

## GAMBLING ADDICTION TREATMENT RECEIVES THREE TIMES LESS FUNDING THAN TREATMENT OF DRUG AND ALCOHOL ADDICTION, FINDS THINK TANK

## Embargoed until 23rd January 2018 at 22.00

A problem gambler in England receives approximately three times less funding than a problem user of alcohol or illicit drugs. This is according to a submission made by think tank ResPublica to the Department for Digital, Culture, Media and Sport Consultation on Proposals for Changes to Gaming Machines and Social Responsibility Measures, which closed today.

ResPublica has found that the total annual spend on problem gambling research, education and treatment (RET) in England amounts to only £133 per capita, compared to £377 per capita spent on drug addiction and £385 per capita spent on alcohol misuse. ResPublica is proposing a range of practical measures for Government to encourage greater social responsibility within the gambling industry.

The gambling industry contributes just 13% of the total current spend to RET (0.1% of industry profits) – with around £50m coming from the increasingly under pressure NHS. In the consultation document the Department for Digital, Culture, Media and Sport (DCMS) states it will consider a mandatory levy 'to ensure appropriate and effective player protection systems and to minimise the risk of harm from gambling'. ResPublica is recommending the introduction of such a mandatory levy set at 1% of industry profits to bridge the funding gap. This would raise £135 million and bring funding for gambling addiction treatment into line with the treatment for drug and alcohol addictions.

ResPublica argues that the industry contribution should become a "smart" mandatory levy - allocated proportionately according to a risk-based assessment of the level of harm associated with different products, as is in operation in New Zealand.

The submission also calls for problem gambling to be put at the heart of the Government's public health strategy and "a vision of public health that depends on the Department of Health and Social Care (DHSC) and the NHS, as well as DCMS. If problem gambling is a matter of public health, in need of independent strategy, we argue that it does not make sense for it to remain under the sole responsibility of DCMS."

ResPublica notes "concerns over the level of industry influence" in the overlap between fundraising and commissioning of research, education and treatment and believes as a result the opportunity for independent guidance and scrutiny of problem gambling RET is limited. "More could still be done to maintain independence not only within the commissioning and funding arrangements of the industry contribution, but also in the relationship between GambleAware, the Responsible Gambling Strategy Board, the Gambling Commission and the Government."

The introduction of an industry levy represents an ideal opportunity for review and for the potential for industry influence to be reduced. Instead of the same organisations overlapping in their responsibility for commissioning, funding and advising problem gambling RET, a mandatory levy would represent a "clean slate" with which these organisations can recalibrate their relationship.

Phillip Blond, Director of ResPublica said: "Our recommendation to Government to introduce a mandatory levy set at 1% of gambling industry profits would go a long away to achieving the much-needed parity of funding between treatment of problem gambling and treatment for problem alcohol and drug users. Extending oversight of problem gambling to DHSC would demonstrate that the Government is committed to improving public health and delivering a programme of wideranging social reforms".

## **Notes to Editors:**

The ResPublica Trust is an independent nonpartisan think tank. Through research, policy innovation and programmes, ResPublica seeks to establish a new economic, social and cultural settlement.

For further details and to receive a copy of the ResPublica submission please contact Brendon Marsh at <u>brendon.marsh@respublica.org.uk</u> or call 020 3857 8324.

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