluntary donation-based system that has been in place for nearly a decade. Under this system, we have demonstrated what can be achieved in a partnership between government, statutory agencies and the charitable sector. The beginnings of a national, regional and local infrastructure have started to emerge, and gambling harms have begun to be addressed in a similar way to other risky behaviours (as demonstrated by NHS England’s commitment to open 15 new clinics, in partnership with GambleAware and GamCare).

However, despite robust governance arrangements that ensure the gambling industry does not influence GambleAware’s commissioning activities, a small number of academics, researchers and other stakeholders continue to refuse funding because of industry donations. Under the existing system, there is nothing more that GambleAware can do to refute this perception, other than to continue to reinforce the messages of independence of our commissioning activities and to try to engage with these academics and researchers in other ways. On the issue of research specifically, we are working with the Gambling Commission to establish an independent industry data centre, having established something similar for treatment services data at the University of Manchester.

When it comes to alternative structures, we have made clear our support for a mandatory levy. As discussed in the oral evidence session in July, donations are generally made for one year, which creates a certain amount of uncertainty around cash flow, given the multi-year nature of most of GambleAware’s funding commitments. A mandatory levy would produce a much more consistent and predictable flow of funding, as well as significantly improving transparency and confidence in the commissioning process as a whole.

For now, GambleAware will continue to deliver its goals under the current system. We remain wholly committed to ensuring the success and expansion of the National Gambling Treatment Service and the prevention and research activity supporting it. This will require continued collaboration with national health agencies, local authorities, charities, and treatment providers and others, which has consistently and repeatedly been at the heart of our approach.

We very much hope that the final report will take full and proper account of the evidence that GambleAware has provided to the Group. Should you have any further questions or concerns in the meantime, please don’t hesitate to contact me via [marc@gambleaware.org](mailto:marc@gambleaware.org)

Thank you for your attention.

With kind regards,

Marc Etches
Chief Executive