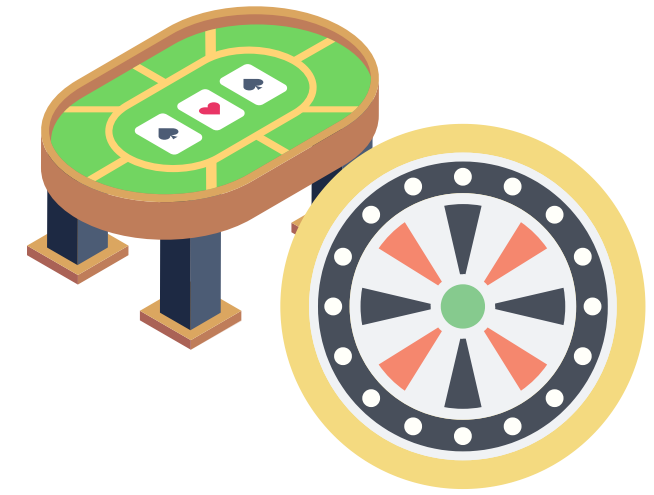




CITY OF  
WOLVERHAMPTON  
COUNCIL



# Gambling Related Harm Rapid Needs Assessment

Wolverhampton

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## Executive Summary

**Gambling is a legal activity for anyone aged 18+.**

There are two forms of gambling: Remote - virtual methods and non-remote - premises. It is reported that 50% of the population participated in gambling activities, those aged 25-34 years being the most common age group. Although 'White and White British' at 60% were most commonly participating in gambling activities in comparison to 'Ethnic Minorities' at 31%. When identifying those affected by some level of harm, 'Ethnic Minorities' were reported to be more likely affected at 20% in comparison to individuals who disclose themselves as 'White and White British at 12%.

There is a stark difference between those affected by problem gambling, who are generally from higher levels of education, employment and low levels of deprivation, compared to those affected by gambling harm who are from higher levels of deprivation.

The Gambling Commission introduced new provision as part of its social responsibility within the licence conditions and codes of practice (LCCP), requiring local operators to assess risks, in order to mitigate and reduce the risk of problem gambling to the population. The City of Wolverhampton Council is a licensing authority under the gambling act 2005 and issues licences for gambling premises in Wolverhampton. Wolverhampton has a total of 38 gambling premises, when comparing this to other 'Black Country' areas, this is on par with Dudley (36) and Walsall (46), however significantly lower than Sandwell (75).

It has been reported nationally that following the impact of COVID-19 a total of 665 premises have been closed (6.5% of England's gambling premises).

Nationally the type of gambling activities that are reported to be most popular are the National Lottery (43%), Scratch cards (19%) and other lotteries (14%). When comparing to those at risk gamblers, the type of gambling activities alters significantly to Spread Betting (52%), Betting Machines (46%) and Poker (45%).

Those accessing gambling treatment services reported remote gambling as the most common form of gambling activity, mirroring both that of national and regional participation. Local treatment data suggests that males (74%) are the most common service users in comparison to females (24%) with 2% reporting they would prefer not to say. Between 2019-2022 those in treatment in Wolverhampton made up between 0.2-0.3% of the total population that accessed treatment nationally during that period.

The NHS long term plan has committed to open up to 15 problem gambling clinics by 2023/24. One of these is in Stoke-on-Trent, which opened in May 2022. Other services available in Wolverhampton currently in addition to Aquarius (a GamCare partner in West Midlands), are Gamblers Anonymous and a gambling rehab unit in Dudley (Gordon Moody Association). There is also local support that may be available from GPs, substance misuse services, youngpeople services, housing and citizens advice and debt management services.

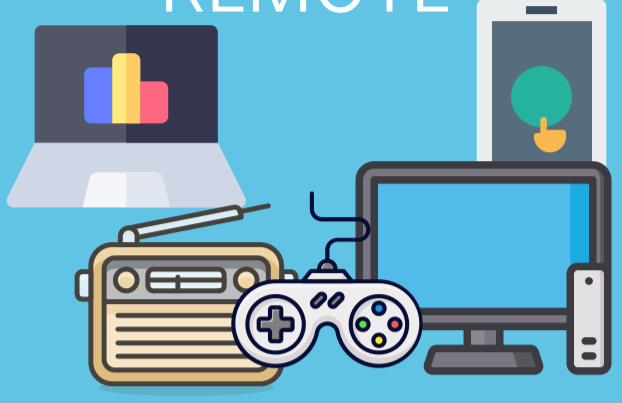
# Gambling Overview

Gambling is betting, gaming or participating in a lottery where gaming means playing a game of chance for a prize, a prize defined as money or as 'money's worth' **Gambling Act 2005**

## What is Gambling?

REMOTE

NON-REMOTE



The legal age limit is 18+ for all forms of gambling including lottery and scratch cards

## WHAT IS PROBLEM GAMBLING

Problem gambling means to a degree that compromises, disrupts or damages family personal or recreational pursuits. **Gambling Commission 2020**

As gambling risk increases the sociodemographic profile of individuals changes, highest rates of gambling are found in those with higher academic achievements, senior positions of employment and low levels of deprivation.

Public Health England 2021

Most widely used measure of problem gambling comes from the combined health surveys.

Gambling behaviour in Great Britain in 2016

NatCen  
Social Research that works for society

### Gambling behaviour in Great Britain in 2016

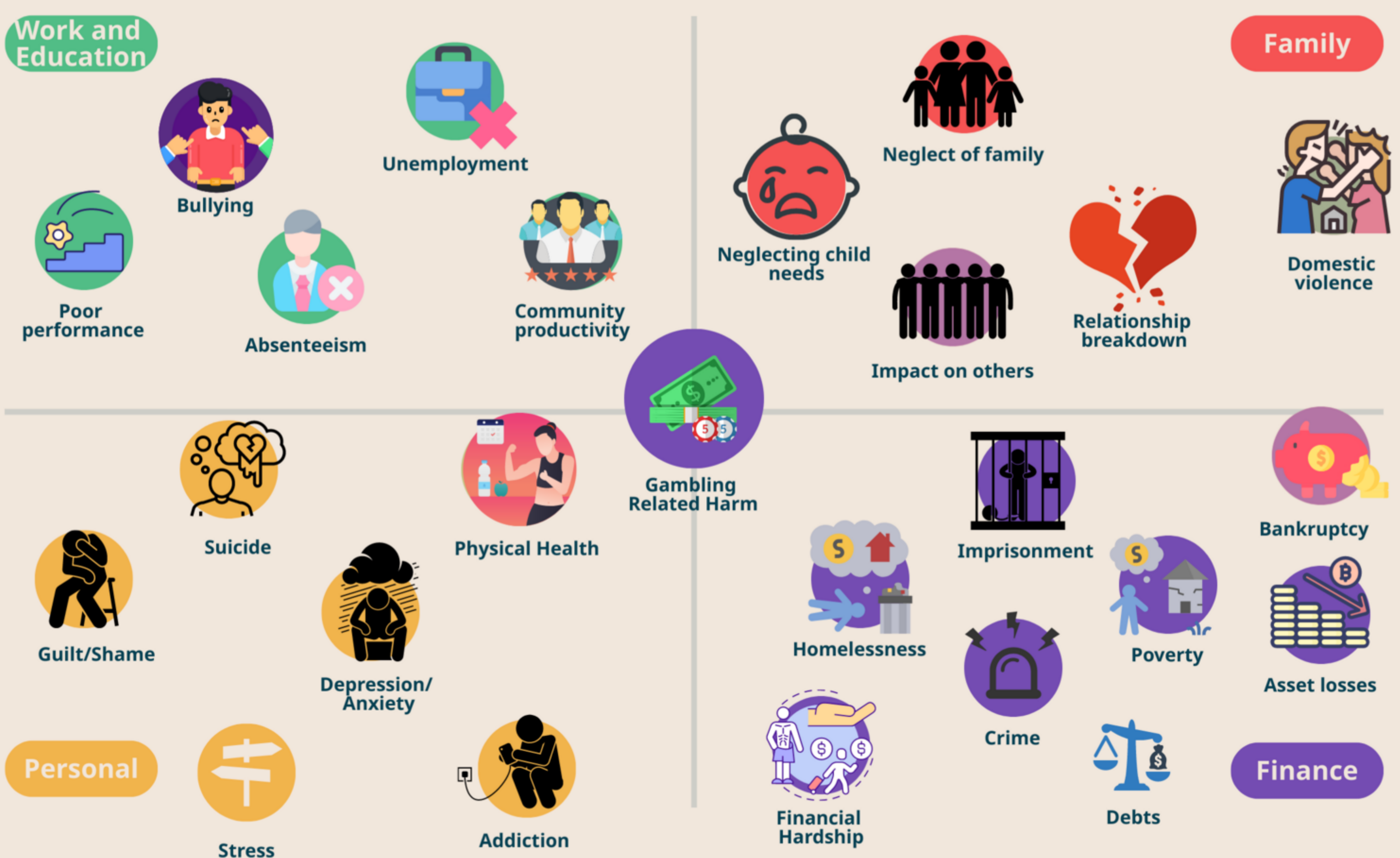
Evidence from England, Scotland and Wales

Authors: Anna Collins, Byron Davies, Elizabeth Fisher, Kate Haines, Heather Harte  
Date: September 2016  
Prepared for: Gambling Commission

## What is Gambling Related Harm?

Gambling related harms (GRH) are the adverse impacts from gambling on the health and wellbeing of individuals, families, communities and society. These harms impact peoples resources, relationships and health - **Gambling Commission**

### Gambling Related Harm - Web of connections



# National Gambling Profile

Adults			Children and Young People
<p><b>£1.27 Billion</b></p> <p>Estimated annual economic burden of harmful gambling according to the economic analysis (2019-2020).</p>	<p><b>55,000</b></p> <p>Gambling harm affects around 55,000 young people aged 11-16 years, research shows many more could be at risk.</p>	<p><b>50%</b></p> <p>It is estimated that over 50% of adults engage in some form of gambling</p>	<p><b>78%</b></p> <p>Young people who spent their own money on gambling the past 12 months.</p>
<p><b>33%</b></p> <p>The age range most likely to gamble was 25-34 years, excluding national lottery</p>	<p><b>20%</b></p> <p>Ethnic minorities were classified as gamblers with some level of harm, compared to 12% White British</p>	<p>Evidence suggests young people consider gambling to be increasingly normalised, gambling harms increase the risk of health issues, such as;</p>	

## Licensing

The Gambling Commission as part of its social responsibility introduced new provisions within the licence conditions and codes of practice (LCCP), requiring local operators to assess risks, in order to mitigate and reduce risk to the population.

The change in national policy is intended to provide a evidenced and transparent approach to considering and implementing measures to address risks associated with gambling.

**57%** Licensed gambling had grown by 57% (£4.1 billion) over the past decade



## Covid 19

The COVID-19 pandemic significantly altered the gambling landscape, accelerating the popularity of online gambling activity

### Impact of COVID-19

#### Premises

Continuing trend of closures

A decrease of 6.2% in gambling premises

665 Gambling Premises closed

#### During and post COVID-19

Change of gambling behaviour greater risk of gambling harm

Regular gamblers adopted a new form of gambling

17%

Increase of online gambling

#### Local Authority responsibility to Gambling Related Harm

Statutory role as a licensing authority

No regulatory responsibility with remote gambling

## Population



**263,700**

### POPULATION

The population of Wolverhampton has increased by 5.7% since 2011



**9-21%**  
**AGE**

There has been an increase of between 9-21% of those aged 45-65 years since 2011



**32%**

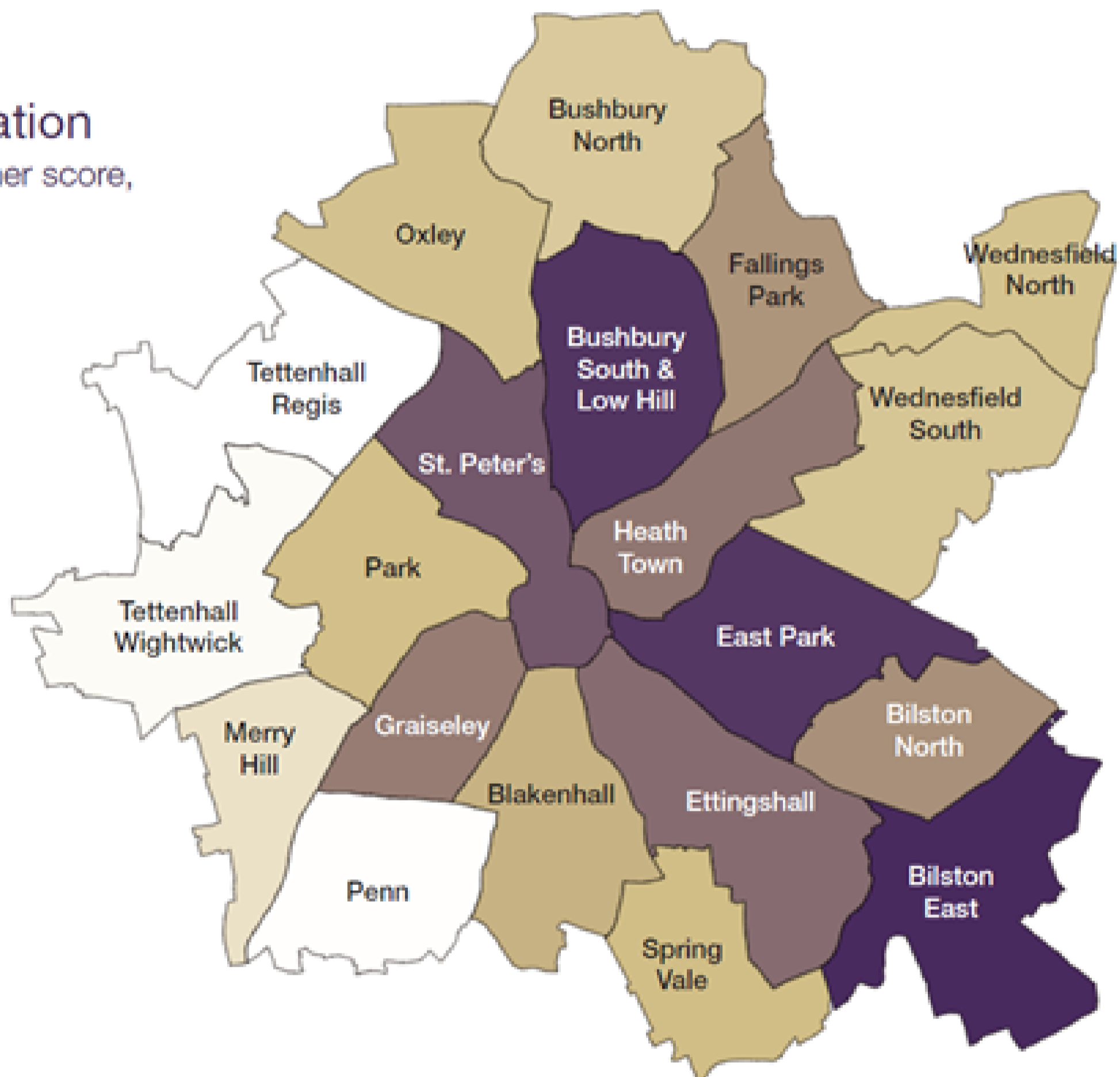
### ETHNICITY

The ethnicity of Wolverhampton is 68% White British and 32% are from Black and Minority backgrounds

Blakenhall (73%) and St Peters (61%) have a significantly higher percentage of those from Black and Minority backgrounds

## Map of Deprivation

Darker colours = higher score, more deprived



In 2019, Wolverhampton had an index of multiple deprivation (IMD) score of 32.1 placing the city in the highest 10% of cities living in deprivation in England, ranking as the third most deprived in the West Midlands.

Bilston East (46.1), Bushbury South and Low Hill (45.1) and East Park (44.7) are the wards of highest deprivation within the city.

## Local Licensing

The City of Wolverhampton Council is a designated licensing authority under the Gambling Act 2005. The act has three licensing objectives guiding the way the licensing authority performs its licensing function and the way gambling operators carry out their activities:

- Preventing gambling being a source of crime or disorder, being associated with crime or disorder or being used to support crime
- Ensuring that gambling is conducted in a fair and open way
- Protecting children and other vulnerable persons from being harmed or exploited by gambling

# Gambling Activities

There is a significant difference between those who participate in gambling and those considered at risk gamblers, dependant on the type of gambling they participate within.

## National Gambling Participation



**NATIONAL LOTTERY**

**43%**



**SCRATCH CARDS**

**19%**



**OTHER LOTTERIES**

**14%**

The most popular types of gambling activities people participated in England (HSE, 2012-1018) were National Lottery (43%), Scratch Cards (19%) and Other lotteries (14%). Horse Racing (6%) and Online betting with bookmaker(6%) being the next most popular activities.

In comparison the activities most popular with those at risk of gambling harm were Spread Betting 52%, Fixed Odds Betting Terminals 46%, Poker in bars/clubs 45%, online gambling (slots/gambling) 44% and Betting Exchange 44%, highlighting a strong shift to online betting.



**SPREAD BETTING**

**52%**



**BETTING MACHINES**

**46%**



**POKER**

**45%**

## Children and Young People - Gaming and Online Gambling



**46%**

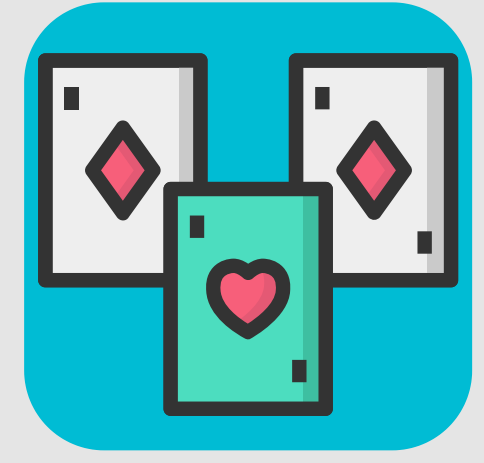
Almost a third of young people aged 11-16 years, spent their own money on some form of gambling in the last year



Arcade Games

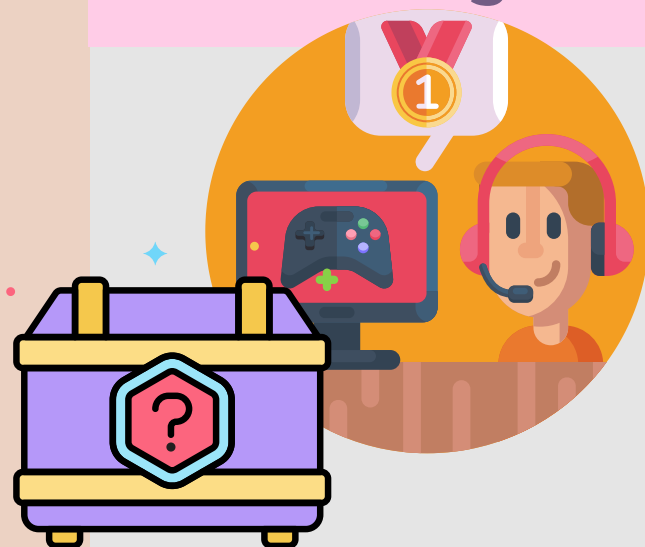


Betting with friends



Playing cards for money

The most common types of gambling were legal and did not feature any age restrictions including playing arcade games 22%, betting between friends 15% and playing cards for money 5%.

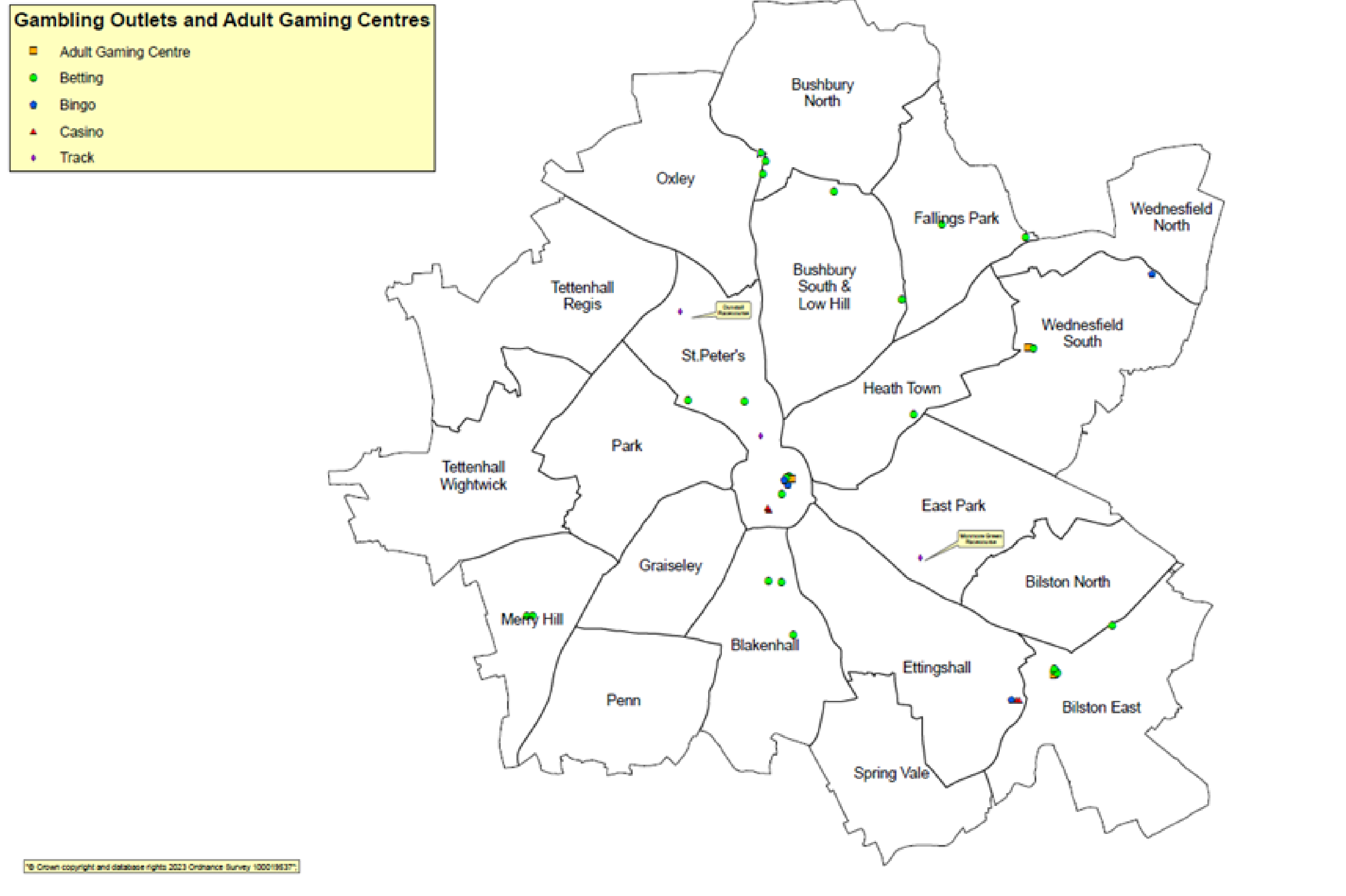
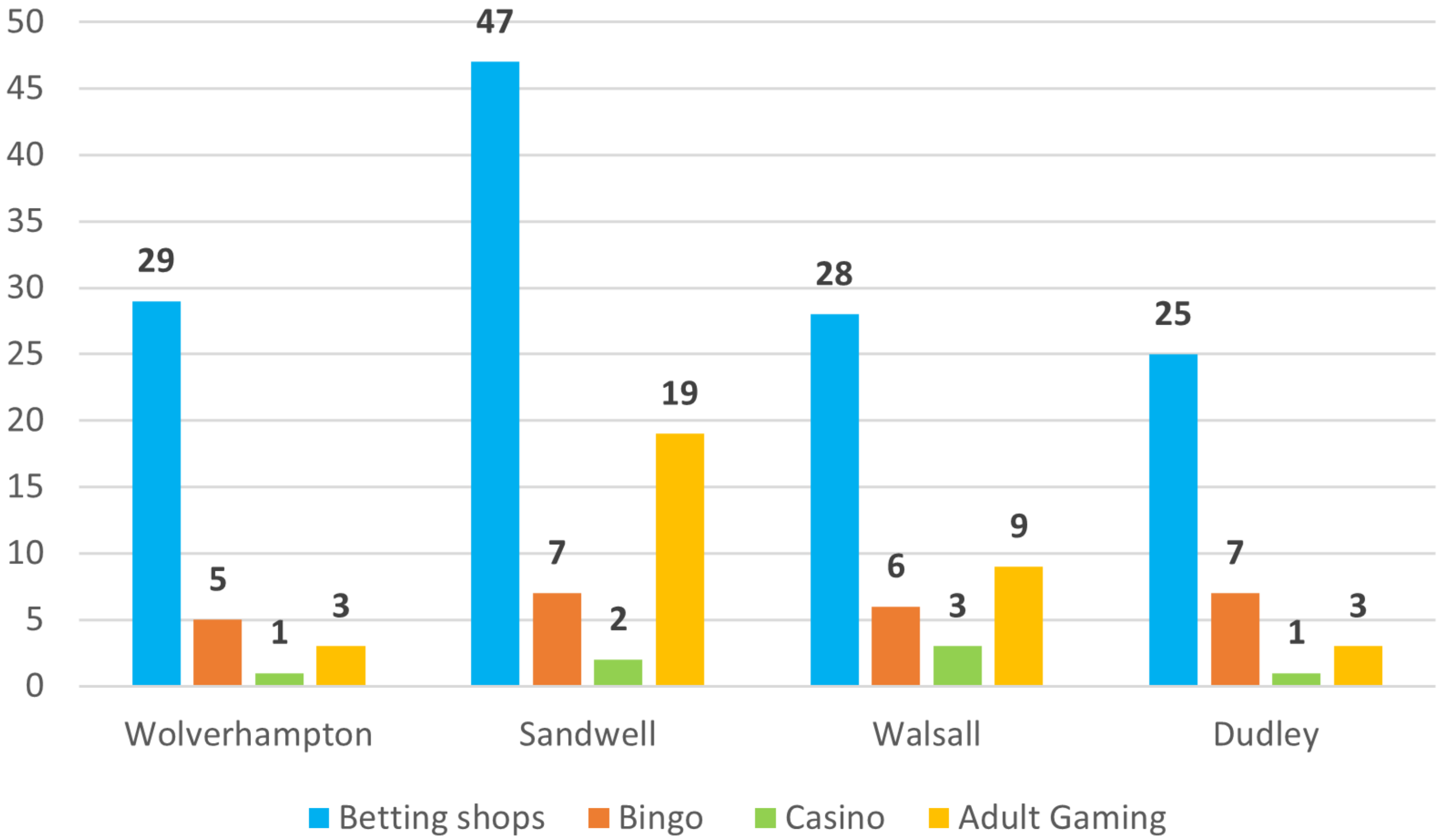


Recent research has identified that young adults who purchase loot boxes within video games should be considered a high risk group for problem gambling.

In comparison to neighbouring Black Country local authorities, Wolverhampton (29) has the second highest number of 'Betting shops', with Sandwell (47) having significantly more betting shops than other areas.

Wolverhampton has a similar number of bingo halls, casino and adult gaming centres as neighbouring authorities. Combining all betting premises across the city Wolverhampton (38) has a similar number to Walsall (46) and Dudley (36), with Sandwell (75) having significantly more.

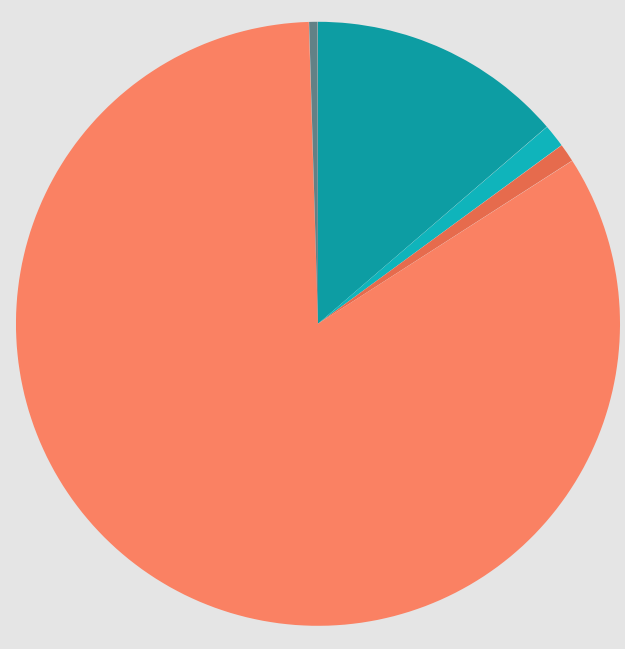
Wolverhampton also has two race courses (Dunstall and Monmore Green).



Gambling premises in Wolverhampton are mostly located in the central and east areas of the city, consisting of betting shops, casinos, bingo halls and adult gaming centres.

St Peters (11) and Bilston East (4) have the highest number of premises within their respective wards, the map indicates that gambling premises are primarily located within the wards of higher deprivation.

### Local Gambling Participation



Recently Wolverhampton residents were asked as part of the city lifestyle survey to estimate their gambling activity. 16% of residents who completed indicated they consider themselves to take in some form of gambling.



Of those that identified as moderate to problem gamblers, 28% of respondents related their gambling to alcohol consumption



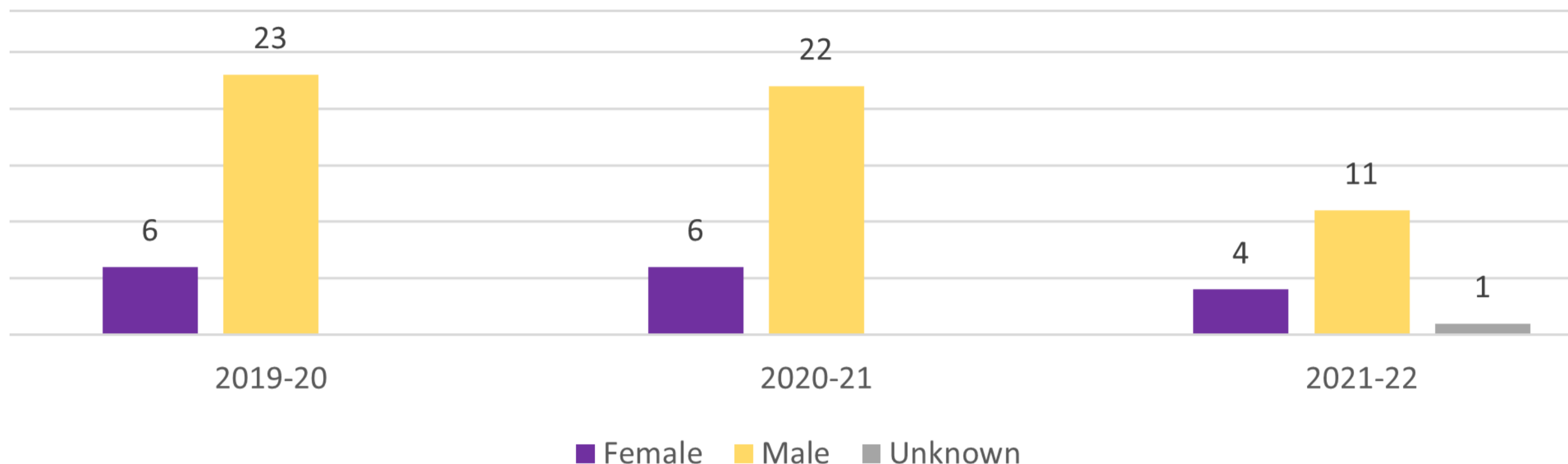
Based upon those that identified as moderate to problem gamblers 55% of respondents suggested their gambling activities were 'Remote gambling' and 45% 'Non remote gambling'

- I am a low risk gambler (13.71%)
- I am a moderate risk gambler (1.24%)
- I am a problem gambler (0.98%)
- I do not gamble (83.6%)
- Not answered (0.47%)

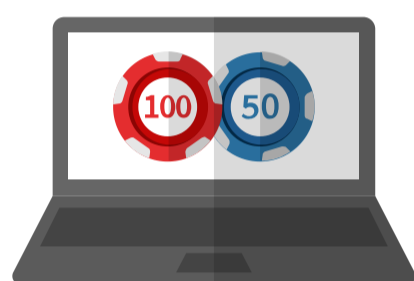
# Treatment and Support

Between 2019-22 a total of 70 Wolverhampton residents accessed a form of treatment related to gambling (delivered by Aquarius). This accounts for between 0.2-0.3% of the total population that have accessed treatment nationally during that period.

The gender breakdown identifies that 74% of those that accessed treatment were male.



'Remote gambling' has been identified as the main source of gambling that has led to those accessing treatment in Wolverhampton, increasing year upon year between 2019-2022



Online casino



Online gaming



Online betting

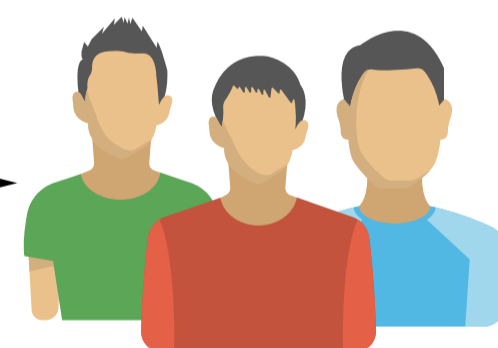
The Gordon Moody Association based in Dudley provide residential rehabilitation for those with gambling problems, treating severe gambling addiction. Between 2019-2022 a total of 17 Wolverhampton residents were referred into the service.



17 people referred in between 2019-2022



6 people accessed the service



## Criminal Justice Training

Across the UK, GamCare and networks of organisations have been providing training, support and specialised treatment within the Criminal Justice System (CJS).

78 professionals have been trained across the CJS including police custody suites, courts, prison and probation services.

No training has been delivered across Wolverhampton CJS

## Schools

A total of 6 secondary schools have delivered targeted education related to gambling as part of their personal, social, health and economic education (PSHE) curriculum in Wolverhampton

PSHE curriculum should address gambling explicitly in later years but it should also be addressed implicitly at all key stages, thereby underpinning learning.

Since 2020, Y-Gam have delivered training to 5176 young people and 803 professionals.



# Support Services

The National Gambling Treatment Service (NGTS) is a network of organisations, working together to provide confidential treatment and support for anyone experiencing gambling related harms and is free to access across England, Wales and Scotland.



Be Gamble Aware is an independent charity and commissions evidence-informed prevention and treatment services in partnership with expert organisations and agencies.

The charity is the most prominent organisation active in all three areas of research, education and treatment.

42% increase nationally in referrals for treatment between April - September 2022 compared to April - September 2021

A clinic has recently opened in Stoke-on-Trent, part of the Midlands Partnerships NHS Foundation Trust, to treat people with serious addiction issues ([the NHS long term plan](#))



Self  
exclusion

Self exclusion is a tool used by those who have recognised their gambling is harmful to them. Individuals can self exclude via [multi-operator self exclusion scheme](#)

[GAMSTOP allows people to self-exclude from online operators](#)

# Wider Impacts and Harms

## Mental Health



**19,815**

When comparing gamblers who have not experienced harm with those classed as 'problem gamblers', these individuals were two and half times more likely to report anxiety or depression

In Wolverhampton during 2016/17 there were 19,815 adults with depression known to their GP

## Suicide

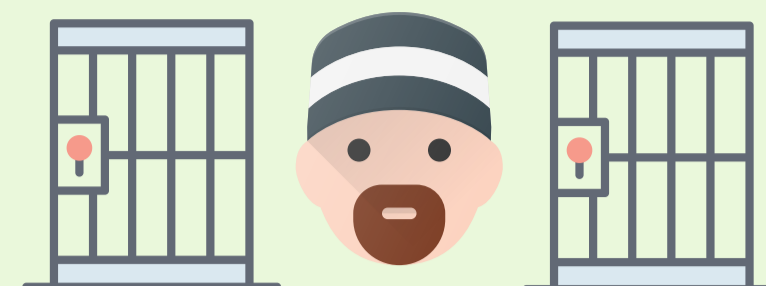


**4-11%**

An estimated 250-650 suicides are linked to gambling per year, equating to 4-11% of all reported suicides

In Wolverhampton between 2019-20 there were a total of 37 reported suicides with 3% reported suicides primarily linked to gambling

## Criminal



There is an association between criminal activities enabling gambling activities to take place

Hotspot areas for criminal activities in Wolverhampton are located in St Peters, and are primarily associated to alcohol

It is not possible to form a direct link between gambling and crime in Wolverhampton

## Substance Misuse



There is clear association between gambling at all levels of harm and increased alcohol consumption

The risk of gambling harm is much greater in those that drink alcohol compared to non-drinkers. 74% of people consuming over 50 units a week participate in gambling with 11% classed as at risk gamblers, compared to 2% classed as at risk gamblers for people that don't drink

The link between alcohol and gambling is concerning given Wolverhampton has the highest alcohol specific mortality rate within a 1 year range in England during 2021 (21.5 per 100,000)

## Employment



Public Health England Evidence Review (2019) found that gambling participation was more common in those 'employed', 'self employed' or in 'training (64%)

However, individuals deemed at risk gamblers and problem gamblers, were more commonly most those unemployed

Just over 70% of working age adults in Wolverhampton are employed, having seen a decrease between 2020-2021

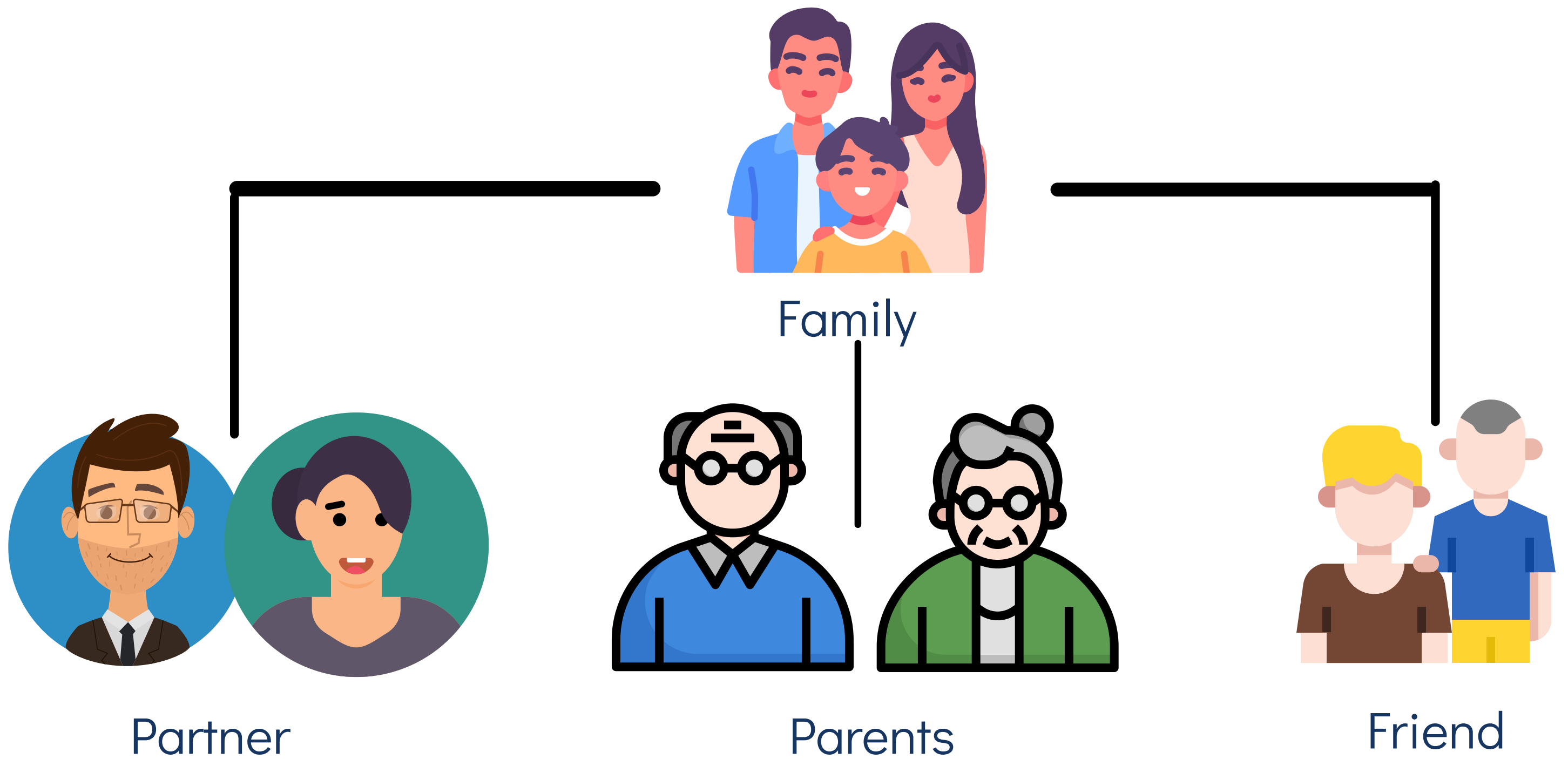
## Lifestyle

Highest levels of gambling participation are reported in those who have better psychological health and life satisfaction compared to those that do not. However, this is the opposite for those at risk and problem gamblers, where there is a higher prevalence of people with poor health and low life satisfaction and wellbeing.

In the 2011 census Wolverhampton residents scored 7.5 for life satisfaction, this is below the England score of 7.55. Residents of Bilston East and East Park reported high levels of poor health.

## Affected Others

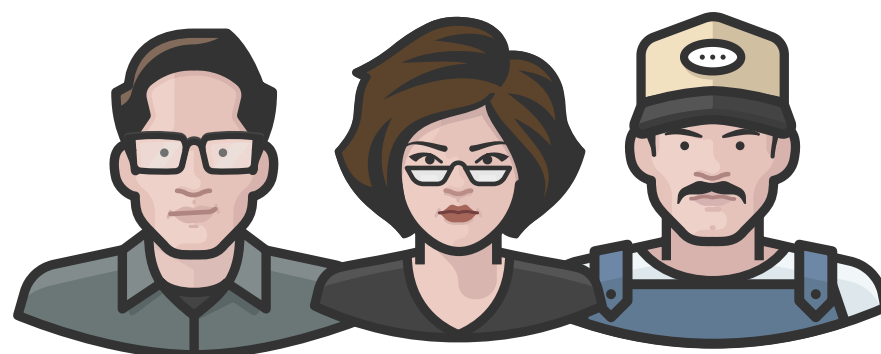
People that know someone who has had a problem with gambling, will often feel they have personally experienced negative effects from this person's gambling behaviour. Those affected include family members, friends, and work colleagues among others, with the negative effects ranging from financial, emotional, or practical impacts - You Gov 2021.



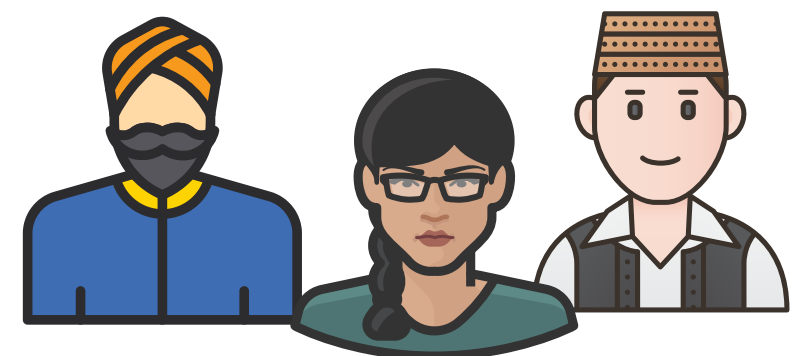
According to You Gov - Treatment and Support report (2021), immediate family (61%) are more likely to be affected by a problem gambler, this most commonly being a spouse or partner at 25%, followed by a parent at 21% or friend at 16%.

## Proportion of Population - National

**Gambling participation**  
Gambling participation most common in White and White British Ethnic group

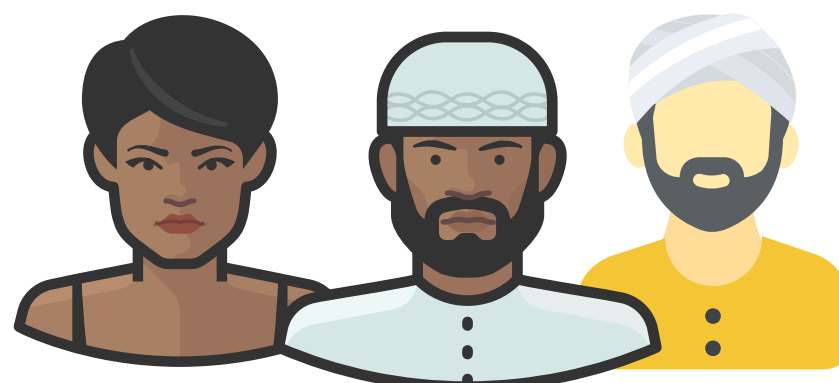


60%

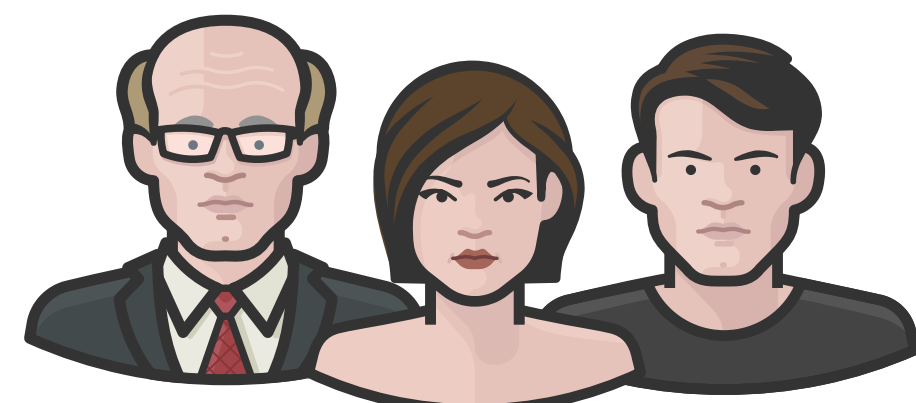


31%

**Problem and at risk gamblers**  
Those most at risk of problem gambling are most likely from an Asian and Asian British group



1.1%



0.5%

## Network

1

To create and develop a strategic multi-disciplinary 'Gambling Harm' partnership steering group, including partners from the voluntary, private, community, primary and secondary care sectors to tackle the growing concerns of gambling harms. The group will aim to share knowledge across emerging cohorts of concern and apply effective interventions using national strategies to endorse a local approach.

2

Develop a whole system approach, developing a systematic gambling strategy to prevent harm from arising and to ensure that individuals, families and communities have access to the right treatment and support.

## Data

3

Create a data sharing network/agreement with primary and secondary care colleagues both specific to gambling treatment and wider impact areas such as mental health services and substance misuse services to gain an understanding of gambling harms and the population groups affected.

4

Develop a robust data collection process utilising validated screening tools throughout local and regional services, such as mental health services, citizens advice, substance misuse services and housing to capture 'Gambling Related Harm' during initial screening appointments.

5

Undertake mapping exercises of current gambling premises, developing a 'Local Area Profile' to identify areas where there maybe greater risk of GRH in the community and specific population groups.

## Education

6

Secondary Schools: Current data intel suggests a gap in secondary schools delivering educational workshops with young people and professionals. Work with education colleagues to explore current nationally recognised training programmes with a view to implementing a universal approach through the PSHE network.

7

Health Related Behaviour Survey (HRBS): Current lack of data intel from young people in Wolverhampton based relating to their gaming and gambling activities. Inclusion of questions in the next HRBS to understand local prevalence of gambling and gambling harms.

8

Criminal Justice System (CJS): Wolverhampton CJS have not accessed nationally recognised training programme and resources. Working collaboratively we will aim to introduce and explore opportunities to integrate across the CJS workforce to educate and develop knowledge of gambling harms.

9

Raise awareness across wider workforce on the indicators of gambling harms, developing awareness of harmful behaviours indicative of gambling harms. Ensure pathways are in place to enable those at risk to be identified and referred at an early stages to reduce risk of further harms.