



Grŵp Trawsbleidiol ar
Gamblo Problemus
Cross-party Group on
Problem Gambling

Joint Meeting of the Cross-Party Groups on Problem Gambling and Children and Young People
held on 19th June 2018 at the
Committee Room 4, between 12.30 and 13.20

Present	Invitation was extended to members of both Cross Party Groups, other AMs and members of the public. The following AMs were present: Mick Antoniw (Chair X Party Group on Problem Gambling), David Rees, Dr Dai Lloyd, John Griffiths, Jayne Bryant, Jenny Rathbone, Julie Morgan (Chair X Party Group on Children and Young People)
Apologies	None

Item Activity

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Mick Antoniw AM Chair of the X-part Group welcomed everyone – particularly Julie Morgan AM, chair of the Cross Party Group on Children and Young people & general introductions were made by going round the room.

Mick Antoniw AM then introduced Professor Samantha Thomas (accompanied by her PhD assistant, Hannah Pitt, and Professor Rebecca Cassidy from Goldsmiths, University of London) who addressed members of the Cross Party Groups for 25 minutes.

Samantha Thomas – Centre for population health research – school of health and social development – faculty of health – Deakin University.

Dr Thomas Advocacy discussed her research and experience with gambling in the Australian context. Her research and lobbying led to the gambling advertising ban in live sport in Australia. She discussed the gambling industry and its advertising strategy.

Overview

1. A public health approach to gambling considers the individual, socio-cultural, environmental, industry, and political determinants of gambling harm, and the most effective mechanisms to respond.
2. There is significant focus on the factors that may contribute to the normalisation of gambling, particularly for children. Thomas et al [2018] define this as:

*The interplay of socio-cultural, environmental, commercial and political processes which influence how different gambling activities and products are made **available and accessible**, encourage **recent and regular use**, and become a **socially and culturally accepted** part of everyday life for*



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individuals, their families, and communities. [Thomas et al, 2018. A public health investigation into the determinants of the normalisation of gambling]

3. Alignment of betting companies with sport has contributed to the most concern relating to the normalisation of gambling.
4. When considering regulatory frameworks associated with gambling advertising, it is important to consider the timing and content of advertising.
5. There are certain strategies used within gambling advertisements that may have significant appeal for young people – deals, humour, celebrity endorsements, cartoon characters, promotions associated with winning money, promotions aligned with sporting codes. Children state that they trust gambling promotions which feature athletes.
6. There is clear evidence that advertising is normalising gambling for children who are fans of sport. 75% of children think gambling is a normal part of sport, and state this is because of the promotions they see for gambling.
7. Children perceive gambling is:
 - a. A fun way to make money
 - b. Easy and entertaining
 - c. Part of the sports experience and identify of a sports fan.
8. Young people have detailed recall and awareness of gambling brands. 75% can name at least one gambling company. 25% can name four or more.
9. Some forms of marketing are more powerful than others. Deals based promotions (such as cash back offers) create a perception of reduced risk for young people with some perceiving that you can't lose from gambling because of these deals.

What should we avoid when trying to reduce harms?

Industry argues for:

- Voluntary self-regulatory codes
- Responsible gambling campaigns
- A focus on education
- Partnerships and balance

What does a public health look like?

1. Strong regulatory and policy environments specific focus on legislating and enforcing curb on advertising.
 2. No involvement of industry in policy, research, or education.
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“Parties should protect the formulation and implementation of public health policies for tobacco control from the tobacco industry to the greatest extent possible.” – WHO Framework Convention Tobacco Control

3. Independently developed, evidenced based, campaigns.
4. Point of consumption tax to fund research, treatment, education via an independently run organisation (such as the Cancer Council Victoria in Australia).

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She advocates industry independent research, education and policy making - strong regulatory and policy environments with a specific focus on legislation to curb advertising and its impact on children.

There followed a Q&A session.

Both chairs of the Cross party Groups expressed their gratitude to Professor Thomas for an effective and inspiring presentation.

DATE OF NEXT MEETING

The date of the next Cross-party group meeting is 2nd October (12.30 – 13.30) at Conference Room B, Tŷ Hywel.

Chairman.....

Date.....