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Date: 21/08/2024

Dear Steve,

Reference: **Gambling Statement of Principles Consultation**

Thank you for the opportunity to comment on the Gambling Statement of Principles consultation for North Herts.

Hertfordshire Gambling Harms Strategy and Joint Strategic Needs Assessment (JSNA)

Hertfordshire County Council will be launching a Gambling Harms Strategy by the end of 2024. It is currently out for public consultation: [Hertfordshire Gambling Harms Strategy 2024 | Hertfordshire County Council](#). One of the proposed strategic priorities is Influencing the licencing and regulatory environment to protect vulnerable residents from the harm caused by gambling and be clear on the individual roles of the County Council and District and Borough Councils.

The Hertfordshire JSNA Briefing: Gambling-related harms¹ was published in February 2022. It provides a wealth of evidence which is recommended to be referred to in the Gambling Statement of Principles.

Harm caused by problem gambling

The harms associated with problem gambling are wide-ranging. These include not only harms to the individual gambler but their children, their families, and their communities. According to a YouGov data on gambling treatment and support from 2020² around 7% of the population of Great Britain (adults and children) were found to be negatively affected by someone else's gambling, most commonly from an

¹ [gambling-related-harms-jsna-briefing-2022.pdf \(hertshealthevidence.org\)](#)

² [gambling-treatment-and-support.pdf \(gambleaware.org\)](#)

immediate family member. The annual excess direct financial cost to government associated with harmful gambling is equivalent to £412.9 million. The annual societal value of health impacts is equivalent to between £635 and £1,355.5 million (in 2021 to 2022 prices). The total financial costs are approximated at £1.05 to £1.77 billion in 2023 nationally³.

Gambling-related harms can include the following:

- **Financial harms:** debt, bankruptcy, homelessness and child poverty
- **Relationships:** loss of trust, loneliness, separation, abuse
- **Mental and physical health:** depression, sleep problems, deaths from suicide
- **Employment and education:** unemployment, poor education
- **Criminal activity:** theft from family members and others

Gambling rates and density of gambling premises higher in areas of higher deprivation

[Data has been collected by Gamble Aware](#) for local authorities to have a clearer view on how the rates of gambling affected their population and how this compares nationally. The Problem Gambling Severity Index (PGSI) is a frequently used tool that helps to identify people experiencing problems or negative consequences from their gambling (problem & at-risk gamblers). This tool was specifically developed to be used in the general population rather than a clinical context. It has 9 questions and a possible score range of 0 to 27. A PGSI score of eight or more represents a person who is gambling at risky levels and is set as a common threshold for clinical diagnosis. Scores between three and seven represent 'moderate risk' gambling and a score of one or two represents 'low risk' gambling. For the 10 districts in Hertfordshire, the estimates are as the following from their Annual GB Treatment and Support Survey 2022 (table 1):

Table 1: Estimates of prevalence of gambling behaviour, fiscal costs and % of people seeking help

District	Prevalence of gambling behaviour			Estimated Fiscal Cost	% of people seeking help		
	PGSI1 +	PGSI3 +	PGSI8 +		PGSI1 +	PGSI3 +	PGSI8 +
National	13.4%	5.9%	2.9%	NA	14.8%	32.1%	65.5%
Broxbourne	14.4%	6.3%	4.0%	£2.1 million	15.1%	32.7%	66.0%
Dacorum	13.7%	6.1%	3.3%	£3.6 million	14.1%	31.5%	61.0%
East Herts	12.0%	4.8%	2.1%	£2.2 million	12.2%	29.0%	63.8%
Hertsmere	13.0%	5.8%	2.6%	£1.9 million	14.6%	31.0%	66.6%

³ [Gambling-related harms evidence review: summary - GOV.UK \(www.gov.uk\)](#)

North Herts	12.5%	5.2%	2.5%	£2.2 million	14.3%	33.3%	68.4%
St Albans	12.1%	5.2%	2.4%	£2.5 million	13.3%	29.5%	64.0%
Stevenage	15.1%	6.3%	3.2%	£2.0 million	14.8%	32.9%	65.0%
Three Rivers	12.8%	5.5%	2.5%	£1.6 million	14.0%	30.8%	65.8%
Watford	15.1%	7.4%	3.9%	£2.6 million	19.6%	38.5%	71.4%
Welwyn Hatfield	13.8%	6.0%	3.0%	£2.6 million	15.8%	34.1%	66.0%

The data shows a total estimated fiscal cost of £23.3 million for Hertfordshire according to National Institute of Economic and Social Research (NIESR) for problem gambling (PGSI 8+) in 2023.

There are variable numbers of gambling premises in each district (table 2) and analysis in the Hertfordshire JSNA briefing: Gambling Related Harms⁴ showed that gambling premises clustered around areas with greater levels of deprivation. A commonly used unit of comparison is Lower layer Super Output Area (LSOA) which comprises between 400 and 1,200 households and have a usually resident population between 1,000 and 3,000 persons. In Hertfordshire, 41.0% of gambling premises were in LSOAs in the most deprived quintile of Hertfordshire whereas 2.56% of gambling premises were in LSOAs in the least deprived quintile of Hertfordshire.

Table 2: Type and total gambling premises by Hertfordshire district and rate of gambling premises per 100,000 adults aged 18 years and older by Hertfordshire district, September 2023⁵

District	Adult Gaming Centre	Betting Shop	Bingo	Total gambling premises	Premises per 100,000 adults aged 18+
Broxbourne	1	15	0	16	19.5
Dacorum	2	11	0	13	10.8
East Herts	0	13	0	13	11.1
Hertsmere	4	12	1	17	20.4
North Herts	1	9	0	10	9.5
St Albans	0	5	1	6	5.4
Stevenage	3	10	1	14	20.2
Three Rivers	0	6	0	6	8.3
Watford	1	15	2	18	22.9
Welwyn Hatfield	0	11	0	11	11.6
Hertfordshire	11	112	5	128	13.7

⁴ [gambling-related-harms-jsna-briefing-2022.pdf \(hertshealthevidence.org\)](https://www.hertshealthevidence.org/gambling-related-harms-jsna-briefing-2022.pdf)

⁵ Source: Full premises register, The Gambling Commission, 2022; ONS 2020 Mid-Year Population Estimates, HertsInsight. [JSNA](#))

Increased risks of suicide from problem gambling

The Hertfordshire Suicide Prevention Strategy for 2025-2030 is currently being refreshed with district health and environmental leads involved in the development. The England Suicide Prevention Strategy⁶ released in September 2023, contains actions related to gambling. There is a clear relationship between gambling, financial issues and mental health, leading to depression, anxiety and in more serious cases, suicide ideation, attempts and taking of one's own life. It is important that this impact is recognised. This further impacts on families through bereavement, domestic abuse and impact on children and loved ones. The Hertfordshire Suicide Prevention Strategy for 2025-2030 will include priorities to reduce the harm caused by gambling.

Table 3: Number of deaths per year from suicide by Hertfordshire district.

District's based on number of cases	2022	2021	2020	2019	2018	2017	2016	2015	2014	2013	2013-2022 Total per District
Dacorum	14	8	9	17	10	9	10	12	7	12	108
St Albans	11	7	10	13	14	6	8	8	11	7	95
East Herts	8	10	10	13	9	11	5	5	11	5	87
North Herts	12	7	6	11	10	11	9	4	12	4	86
Welwyn Hatfield	9	5	9	9	10	9	4	13	9	4	81
Hertsmere	7	5	11	15	8	10	5	7	6	3	77
Three Rivers	6	3	8	5	8	6	7	4	5	6	58
Broxbourne	7	6	4	6	13	5	3	11	4	3	62
Stevenage	6	3	7	11	8	3	5	4	2	1	50
Watford	1	2	3	5	12	6	8	6	4	7	54
Hertfordshire	81	56	77	105	102	76	64	74	71	52	758

Concerns about vulnerable people being harmed by gambling

Consideration for vulnerable people should be at the heart of licensing applications. This includes awareness of areas of deprivation and/or concentrated presence of children and young people (CYP) and other at-risk individuals within areas of a district.

CYP: While prevalence of gambling is lower in CYP, the rates are still alarming. The Young People and Gambling Survey (2019) found that the prevalence of problem gambling was 1.7% in a sample of 11-16 year olds and a further 2.7% were identified as at-risk gamblers. Around 11% had played a gambling game in the past 7 days

⁶ [Suicide prevention strategy for England: 2023 to 2028 - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/115442/suicide-prevention-strategy-for-england-2023-to-2028.pdf)

(13% boys and 7% girls) and gambling participation was highest for placing a private bet for money (e.g. with friends) (5%) and fruit or slot machines (4%)⁷. There is also increased concern over online gaming and gambling in CYP, with the Gambling Commission's report on gambling in young people suggesting that there has been an increase in playing for loot boxes in video games. A large-scale survey of 16- to -18-year-olds found a statistically significant link between loot box spending and problem gambling in older adolescents⁸.

Health/behaviour: Mental health conditions and behavioural characteristics are risk factors for gambling harms. These include depression, impulsive behaviour, low life satisfaction and wellbeing, high alcohol consumption, loneliness, violent and antisocial behaviour, and poor academic performance⁹.

Economic factors: Problem gambling is more frequent in those who are unemployed (2.1%) vs employed (0.7%) & those living in the most deprived quintiles compared to the least deprived (1.2% vs 0.2%). A survey found 42% of problem gamblers said they would gamble more over the next year due to the cost-of-living compared to 6% of the UK¹⁰.

Gender and age: Men are 4.2 times more likely to be harmful gamblers than women. Young to middle aged men have the highest prevalence of problem gambling⁹.

Ethnicity: Asian & British Asian groups have the lowest risk of gambling, but the highest risk of problem gambling. Ethnic minority groups are less likely to receive treatment for gambling harm¹⁰.

Homelessness and veterans: Studies indicate a link between homelessness and gambling; one survey found 11.4% of those experiencing homelessness reported problem gambling. One report suggested veterans were over 8 times more likely to be problem gamblers compared to non-veterans¹¹.

Assessing the cumulative impact

Hertfordshire Public Health recommends that the policy statement should also include that applications will be considered against the ***cumulative impact*** of applications locally to protect children and vulnerable persons from being harmed or exploited by gambling.¹²

We recommend all the above noted points are included within the appropriate sections of the Gambling Statement of Principles.

If you have any questions, please do not hesitate to contact me.

⁷ [Health Survey for England 2018: Supplementary analysis on gambling - NHS England Digital](#)

⁸ [Video game loot boxes are psychologically akin to gambling | Nature Human Behaviour](#)

⁹ [Gambling-related harms evidence review: summary - GOV.UK \(www.gov.uk\)](#)

¹⁰ [Gambling-related harms evidence review: quantitative analysis of gambling involvement and gambling-related harms among the general population in England \(publishing.service.gov.uk\)](#)

¹¹ [Rates of Problematic Gambling in a British Homeless Sample: A Preliminary Study | Journal of Gambling Studies \(springer.com\)](#)

¹² [Gambling regulation: Government Response to the Committee's Second Report - Culture, Media and Sport Committee \(parliament.uk\); committees.parliament.uk/writtenevidence/122415/pdf/](#)

Kind regards,

Sarah Perman
Director of Public Health
Public Health
Hertfordshire County Council

The Safeguarding Children Partnership is nominated by the Council under section 157 of the Gambling Act 2005 as being the appropriate body to advise [insert name] Borough Council of any risks posed by the operation of premises providing gambling facilities to children and young people.

The activity of gambling can be harmful to people of all ages, but the law prohibits anyone under the age of 18yrs from gambling due to the significant harm that it can cause them.

The HSCP recognises that certain issues in relation to the protection of children from gambling are considered or regulated at a national level, for instance rules relating to advertising, general rules on access to premises and the availability of online gambling.

HSCP role is to focus on activities carried out a local level from physical premises in the County. HSCP's concerns will relate to preventing or controlling access to gambling premises and preventing the act of gambling by children. Risk assessments should identify risks and have measures in place to mitigate them. HSCP would expect operators to not allow the inside of the premises to be viewed and not to carry advertising on the front of its premises that may be attractive to children or contain images of popular professional sportsmen or celebrities that are likely to make gambling attractive to children.

Where gaming machines are provided in settings which children can access, for instance in pubs, clubs or family entertainment centres, the HSCP will expect the location of machines to be situated in areas where access to them, or the area, is controlled, clearly identified and under the physical supervision of a member of staff at all times.

Operators should consider a challenge 25 policy and the keeping of records such as challenge or refusal registers that provide evidence of the suitability of the procedures.

HSCP will also consider the wider picture of safeguarding of children – it would not normally be the case that the authorities would expect children to be present in or outside premises that provide gambling facilities. HSCP would expect operators to risk assess this, include it as part of their training procedures and be alert to instances where children and young people are regularly seeking access to the premises, being found inside premises or waiting outside premise for money or gifts from an adult who is gambling within.

GamCare's response to North Herts Council – Consultation on the revision of statement of principles under the Gambling Act 2005

About GamCare:

GamCare is an independent charity and the leading provider of information, advice, and support for anyone affected by gambling harms. We operate the National Gambling Helpline, provide structured support for anyone harmed by gambling, and create awareness about safer gambling and treatments. For 26 years, our confidential, non-judgemental services, have supported more than half a million people to get their lives back on track.

We hold data locally and nationally through our National Gambling Helpline. We also work closely with those who have lived experience in shaping and delivering our services and programmes, ensuring that all our work is coproduced with our lived experience community at its heart.

GamCare's comments on the revision of the statement of principles:

- We welcome the position North Herts Council is taking to go beyond the mandatory and default conditions of the Gambling Act 2005 in its statement of principles.
- Local authorities can play a greater role in reducing gambling harm, particularly for those of our clients who experience harm in land-based gambling venues, due to council's licensing responsibilities.
- It is vital that North Herts Council develops a local picture of the level of gambling harms, in order to best target resources and tailor service provision. This could be achieved by gathering data from the National Gambling Helpline, as well as those already providing services in the area.
- Building on the proactive approach the council is already taking, we would like to see North Herts Council continue to commit in its statement of principles **to a public health approach** to gambling.
- This commitment should include training frontline and primary care staff to recognise the signs of gambling harm and develop referral pathways to the National Gambling Helpline or local treatment providers. GamCare has worked with Haringey Council to implement a similar system, that has received widespread support.
- In the absence of Cumulative Impact Assessments as a method by which the "aim to permit" approach can be challenged, North Herts Council should continue to pursue a [Local Area Profile](#) approach that specifically analyses gambling risk, and use this data as a basis from which to scrutinise and possibly oppose a licensing application.
- The changes to North Herts Council's statement of principles should be viewed in the context of the Gambling Act Review and subsequent process of white paper consultations, so take account of the rapidly changing regulatory environment.

If you have any questions or would like to discuss in more detail, please contact Pollyanna Hopkins, Senior External Affairs Officer: pollyanna.hopkins@gamcare.org.uk