

Opening Statement – To the All Party Group (APG) on Reducing Harm Related to Gambling as part of an inquiry into public health approaches to gambling-related harms in Northern Ireland

Monday 13 February 2023

Good Afternoon Chair and Members of the All Party Group.

Thank you for the invitation to present to you today. My name is Dr Joanna Purdy – Public Health Development Officer at the Institute of Public Health and I am joined by my colleague Dr Helen McAvoy, Director Policy. Helen is no stranger to you having been a guest speaker at your meeting on 5 December last year.

The Institute of Public Health is an all-island organisation with offices in Dublin and Belfast. IPH is funded by the Departments of Health in Ireland and Northern Ireland and we inform public policy to support healthier populations and reduce health inequity. IPH does not, nor have we ever, received any funding or benefit in kind from the gambling industry, either directly or indirectly.

We previously presented to this group in January 2021 as well as providing evidence to the Committee for Communities on the Betting, Gaming, Lotteries and Amusements (Amendment) Act. IPH responded to the consultation on the Gambling Codes of Practice in Northern Ireland in February 2022 as well as providing evidence to the Oireachtas Committee for Justice on the deliberations on new gambling legislation in Ireland.

We have submitted a written response to this inquiry and for the purpose of today's presentation I won't repeat the detail of our written response, but rather, highlight some key considerations for adopting a public health approach to gambling-related harm.

Public Health Approach

Firstly, a public health, population level approach must be taken to protect the health and wellbeing of the entire population, including children and young people.

A public health approach considers how exposures in youth can impact across the life course and to this end, we would encourage the All Party Group to engage and mobilise leaders working on children's rights and across public services for children. The approach taken to reduce gambling harms, particularly amongst children and young people should not be centred solely on awareness and education but include protection measures, such as GDPR, proof of age, online safety, test purchasing and child protection, to protect the rights of children and to protect them from harm and exploitation.

Advisory Committee

We believe there would be considerable value in setting up an **advisory committee to protect children**, which could be consulted before any new legislation or policies are developed. The committee could include representation from parties involved in children's rights and services such as the Commissioner for Children and Young People, Children and Young People's Strategic Partnership, and the Children's Law Centre.

Prevention-First Approach

Secondly, a public health approach should prioritise harm prevention through policy and legislation, and not just focus on treatment services for those already experiencing harm.

Prevention needs to be a shared issue with shared responsibility and consideration should be given as to how that could be coordinated, for example, through the establishment on an inter-departmental or ministerial group. In taking a prevention-first approach, we need the necessary legislation in place, followed by the establishment of a regulator and/or regulatory authority. At the end of the day, a regulator is only as effective as the powers made available to him/her through legislation.

Collective Responsibility

Thirdly, there is a need for collective responsibility in tackling gambling-related harms. It is essential that we have a **cross-government mandate and inter-departmental support** to ensure policy coherence within health, communities, justice and also finance.

There is a role for different sections within government departments to help tackle harms associated with gambling. For example, the recent Department for Communities consultation on a Debt Respite Policy Proposal sought views on how to incentivise more people to access professional debt advice and to access it sooner, helping them to reach sustainable debt solutions. This is an example of how work within government departments could be coordinated to help address the financial burden inflicted on families as a result of gambling. Similarly, there is a role for the Department of Justice in tackling gambling-related fraud, money laundering and criminal activity associated with and resulting from gambling.

Reducing Inequalities

Finally, a public health approach should have a particular focus on reducing inequalities and protecting vulnerable groups including children, people with mental ill health and those with substance misuse issues. In the interest of promoting cross-government responsibility for gambling, we believe there should be formalised engagement with policy leads for the mental health strategy and suicide prevention strategy. Consideration could also be given to engagement with the Northern Ireland Coroner's Office to explore the extent to which gambling is a contributory factor in death by suicide.

Health Needs Assessment

Just before I conclude, you may be interested to know that the WHO Collaborating Centre on Investment for Health and Well-being at Public Health Wales recently published a Gambling Health Needs Assessment for Wales. The health needs assessment aimed to review the needs of people experiencing harms from gambling to inform a public health approach to reducing gambling harm in Wales. It includes data related to harmful gambling, a summary of the

evidence base around preventative and treatment interventions, a summary of existing services, and themes identified from interviews with people with lived experiences of harmful gambling, service providers and stakeholders. This is perhaps something which could be considered for Northern Ireland and would be most useful in informing a public health approach to reducing gambling-related harm. I can forward a link to the report after today's meeting.

Key Components

To conclude, we welcome this inquiry and believe there is much to be gained from adopting a public health approach to gambling-related harms. However, it hinges on a number of key components: **fit for purpose legislation, establishment of a regulator, cross government engagement** and **mobilisation of key agencies and actors** to support a collective and coordinated effort to addressing gambling-related harms in Northern Ireland.

Thank you for your attention.

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