

Advice from LEAP to inform the Gambling Commission's response to Government in relation to the review of the Gambling Act 2005

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Introduction

This document sets out the advice provided to the Gambling Commission (the Commission) by its Lived Experience Advisory Panel in relation to the Government's review of the Gambling Act 2005.

Background

In December 2020, the [Department for Digital, Culture, Media and Sport \(DCMS\) launched its review of the Gambling Act 2005](#). The Commission, as set out in section 26 of the Gambling Act 2005, is the government's statutory advisor on gambling.

The Commission's advice to government is underpinned by a wide range of available evidence. In addition, in the development of its advice, the Commission also seeks input from its own advisory groups – these are:

- Lived Experience Advisory Panel (LEAP)
- Advisory Board on Safer Gambling (ABSG)
- Digital Advisory Panel (DAP).

LEAP's role

LEAP's role is to provide the Commission with expert independent advice based on its members' personal lived experience of gambling harms. Our website has information on [members of LEAP](#), a [register of member's interests](#) and LEAP's [terms of reference](#).

LEAP's advice

LEAP was asked to give the Commission advice on each topic within the scope of the Government's Review of the 2005 Act. LEAP was also asked to highlight its top priority recommendations for the review to address and key issues where action could be prioritised within the Commission's existing powers and the current legislative framework. LEAP was also asked to flag any priority recommendations which fall outside the official scope of the review, but they recommend are considered at this time.

LEAP's advice is set out in this document. In each area, LEAP is asked to highlight recommendations for legislative change, and recommendations which could be taken forward within the existing legislative framework.

Priority recommendations

Introduction

This advice for the review of the Gambling Act 2005 is based on members of LEAP's lived experience of gambling harms. These experiences are direct evidence of the scope and reality of harms which are experienced by hundreds of thousands of people across the UK: gamblers, their families, friends and colleagues. They provide coverage and insight beyond the range of statistical analyses and qualitative studies undertaken by professional researchers and should be weighted accordingly alongside those other sources of evidence.

Members of LEAP are people from all walks of life and from a cross section of backgrounds, but whose lives have been severely blighted by gambling. We are clear examples that gambling disorder can and does affect anyone: people harmed by gambling are not weak or flawed individuals. Rather the development of addiction is a combination of early engagements with gambling, dangerous products, environment, individual circumstances and some appalling practices by the industry. We recognise that there is a great deal to be done to improve the evidence base around the scale and severity of harms caused by gambling and recommend that the Gambling Commission should urgently progress [work on gambling-related harms which has been identified to address this important gap](#)¹. We note that the [recent evidence review on gambling related harms by Public Health England](#)² produced an estimate of the economic and social cost of gambling, but noted that "... evidence quantifying harms for both groups is very limited. Other data limitations mean that we have only costed some harms ..., while we have not costed others at all." The report concluded that "the figure of £1.27 billion is an underestimate of the true scale of the total economic burden of gambling".

However, there is still an overwhelming amount of research and national figures which show that a large proportion of the population is severely affected.

- [all gamblers experience a risk of harm, but the 1 in 4 highest proportionate gamblers have a substantially higher risk of suffering harms](#)³
- [over 20 percent of the GB population is affected by gambling harms \(PDF\)](#)⁴
- [heavy gambling is associated with over 35 percent increased mortality](#)⁵

¹ Wardle et al., 2018, '[Measuring gambling related harms: a framework for action](#)', Gambling Commission

² PHE, 2021, '[Gambling-related harms evidence review: the economic and social cost of harms](#)'

³ Muggleton et al., 2021, '[The association between gambling and financial, social and health outcomes in big financial data](#)', Nature Human Behaviour (Further analysis agreed with authors). The report contains 30 charts showing the relationship between proportion of spending on gambling and a range of financial, lifestyle and wellbeing measures. All of the financial measures indicate a 'negative' relationship between gambling spend and the measures (for example, higher gambling spend linked to higher proportion of missed loan repayments). This relationship holds across the whole range of gambling spend, indicating that any gambling spend carries a risk of harm or has impacts which would generally be regarded as negative. We recognise that it is important to consider the type of gambling which people are engaged in and that some gambling products are more dangerous than others, but this data set does not allow that to be explored. However, across all the measures, for the top quartile of gambling spend (as a proportion of spending), the level of impact escalates rapidly. So that once spending on gambling reaches 2-4 percent of total spend the proportion of people missing loan or mortgage repayments, taking out payday loans, etc increases rapidly. Similar relationships are demonstrated for a range of social factors including spending on hobbies, social activities, fitness and travel, though it could be argued that these are lifestyle choices. Similar relationships exist for likelihood of unemployment and 'nights awake'. Therefore, on balance it appears that the top quartile of gamblers ("1 in 4") are at a substantially higher risk suffering a range of harms than those who gamble less.)

⁴ Briony Gunstone & Kate Gosschalk, YouGov March 2020: '[Gambling Treatment and Support](#)' (PDF)

⁵ Muggleton et al., 2021, '[The association between gambling and financial, social and health outcomes in big financial data](#)', Nature Human Behaviour

- there are [250-650 gambling related suicides each year in the UK \(PDF\)](#) ⁶
- between [340,000 and 1.4 million adults \(PDF\)](#) in the UK are classified as 'problem gamblers' (PDF) ^{7,8}
- the [vast majority of gambling harms are suffered by people who are not classified as 'problem gamblers'](#) ⁹
- over [55,000 11-16-year-olds in the UK are classified as 'problem gamblers'](#). ¹⁰

LEAP recognise that it is important to draw on a wide range of different types of evidence from a range of stakeholders. However, many members of LEAP are involved with organisations and other individuals operating in the gambling landscape, including treatment, education and support providers so that our own views are informed by wider evidence and interactions with these many different individuals, groups and organisations. We believe that people with lived experience of gambling related harms are uniquely placed to provide insight, ideas and solutions to ensure that the real problems are identified and tackled effectively.

Dealing with addiction which can affect anyone

A core insight from our collective experience which underpins many of our recommendations is the understanding that we are dealing with an industry, products and activities which can cause gambling disorder: a condition classified under the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM V).

Wide lived experience reports this as a chronic condition which can happen very rapidly and in which abstinence is maintained with great difficulty. Acute episodes of even short duration can have dire financial consequences, but even worse they are highly correlated with suicide attempts and completion. Therefore, we require solutions which acknowledge the speed of onset, the complexity of the condition and the catastrophic consequences that can result from even a short engagement. In summary:

- the onset of gambling addiction can be rapid – weeks and/or months not years – which means that people are addicted before anyone (including themselves) is aware of it. This indicates that the principle of early identification of “problem gambling” is flawed and will be too late for many
- the consequences of a single short gambling session can be catastrophic both financially and to health and life. This indicates that interventions need to be instantaneous and involve hard stops
- addiction robs the individual of their cognitive capacity, increases risk taking and impulsivity so that capacity for rational decision making while engaged in gambling is severely reduced. This indicates that messages, voluntary controls or limits cannot be effective.

⁶ Gambling with Lives, 2020, [Gambling – Suicidal Ideation, Attempts and Completed Suicides \(PDF\)](#)

⁷ NatCen, 2018: '[Gambling behaviour in Great Britain in 2016: Evidence from England, Scotland and Wales \(PDF\)](#)'

⁸ NatCen, 2020 '[Treatment Needs and Gap Analysis in Great Britain: Synthesis of findings from a programme of studies \(PDF\)](#)'

⁹ GREO, 2021, [Understanding gambling harms](#)

¹⁰ Gambling Commission (2019) '[Young People and Gambling Survey 2019](#)'

Precautionary Approach

It is our clear view that the Gambling Commission must be bold in the recommendations that it makes to DCMS and operate on the precautionary principle which prioritises harm minimisation. The Commission was seen by many to be out of touch with the evidence and the mood of the public over the reduction in fixed odds betting terminal (FOBT) stake limits which was imposed in 2019. Since then, the Commission has taken a more proactive role, based on information from their own practice and activities, in strengthening regulation through actions such as banning gambling on credit, tightening ID and age verification and imposing restrictions on game design.

However, it is LEAP's view that the Commission has not been sufficiently bold across a number of areas, citing a lack of robust evidence to be able to justify stronger intervention. During the consultation in 2020 on changes to licence conditions and codes of practice on High Value Customers, the Lived Experience Interim Group strongly recommended that VIP schemes should be banned. Instead, the Commission proposed a set of changes to their conduct and management. LEAP believe that the strength and unanimity of testament by lived experience, both from the Lived Experience Interim Group and/or LEAP and across the wider community of those harmed by gambling, should have provided the strength of evidence required. We re-state our position that VIP schemes should be banned.

We believe that the Commission has required an inappropriate standard of evidence to make any changes to the status quo. LEAP strongly believe that there is substantial evidence which clearly shows the scale and severity of the harms caused by gambling and that there is good enough evidence to indicate changes need to happen across a number of areas. For instance, it is widely agreed that spin speed of slots is a significant determinant of their addictiveness and danger. There may not be evidence to show that a particular spin speed is safe or safe enough, but we know that current products are highly addictive and dangerous, therefore there can be no justification for maintaining the current 2.5 secs speed. Instead, the Commission should specify a much slower spin speed, while commissioning research to establish the relationship between spin speed and addictiveness and/or danger to allow a more informed decision to be made.

The same applies to the debate around the relationship between advertising and problem gambling, which is explored later. We must recognise that for gambling regulation, as for most areas of public and social policy, it will never be possible to achieve an evidence base of laboratory standard evidence, as operating randomised control trials on gamblers would be infeasible and unethical.

LEAP strongly recommends that the Commission should itself be taking a precautionary approach, prioritising harm minimisation, in developing its own recommendations. It should also recommend that DCMS must take the same precautionary approach.

Preventative public health approach to protect the whole population, not just protecting the vulnerable

As already noted, LEAP members come from a wide variety of backgrounds. We certainly do accept that some people are more vulnerable to gambling harms for a variety of other mental health, social conditions or targeting by the industry and agree that this must be recognised across all gambling and regulation. Therefore, an overall duty of care on gambling

companies is required to ensure that they fully consider the specific circumstances of each individual.

However, our experiences are a clear demonstration that gambling disorder can and does affect and harm anyone. We and our family members were not vulnerable in any accepted sense of the word. Rather we were victims of circumstances of our particular engagements with gambling, all undertaken with no information or warning about the dangers of the products or activities that we were using. Our experiences also challenge the industry favoured responsible and/or safer gambling narrative which places the responsibility for curbing gambling harms on:

- the individual who gambles responsibly
- responsible operators who offer safer gambling interventions to enable individuals to gamble responsibly.

We note that there is little evidence of diligent identification and action on gambling harm from the industry at any level. Recent research identified that [only 0.13 percent of online customers had had a telephone contact with the operator in the year](#)¹¹, despite 'problem gambling' [rates of up to 9.2 percent for online slots and casino products \(PDF\)](#)¹². Further, only 0.84 percent of customers losing more than £2,000 during the year had received a call.

We also note that the industry relies on a small proportion of customers providing the vast majority of their profits. The [recent House of Lords Inquiry into gambling harms](#) identified that 60 percent of profits come from just 5 percent of customers who are classified as 'problem gamblers' or 'at risk'¹³. The figures are more extreme for online gambling where [over 80 percent of profits come from just 5 percent of customers](#)¹⁴. This is a business model which appears to rely on addiction and are way beyond the figures which exist in normal or responsible industries.

The recognition that we are dealing a range of gambling products, many of which are highly addictive and dangerous, delivered by an industry which has consistently demonstrated that it is not capable of acting to protect the well-being of all its customers, must underpin all legislation and regulation in respect of the industry. Considering the widespread and devastating harm that gambling can cause to the public, it is imperative that a preventative public health approach to tackling gambling harms is taken.

LEAP Evidence and Recommendations

Our advice is set out under the six headings defined in the Government's Call for Evidence. We are recommending a broad package of measures in recognition of the complexity and inter-related nature of gambling harms. We note that some of these recommendations do not require new primary or secondary legislation but can be implemented by the Gambling Commission within its existing powers. Others, such as changes to advertising and

¹¹ NatCen (2021) '[Exploring Online Patterns of Play](#)'

¹² NatCen (2018) '[Gambling behaviour in Great Britain in 2016: Evidence from England, Scotland and Wales](#)' (PDF)

¹³ House of Lords Select Committee on the Social and Economic Impact of the Gambling Industry (2020) '[Gambling Harm – Time for Action](#)'. We recognise that some of the research which contributed to this report is dated, however, more recent studies do not contradict these figures and in many cases show even more extreme imbalances.

¹⁴ NatCen (2021) '[Exploring Online Patterns of Play](#)'

marketing, will require new legislation. We strongly believe that all recommendations should be implemented as soon as possible.

Online protections

- robust affordability checks with clear thresholds for action, including mandatory and hard stop interactions and a clear definition of affordability
- Single Customer View overseen and run by a third party which is entirely independent of the industry to allow monitoring and action across all of an individual's gambling activities
- actions on product design and characteristics to make them less addictive and dangerous, including product addictiveness and/or danger classification and further precautionary design changes to impose maximum £2 stake for online casino and/or slots and a substantial reduction in maximum spin speeds
- in addition to new detailed specifications to licence, conditions and codes of practice (LCCP), a 'Duty of Care' which would require operators to "do everything reasonably practicable to prevent harm" should be imposed on all gambling operators.

Advertising, sponsorship and branding

- end all gambling advertising and sponsorship, including National Lottery products
- end VIP schemes, free bets and all inducements to gamble
- end all branded safer and/or responsible gambling messaging, to be replaced by public health messaging and a wider campaign which is independent of the industry.

Age limits and verification

- all gambling, other than cranes and coin pushers to be adults only (18+)
- no child friendly imagery associated with any gambling product
- more rigorous age verification processes
- improved and expanded education and awareness, funded, developed and approved independent from the industry
- greater protections and information for 18-25 age group.

Consumer redress

- creation of a Gambling Ombudsman to provide dispute resolution entirely independent from the industry and allow redress for individual consumers failed by LCCP social responsibility breaches
- financial redress available to all affected individuals, including parties, regardless of whether the claim is based on terms and conditions third (T&Cs) breaches or social responsibility failures
- immediate changes to make the existing processes clearer and safer for the individual.

Gambling Commission powers and resources

- overall remit to be based on treating gambling as a public health issue with a clear objective of minimising gambling harms by protecting the whole population as opposed to protecting the vulnerable

- greater prescription within LCCP, including mandatory and hard stop actions and proactive enforcement but underpinned by a duty of care for their customers on all gambling operators
- increased resources and flexibility in regulation to allow more rigorous enforcement, to future proof regulation and ensure that the Commission can keep up with and respond to technological and other innovation.
- statutory levy to fund prevention, research, education and treatment to be administered entirely independently from the industry.

Land-based gambling

- account-based play to allow the same monitoring and protections recommended for online gambling
- technology to improve self-exclusion and protect staff
- actions to make gambling machines less addictive and dangerous and alignment with online gambling
- greater powers for local authorities to control the number and prominence of gambling venues.

Treatment

- treatment needs to be commissioned and administered by the NHS to guarantee a genuine national treatment system which is fully integrated with primary care and other mental health services.

Gambling and gaming

- the Commission or other regulatory body to be given formal oversight of gambling and gambling-like activities within computer games.

Experts by experience

- Recommend that the Secretary of State should approve the appointment of a 'Lived Experience Commissioner' to the Board of the Commission.

Online protections

LEAP's advice on the protection of online gamblers, including rules to minimise the risks associated with online products themselves, and the use of technology to support harm prevention.

Many LEAP members have had catastrophic experiences of gambling over many years. Several had received perfunctory email contacts which may technically have satisfied regulations, but none had had any meaningful engagement with operators, despite losing very large sums of money and demonstrating clear signs of disordered gambling. We know that this continues to be the case for people suffering gambling disorder.

The online gambling sector is unusually reliant on a small proportion of customers, many of whom are likely to be at a high risk of harm. [Recent Patterns of Play research](#) showed that in

sports betting the industry made 86 percent of its profits from just 5 percent of its customers, and online casinos and slots around 80 percent from just 5 percent of customers.¹⁵

There is little evidence, however, of diligent identification and action on gambling harm from the industry at any level. The same research identified that only 0.13 percent of online customers had had a telephone contact with the operator in the year, despite problem gambling rates of [up to 9.2 percent for online slots and casino products \(PDF\)](#).¹⁶ Further, only 0.84 percent of customers losing more than £2,000 during the year had received a call.

LEAP do not believe that this is a safe environment for customers, and there is a high risk of harm for people using these products. Our advice in this section therefore focuses on the need for:

- robust affordability checks with clear thresholds for action, including mandatory and hard stop interactions and a clear definition of affordability
- a single customer view which is overseen and run by a third party which is entirely independent of the industry, so that data is used to protect players online based on their overall gambling activity, not just the narrow slice visible to each operator
- actions on product design and characteristics to make them less addictive and dangerous including product addictiveness and/or danger classification and further precautionary design changes to impose maximum £2 stake for online casino and/or slots and a substantial reduction in maximum spin speeds
- duty of care requirement on all gambling operators.

Affordability checks

LEAP recommends the need for affordability assessments as an absolute requirement specified by the Gambling Commission. These are a key preventative measure to help reduce gambling related harm. Affordability and/or identity checks must be carried out at the appropriate time, for example at the point of deposit and not at the point of withdrawal. Despite changes brought in to address this, from our contacts with people who are still gambling or seeking treatment or redress from gambling companies, we know that too many operators are still exploiting customers by allowing them to deposit only to inform them following further checks at a later stage in the process.

LEAP recommend that thresholds are set that will trigger action at a level of spending which could realistically lead to harm for the majority of consumers. The thresholds must be set at a level which are likely to be preventative, rather than identifying individuals who have already developed gambling disorder. Drawing on our own personal experience a threshold level of around £100 gambling net spend, or loss, is the appropriate level to trigger these checks. This would not impact the majority of customers, 95 percent of whom lose less than £100 a month. This level is supported by others harmed by gambling, with [one survey finding that 92 percent stated that there should be effective affordability checks \(PDF\)](#) for anyone losing over £100¹⁷, and the general public, where [72 percent supported affordability checks](#) for those losing over £100 a month, with just 10 percent disagreeing¹⁸. We note that at least [9.2 percent of customers using online slots and casino products are classified as](#)

¹⁵ NatCen 2021 '[Exploring Patterns of Play](#)'

¹⁶ NatCen 2018 '[Gambling behaviour in Great Britain in 2016: Evidence from England, Scotland and Wales](#)' (PDF)

¹⁷ GamFam/GamLearn 2021 '[We Are the Evidence Too](#)' (PDF)

¹⁸ Survation 2021 '[MPs and 'red wall' voters strongly backing tougher rules on gambling](#)

[‘problem gamblers’ \(PDF\)](#) ¹⁹ so there should be an expectation that at least this proportion should be having a significant intervention by an operator.

We believe that it is important for the affordability assessments to be as robust as possible as disordered gamblers are often good at managing money and are able to disguise debt. It is recommended that a wide range of financial information is required to be assessed such as income, personal debt, use of loans, use of overdrafts, mortgage arrears, etc. This would allow the whole picture to be considered. One member of LEAP had a severe level of debt and was using debt management services at the height of their gambling, this is a clear indicator of harm and should be part of affordability criteria.

We also recommend that assessments should ensure that gambling is funded only through regular income and must not take into account factors such as inheritance, life savings, redundancy, personal injury pay-outs or capital disposal such as house sales. These are not good indicators of longer-term affordability and in some cases may themselves be indicators of an individual being at higher risk.

The onset of gambling addiction can be rapid; it robs the individual of their cognitive capacity and capability for rational thought while gambling, and the consequences of a single session can be catastrophic. Too many existing player protections rely on the concept of ‘responsible gambling’, where the person suffering from addiction is expected to moderate their own behaviour. This runs contrary of our experience of gambling harms and a wealth of wider research about addiction more generally. Therefore, interventions need to be rapid, mandatory and involve hard stops. There must be a clear requirement for operators to intervene, with the most severe penalties if they fail to do so.

Examples of LEAP’s experience

"I've never bet more than £50 and my average stake was £8.01 but still ended up in £10,000's of debt, bankrupt and suicidal... I wouldn't have hit triggers of £500 plus and therefore that wouldn't have made the slightest bit of difference to my situation. £100 net loss limit would have made a huge difference to me because I spent over that but certainly not over £500."

"I think it's more important to address problem gambling at the lower spend threshold as in my case this was when the habits were being formed and the addiction was taking hold, by the time I was spending at the higher levels I was almost beyond help."

Single Customer View (SCV)

We understand that the industry already holds and uses a considerable amount of information about their customers' circumstances and gambling habits however, they can only see how an individual is gambling on their own website. This is a major weakness which needs addressing.

¹⁹ NatCen 2018 '[Gambling behaviour in Great Britain in 2016: Evidence from England, Scotland and Wales](#)' (PDF)

Example of LEAP's experience: we know multiple accounts more associated with harm

"My online gambling started only when I was in hospital due to a serious illness and couldn't get to a betting shop, where up until then I had managed to hide most of my gambling.

"I started gambling online with a few operators but mainly with one major company. After a month of heavy gambling almost immediately after opening the account, the operator contacted me to raise a concern about my gambling and wanted evidence that I could afford what I was gambling – which in a month was around £100k with them. Although done way too late, they did at least step in at some point and consequently shut down my account.

"However, I was immediately able to open up accounts with two other reputable operators and continue the same level of betting straight away with no questions asked about previous betting episodes. In fact, I was bumped straight into VIP status within a week.

"The implementation of a SCV would not only have 'flagged' me at the first operator earlier but other operators would have been able to see this prior activity along with the fact the first operators ceased trading with me.

"The ease of jumping from one operator to another is quite scary and the fact that I was able to do this with the mainstream companies is shocking."

LEAP recommend that online protections are underpinned by affordability with a single customer view to ensure that a complete picture of customers' gambling behaviour is used to trigger action. However, LEAP recognise that gambling harms are not just about amounts of money lost and that there are a range of other factors which indicate the real harm to people's mental health. SCV would also allow the real time monitoring of other indicators of harm, such as length of time spent in a gambling session. We believe that a robust SCV is an essential element for detecting harmful gambling behaviours and ensuring that relevant prevention and protection is implemented.

Example of LEAP's experience

"Gambling affected me financially of course, but the more underlying impact was the effect gambling had on my mental health due to the sheer volume of time I was gambling day in day out. As my mental health declined and was further isolating myself, I attempted to take my own life, resulting in three months support in psychiatric care, followed by two years of ongoing mental health team support. By this time the financial situation had resolved itself yet I was still impacted by the time spent gambling and my physical and mental wellbeing."

We believe that there must be third party involvement, independent of the industry, in the development and implementation of SCV, but that the overall development must be owned by the Commission. [The gambling industry is not trusted by the majority of the public](#)²⁰ and there is considerable concern about gambling companies accessing and sharing more data about their customers for their own purposes rather than customers safety. There is probably also a role for a newly created gambling ombudsman and the financial sector, particularly banks, where lenders can see a customer's overall situation through credit files, before lending responsibly. The financial sector should play a central role in developing a single

²⁰ [Gambling behaviour in 2021: Findings from the quarterly telephone survey](#). Gambling Commission.

customer view to help prevent gambling harm. They hold much of the information required and have the skills and experience to contribute to this work. LEAP welcome the [Commission's early engagement with the financial sector \(PDF\)](#)²¹ and hope to see further progress in this area as a result.

There needs to be a real urgency in developing SCV. The industry does not have a good track record of implementing preventative measures, as evidenced by the five or more years that it took to implement GAMSTOP across the industry. Therefore, the group believe that the following conditions must be applied to ensure that the industry delivers a working solution to SCV within a reasonable timescale:

- the proposed £100 affordability trigger should be lowered substantially if a robust SCV is not delivered within 12 months
- operators with multiple brands and products should immediately implement SCV across all their products, brands and websites.

Example of LEAP's experience

"In 2013 the development and implementation of GAMSTOP was handed over to "the industry" by DCMS and the Gambling Commission with the expectation that it would be implemented across operators quickly.

"By a terrible coincidence, on the 23rd November 2017, the day after my son had taken his own life because of his gambling addiction, [Lord Browne had secured a debate in the House of Lords on online gambling](#)²² During the debate he referred to the fact that in 2014 he had been persuaded to withdraw an amendment to require a 'multi operator self-exclusion scheme' for online gamblers only because of a guarantee that this was in hand and that substantial progress would be made in six months. In fact, development took a further five and a half years with the Gambling Commission only introducing the requirement that online operators sign up to GAMSTOP in 2020."

Action on product design characteristics to make them less addictive and dangerous

There is good evidence which identifies the characteristics of products which make them addictive – speed and continuity of play, stake size and prize structures, and various design features. We welcome the [Commission's recent changes to online game design](#) with prohibitions on auto-play and reverse withdrawals.²³ But in LEAP's view, these do not go far enough.

A maximum spin speed of 2.5 seconds or over 20 plays per minute is a very high speed and frequency of play. Although this change was justified on the basis of achieving parity with spin speeds on land-based machines, there is no evidence to suggest that is a safe speed of play in any environment, on or offline.

We acknowledge that current research cannot determine exactly how different product characteristics interact with each other to produce a particular level of addictiveness.

²¹ [Shard Financial Vulnerability Summit 2021: Reducing risks, tackling harms \(PDF\)](#), Gambling Commission, May 2021

²² [Hansard, 2017](#)

²³ [Online games design and reverse withdrawals](#), Gambling Commission, February 2021

Independent research must be commissioned to test and establish the addictiveness of individual and combinations of products characteristics. We must move to a position of existing gambling products being assessed and classified according to their addictiveness and potential to cause harm. The addictiveness and danger of new products should also be assessed at assessment centres which are completely independent of the industry. However, this must not prevent action being taken now to make existing products much less addictive.

Therefore, some products will need to be changed or not allowed onto the market in their current form. A precedent for this was set by the imposition of a £2 maximum stake on FOBTs – [these products were associated with over half of all ‘problem gambling’ in the UK in 2018 \(PDF\)](#)²⁴ – and therefore changes to these products are very likely to have reduced harms experienced. Further action is needed on products with similar potential to cause harm.

Measures should include:

- maximum stake limits of £2 must be imposed on online casino and slot products to bring them in line with land-based machines outside of casinos
- speed of play to be further reduced. High staking doesn't have to be on one bet, it could be an amount spent over a period of time. Compulsive gamblers focus on quick fixes, quick outcomes, so speed of play is a big factor
- duration of gambling sessions to be monitored with a view to imposing mandatory hard stops, potentially an auto-logout for players logged in for a long period of time and interventions for customers displaying this pattern of gambling. Online gambling sessions involve intense and frequent play, sessions of 30 minutes or less still create significant opportunities for harm to be experienced. A single customer view is needed to support this type of intervention and prevent play simply continuing across multiple websites
- in-play betting provides a similar high frequency of ‘quick-fix’ play to slots, with some studies [showing addiction rates for ‘micro-betting’ of 78 percent](#)²⁵. In-play betting, as opposed to pre-game wagering, can lead to an increased perception of skill and those betting in this way are more likely to chase losses because of the multiple fast-paced opportunities to gamble it presents. Continuous gambling poses greater risks as it offers the opportunity for rapid and impulse betting decisions without the time for reflection. Therefore, action to limit the amount and frequency of in-play betting must be taken.

Duty of Care

The group recognise the pitfalls of the Commission specifying detailed requirements on product design, customer interactions and customer protection measures. In particular we believe that the industry has shown that it will develop work arounds which they will claim are not covered by specific regulation. Therefore, to nullify that approach, we believe it will be necessary for regulation to continue to state the broad aims and expected outcomes of particular areas of regulation but also with an enforceable duty of care on operators, which

²⁴ [Addictive gambling products \(PDF\)](#), Gambling with Lives, 2020

²⁵ A. Russell et al (2018) [‘Who Bets on Micro Events \(Microbets\) in Sports?’](#) Journal of Gambling Studies

would require operators to do everything reasonably practicable to prevent harm in addition to following prescribed actions.

Example of LEAP's experience

"I had moved house and found I was able to sign-up with my new address details. When I lost, I lost, but any time I won the checks carried out at withdrawal would flag me as an excluded player and so no winnings would be paid. My addiction was so strong I carried on playing even though I knew I could only lose."

Marketing and advertising

LEAP recognise that there are many different forms of gambling advertising and marketing across a whole range of media including television, press, radio, social media, direct marketing and more. Members can attest strongly to the impact that marketing had on their initial engagement with gambling, prolonging their involvement and contributing to their relapses into gambling. They also note that people leaving self-exclusion are immediately bombarded with adverts and offers to lure them back into gambling.

Examples of LEAP's experience:

"I would have moments of desperate resolution during which I would self-exclude from every gambling site I played and promise myself I was done. But then I'd be watching a film or browsing social media and an ad would come up featuring spinning reels or offering sign up bonuses, or matched deposits. I'd start to wonder whether I could sign up, if this was a new site I hadn't excluded from, or if not, I was inspired to look for one. And from that point it was just a matter of time, once that thought was put in my mind, I just couldn't get it out. Even now two years into recovery I still feel triggered by gambling advertising."

"I self-excluded, from a number of sites, when I started to realise I had become addicted to sports betting. I continued to get marketing communications from a couple of gambling companies I had excluded myself from. As soon as the self-exclusion period ended, I was bombarded by even more promotional material offering me free bets and spins. It was just relentless."

[Research by the Commission on how consumers engaged with gambling advertising](#) ²⁶ confirms this, finding that advertising for gambling companies had substantial effects on gamblers with:

- 13 percent saying it prompted them to start gambling for the first time
- 16 percent saying it prompted them to increase the amount they gambled
- 15 percent saying it prompted them to start gambling again after they had taken a break
- 10 percent saying it prompted them to gamble on new products.

The impacts of advertising on social media, sponsorship, free bets and direct marketing were even stronger.

We strongly dispute the industry claim that gambling advertising does not affect gambling participation and problem gambler rates, which seems to be mainly based on [2014 review](#)

²⁶ Gambling Commission 2021 [Understanding how consumers engaged with gambling advertising in 2020](#)

[on gambling advertising by Per Binde \(PDF\)](#) ²⁷. In fact, there is overwhelming evidence to the contrary, with Per Binde's most recent research concluding "[for a considerable number of people, gambling advertising substantially contributes to problem gambling](#)" ²⁸. Gambling companies have been very successful in targeting young people, with numerous studies attesting to strong brand recall and one even finding that children and young people could identify up to 70 percent of listed gambling brands. ^{29,30}

We also know that people who are exposed to gambling advertising are more likely to gamble, with the likelihood of a current non-gambler spending their own money on gambling in the near future increases significantly among people that have been exposed to high volume of gambling advertising over the past month ³¹.

Advertising also persuades people to gamble when they hadn't intended to. Although advertising has a cumulative effect on most people, it elicits a much more immediate response with those already interested in or experienced with the product – gamblers and those at risk or identifiable as problem gamblers. An [Ipsos MORI report on the impact of gambling marketing and advertising on children, young people and vulnerable adults](#) ³² found that people suffering with gambling disorder found it increasingly difficult to maintain control and abstain when they were surrounded by gambling advertising in public spaces.

LEAP believe that strong action is required across all areas of advertising and marketing, including safer gambling messaging. For clarity, our recommendations cover all forms of gambling, including the National Lottery since that now includes a range of instant win scratchcards and online products. LEAP recommends the following:

- end all gambling advertising on television, radio, print, social media, other media and direct marketing. Gambling should be treated like tobacco, tolerated but not promoted
- end all gambling sponsorship of sports, other events and television programmes
- end VIP schemes, 'free' bets and all inducements to gamble
- end all branded safer and/or responsible gambling' messaging, to be replaced by public health messaging and a wider campaign which is independent of the industry.

These recommendations are based on the following three concerns:

- digital marketing practices - the need for current regulation to respond to the contemporary digital marketing landscape in which gambling brands and consumers operate
- content of gambling marketing - our concern that the current focus on socially responsible content in marketing communications and tactics is not respected by operators and does not protect the wider population from gambling harms

²⁷ Per Binde, 2014, '[Gambling advertising: a critical research review](#)' (PDF)

²⁸ Per Binde and Ulla Romild, 2019, '[Self reported negative influence of gambling advertising in a Swedish population base sample](#)',

²⁹ Ipsos Mori (2020) '[Final Synthesis Report: the effect of gambling marketing and advertising on children, young people and vulnerable adults](#)'

³⁰ I. Wybron (2018) '[In a world of temptation, messages to promote healthy norms around gambling must be loud and clear...': Reducing the odds: an education pilot to prevent gambling harms.](#)'

³¹ Ipsos Mori (2020) '[Final Synthesis Report: the effect of gambling marketing and advertising on children, young people and vulnerable adults](#)'

³² Ipsos Mori (2020) '[Final Synthesis Report: the effect of gambling marketing and advertising on children, young people and vulnerable adults](#)'

- the normalisation effect of marketing of an industry with significant propensity for causing harms through the proliferation of advertising and marketing and the barriers to treatment this creates.

In addition, this section of the advice discusses safer gambling messages which, in LEAP's view, are both ineffective and demonstrate a complete under-estimation of the power of addiction.

Regulation that responds to the contemporary digital marketing landscape

Despite being subject to ministerial-level review in 2014 and 2017/18, it is LEAP's experience that gambling advertising rules do not currently enable regulation to respond effectively to the advertising and marketing practices of gambling operators. We are particularly concerned by the proliferation and penetration of digital marketing tactics.

Research noted that total spend by gambling companies on marketing had gone [up by 56 percent in the three years from 2015 to 2018](#).³³ In that year, companies were spending five times more on their online marketing strategy than on television, meaning 80 percent of all gambling marketing spend was online.

These digital channels include direct email marketing, paid search advertising, extensive native and paid-for social media promotions, and celebrity influencer contracts. The increasing use of these digital marketing tactics means that gambling promotions have become a regular feature on the general population's social media channels and search activity, often appearing among consumers' personal photos, posts and timelines, charting their everyday life. From there, with a single click, they can find themselves on a gambling site.

Meanwhile, the range and accessibility of internet-connected devices has revolutionised ease of access to consumers by operators wishing to promote their products. The majority of the population carries internet access around with them in their pockets on their mobile phones. This gives gambling operators significantly more influence than they enjoyed at the time of the publication of the last Gambling Act in 2005.

The rapid expansion of marketing and advertising of highly addictive products is extremely concerning in its own right. LEAP is further concerned that too many bodies play a role in regulating advertising, meaning robust regulation is not the primary responsibility of any single organisation. This piecemeal approach to regulation, involving Ofcom, the Advertising Standards Authority, the Committee of Advertising Practice, and the Gambling Commission makes it impossible for regulation of these potentially high-risk products to be pre-emptive and the response to breaches swift and decisive.

In the experience of panel members, the most stringent protection measures against invasive advertising and marketing practices when suffering pronounced gambling harms was to self-exclude. And yet we feel strongly that it should be possible for consumers like us to rely on regulation that is fit-for-purpose and robust to protect them from products that are known to cause significant harms, as is the case for tobacco products.

³³ [Regulus Partners, 2018](#)

LEAP is sympathetic to the significant challenges presented by regulating the marketing and advertising practices of an enormous industry wishing to promote a diverse and ever-expanding range of products. Given the scale of the industry and the products it sells, we feel confident that any attempt to apply different rules around marketing and advertising to different gambling products or different marketing channels would render the regulation unenforceable by oversight bodies and undeliverable by operators.

Therefore, it is our recommendation that no further marketing, advertising or sponsorship of gambling products should be permissible by operators.

Expectation of socially responsible content not respected by operators

The current focus of existing regulation aims to ensure that content featured in gambling advertising is socially responsible. However, the advertising and marketing that LEAP has seen over the years paints a very different picture indeed, especially where it explicitly incentivises gambling. [Recent research on the impact of wagering inducements on the gambling behaviours of on-line gamblers](#) has confirmed that a whole range of “inducements to wager” increase gambling intensity and frequency of gambling with the strongest effects for “at risk” gamblers.³⁴

There is a concerning lack of transparency in adverts promoting free bets, specifically the amount of play that's actually required to withdraw any winnings from the initial free bet. Often customers are required to deposit up to five times the value of an initial free bet before they can withdraw any winnings related to the initial promotion. Promotions like these, that intentionally mislead potential customers, encourage prolonged gambling spend and activity, exposing the customer to higher level of risk and harm. This point is evidenced by the tragic recent case of Luke Ashton, who took his own life this year as a direct result of his gambling addiction, after being drawn in by the lure of a free bet.

Gambling is also incentivised through VIP schemes, with high-spending gamblers encouraged to sustain high levels of play through a range of incentives, including free tickets to sporting events, bonuses, and free bets. Currently VIP schemes are limited to those aged 25 and over. Whilst LEAP welcome VIP schemes not being available for 18 to 24-year-olds, we can say from our own personal experience that these schemes cause devastating harm at any age and should be completely banned.

Existing regulation also aims to maximise the protection of children from exposure to gambling advertising. However, simply removing children from the target audience does not prevent them being exposed to very large volumes of gambling advertising. Young people are increasingly digitally knowledgeable and sophisticated, and while the regulation has not kept pace with the evolution of marketing channels and delivery, each generation becomes more digitally engaged than the one before and thus [more likely to find themselves exposed to online advertising of gambling products \(PDF\)](#).³⁵

We firmly believe that the correct approach is to protect everyone, not just those considered vulnerable. Gambling disorder doesn't discriminate and can affect anyone, not just the vulnerable. Anyone can get addicted to addictive products. Where is the sense in not

³⁴ M.Balem et al (2021) [Impact of wagering inducements on the gambling behaviors of online gamblers: a longitudinal study based on gambling tracking data](#)

³⁵ Recent report by the ASA found child 'avatars' were served the same amount of gambling adverts as adult ones – [Protecting children in mixed age online media \(PDF\)](#), ASA, July 2021

allowing gambling operators to sponsor children's football kits but letting them sponsor the adult kits worn by their parents?

LEAP believe gambling should be tolerated and not promoted, which would mean an end to all marketing and advertising. LEAP recommend that there should be an immediate end to all VIP schemes, free bets and other inducements to gamble.

We are confident that drastically reducing exposure to operators and their brands will reduce appeal and consequently minimise harms, as we have already seen with tobacco products, where the smoking rate fell by over 30 percent in 16 years, and as the Government aims to achieve with upcoming regulation on sugary children's food products.

Normalisation of gambling through proliferation of advertising

As a group, we've observed that much of the discussion on the topic of advertising and marketing concerns the lack of evidence of a causal effect between marketing activities and a consumer's propensity to gamble or the development of problem gambling.

While we acknowledge that the relationship between advertising and behaviour is not a straightforward one-directional relationship, it is our shared experience that advertising influences behaviour even if it doesn't immediately lead to harm. Members have shared powerful testimony of the lived experience of attempting to stop gambling while being surrounded by marketing of operators and their addictive products. It is our firm belief that this evidence is as compelling and robust as would be clinical-standard longitudinal studies exploring the relationship between advertising and gambling harms.

Furthermore, we believe that the operators' decisions to continue making multi-million-pound investments in their advertising and marketing strategies each year should be read as clear evidence that marketing, advertising and sponsorship enables them to significantly influence consumer behaviour and sell more of their products, regardless of the impact on consumer safety. As highlighted earlier in this advice, the gambling industry takes a significant proportion of its Gross gambling yield (GGY) from a very small proportion of players. Digital advertising practices are likely to intensively target these players, which greatly increases the risk of harm they face.

In addition, LEAP contends that the focus on evidencing a causal effect between advertising and gambling harms distracts from a more significant issue presented by the current levels of gambling marketing: the normalisation of gambling through advertising. It is our firm belief that an industry with such propensity for causing harms, as we have each experienced, should not be normalised.

Beyond online marketing tactics, and particularly social media advertising (which is also covered in this advice), nowhere more is the normalisation of gambling through advertising seen than in sport, specifically as a result of branded sponsorship. Pitch-side advertising, shirt sponsorship and league naming rights are just some of the tactics that have led to a saturation of gambling brands becoming indelibly associated with the sports that people in this country love. It is estimated that a gambling brand is visible [up to 89 percent of the time](#)

[during Match of the Day](#),³⁶ where young people make up 25 percent of the Premier League audience.

People like members of LEAP and our families, who would not typically be considered vulnerable people, experienced significant gambling harms in part because advertising encouraged us to gamble and normalised the decision to continue playing. We know that our lived experiences are supported by independent research, with [a recent review of 27 studies from across the globe](#) suggesting that higher exposure to gambling advertising was related to more favourable attitudes towards gambling, greater intentions to gamble, more frequent gambling and higher spend on gambling.³⁷

We recommend that the precautionary principle should be applied as standard when evaluating the impact of advertising and marketing on gambling behaviours and that ending all marketing and advertising of gambling products is the only way to firmly disassociate gambling from 'normal' recreational activities and family life.

Furthermore, it is our experience that the normalisation of gambling through advertising is creating a barrier for treatment. Those suffering gambling disorder see operator brands all around them and advertising that portrays gambling as an everyday activity that everyone can safely participate in; this leaves those in desperate need of help wondering why they are incapable of controlling their urge to play. As a result, [fewer than 3 percent of gambling addicts seek treatment](#), compared to around 20 percent of alcoholics and 10 percent of drug addicts.³⁸

Safer gambling messages are ineffective

Finally, we are united as a group in our belief that mandatory safer gambling messages are ineffective and that they are used by the industry to absolve operators of the responsibility they should have to design safer products and market them ethically.

Much of the messaging in such adverts appears to shift the onus to the consumer to independently act to prevent harms through the use of voluntary measures such as deposit limits or time management tools. Recent research published by GambleAware concluded that there was an "acute lack of evidence" on the effectiveness of voluntary safer gambling tools. LEAP members believe that it is inconceivable that such voluntary tools would have any value for someone suffering gambling disorder. Other countries seem to recognise the lack of impact of voluntary tools with countries such as Germany, Belgium and Finland imposing mandatory spending limits.

The focus on voluntary measures and tools shifts the burden of responsibility from operators themselves, who could use the extensive player data that they collect to implement these tools to protect consumers showing signs of addiction. Instead, LEAP's experience suggests that operators actually use this data to better target their advertising towards such customers and to cross-sell them more addictive products.

³⁶ Cassidy and Ovenden, 2017, '[Frequency, duration and medium of advertisements for gambling and other risky products in commercial and public sector broadcasts of English Premier League Football](#)'

³⁷ A. Bougettaya et al., 2020, '[The relationship between gambling advertising and gambling attitudes, intentions and behaviours: a critical and meta-analytic overview](#)'

³⁸ PHE National Statistics (2018) '[Alcohol and drug treatment for adults: statistics 2017 to 2018](#)'

Equally concerning is the widespread reference to “fun” in safer gambling messages, for example “when the fun stops, stop” which appears to trivialise addiction and its consequences. This lack of awareness is exacerbated by safer gambling messages appearing in adverts heavily branded to operators or as short, often barely readable, stings at the conclusion of a typical promotional advert.

In short, there is an inherent confusion to safer gambling messages. If product design was safer and marketing strategies were responsibly delivered, there would be no need for this messaging. In its current format, it simply distracts from the real issue of high-risk products being marketed in a socially irresponsible manner. There can be no integrity to safer gambling messaging while operators depend on a certain proportion of customers gambling to excess to generate a substantial proportion of their profits.

We believe that the only solution is to abandon the current responsible gambling messaging and replace them with a clear public health campaign and messaging that recognises the impact of gambling harms, similar to public health messaging on alcohol, tobacco, fast-food and other products associated with consumer harms.

Regulatory powers and resources

LEAP’s advice in relation to the gaps in the Gambling Commission’s powers and resources, including specific views on the wider current arrangements for funding and commissioning research and prevention activity.

The Commission was set up under the Gambling Act 2005. The gambling industry has grown and changed hugely since that time. In 2007 the gross gambling yield (GGY) of the UK gambling industry was around £8 billion and the remote sector was worth well under £1 billion. The Commission employed 218 staff and had a budget of around £14.4 million. In 2019, GGY of the gambling industry has nearly doubled to around £14.5 billion with the remote sector increasing fivefold to nearly £5 billion. The Commission now employs around 330 staff, having rapidly increased from around 270 in 2016, with a budget of around £19 million.

The 2005 Act allowed further liberalisation of gambling, permitting growth provided it was consistent with the licensing principles. The emphasis on the gambling industry and a driver of economic growth included the establishment of a number of regional super casinos to act as the engine of economic regeneration. In recent years there has been a greater public and political focus on the harms caused by gambling with a substantial increase in the fines imposed by the Commission for breaches in LCCP.

The Commission has been subject to widespread criticism from a wide range of official bodies including House of Lords, All Party Parliamentary Groups, National Audit Office and Public Accounts Committee. Members of LEAP feel they have been personally let down by failures of the Commission to investigate and punish failures by the industry. We believe that this is partly due to inadequacies of the remit of the Commission and gaps in regulation, but also because of the lack of resources and skills within the Commission to oversee and keep up with a multi-billion pound international high-tech industry. We strongly believe that the industry has shown itself to be incapable of self-responsibility, rather that it will push the boundaries of regulation and accept any fines as a cost of business.

LEAP’s recommendations on the Commission’s regulatory powers and resources focus on:

- overall remit, including a change to the third objective needs to be based on treating gambling as a public health issue with a clear objective of minimising gambling harms by protecting the whole population as opposed to protecting the vulnerable. A public health approach will require a cross-departmental framework involving DCMS, Department for Health and Social Care (DHSC) and Department for Education (DfE)
- greater prescription within LCCP and proactive enforcement – the Commission needs to shift the balance of its approach away from issuing guidance to placing more emphasis on firm instructions of what actions operators must take, and greater clarity on sanctions for failure
- increased resources and greater flexibility for the regulator to reflect the increased size and complexity of the industry and speed of development of new products and practices, and ensure that the Commission can be proactive
- statutory levy to fund adequate prevention, education, research and treatment which is administered entirely independently from the gambling industry.

Overall remit – including a change to the third objective

LEAP is clear that gambling must be treated as a public health issue. It has long been recognised that gambling is not a normal product and has been shown to cause harm in a way that cannot be observed in other mainstream leisure activities, so the industry should not be treated as simply another legitimate leisure industry.^{39 40} This is clearly demonstrated by the license condition that operators are compelled to offer the opportunity for consumers to ban themselves from buying their products and are obliged enforce this ban.

Considering the evidence already presented of the widespread and devastating harm that gambling can cause to the public, it is imperative that a preventative public health approach to tackling gambling harms is taken. This involves:

- recognising that gambling harms and gambling disorder do not arise from faulty individuals but a complex interplay between products, industry practices, policy, lived environments, and individual life circumstances and exposure
- identifying risks and taking action on all factors that increase and decrease risk
- sharing responsibility for action between legislators, regulators, operators, commissioners, providers of treatment and education, and individuals.

Evidence from other countries suggests that a public-health focused approach to reducing gambling harms can be effective. In New Zealand, a public health programme is part of a national gambling harm reduction and prevention strategy that was mandated by their Gambling Act 2003.

Clearly, a public health approach requires collaborative working across a number of government departments, including DCMS, DHSC and DfE. While DCMS might retain overall responsibility for gambling regulation, we believe that DHSC should have oversight of delivery and standards within an NHS-led national treatment service, and DfE should have responsibility for equipping children and young people with the skills and knowledge to reduce their risk of experiencing harms from gambling.

In terms of implications for the powers and remit of the Commission, we believe that the recognition that we are dealing with a range of products which include many which are highly

³⁹ J.Orford, 2019, 'The Gambling Establishment', Routledge

⁴⁰ R.Cassidy, 2020, 'Vicious Games', Pluto Press

addictive and dangerous which can affect anyone and have catastrophic effects within a very short period of time must underpin all legislation and regulation in respect of the industry. We believe that it is important, both symbolically and practically, to ensure that the public health duty of the Commission is enshrined within its mission. Therefore, we recommend that the third objective -to protect the young and vulnerable - should be amended to: “Minimise gambling harms by protecting the whole population from gambling harms”.

It should not be possible for the industry to challenge changes to regulation to protect the wider population based on the fact that they are not targeted at “the young or vulnerable”.

Greater prescription within LCCP and proactive enforcement

During the course of many discussions with the Commission, LEAP have stated that the gambling industry is incapable of self-responsibility, and that the Commission must move towards being far clearer and more prescriptive on what a gambling operator must do in particular circumstances. We also believe that the sanctions applied to operators must be far more severe than currently applied, including a greater use of revocation of personal and company licences rather than just fines which appear to be too often treated as a cost of business.

As noted in the Online Protections section of our advice, the group recognise the pitfalls of the Commission specifying detailed requirements, so that we feel that it will be necessary for the Commission to continue to state the broad aims and expected outcomes of particular areas of regulation and impose an enforceable duty of care, which would require that operators do everything reasonably practicable to prevent harm. However, we strongly believe that the Commission must specify:

- clear conditions where customer interaction must take place and what those actions must be. These conditions must be transparent, agreed and apply across all operators - there is no place for different operators to apply their own untested and hidden algorithms to identify problem gambling
- mandatory interventions including a number of hard stop actions recognising the reality of addiction and the speed with which catastrophic harms can occur
- clear tariff of sanctions in relation to breaches of LCCP. These tougher sanctions must include individual and company licence revocations and personal liability for Directors of companies.

Increased and flexible resources

LEAP does not consider that we have sufficient information to accurately estimate what level of financial resources the Commission needs in order to be able to regulate the gambling industry robustly. However, the growth in scale and complexity of the industry over the past 15 years does not appear to have been matched by an increase in the resources of the Commission.

The experience of members of LEAP indicate that the Commission is unable to adequately prevent harm to consumers. Its level of resourcing is clearly a significant factor in this. We believe that the Commission must be sufficiently resourced and have access to complete data in order to regulate an international multi-billion pound high tech industry which has a substantial track record of non-compliance. Essentially, to deliver its role effectively, resources are needed so the Commission can:

- be more proactive – with random inspections and inspections based on intelligence
- provide improved information, resources and advice to consumers – especially those who make contact when harm is being suffered
- impose a condition of licensing that all companies should lodge anonymised player data with an independent data repository
- require that operators should provide regular reporting on gambling harms experienced by customers, including critical incidents, interventions and proportion of income from different groups of customers
- employ high quality staff with highly sought after technical and analytical skills to keep up with the pace of development in the industry
- undertake horizon scanning to be able to predict and pre-empt future developments in gambling markets, technology, payments, etc.
- have a clear remit to work with internet service providers (ISPs) and others to minimise access to the unregulated or unlicensed market
- develop its understanding of gambling harms through further research and stakeholder engagement.

Statutory levy – to end reliance on voluntary donations to fund prevention, research, and treatment

LEAP firmly support the need for a statutory levy to be applied to the industry, which would be used to fund independent research, education and treatment. We note that the call for a statutory levy is also supported by the House of Lords, the All-Party Parliamentary Group for Gambling-Related Harms, the Advisory Board for Safer Gambling and many campaigners and others with lived experience.

We note that the current voluntary donations are both totally inadequate and give no security or certainty about the level of funding or how long it might last. This means that organisations cannot plan services or invest for the future. It also gives the industry influence over the delivery and content of prevention, research, education, and treatment.

This has led to the situation where:

- the industry has inadequately funded treatment for many years, but treatment providers have not demanded extra resources or called out the harms being done by the industry
- UK school children now experience the situation of receiving education about the dangers and harms of gambling which are delivered by organisations who must depend on industry funding. It is now inconceivable that we would allow the tobacco industry to choose who to fund as the main providers of public health education about smoking
- there is only a small specialist gambling research community in the UK, largely dependent on gambling industry funding, with many researchers also carrying out consultancy work with gambling operators. UK research is heavily skewed toward identifying characteristics of individuals who are at risk of harm with few studies on the addictive design or characteristics of products, the impact of gambling advertising and sponsorship, the public health implications of gambling, or the social and economic costs of the industry.

We recommend that there should be a statutory levy, probably equivalent to around 1 percent of GGY which would yield around £140 million annually and be administered entirely independently from the industry to fund:

- NHS commissioned national treatment service appropriate to the scale and level of gambling addiction and wider harms
- evidence based independent education provision for schools, young people, parents and the wider population
- independently specified and commissioned research.

Customer redress

LEAP's advice on:

- the changes that should be made to redress arrangements in the gambling sector
- the form(s) that redress could take for consumers who have suffered from gambling harm
- the features that a body would need to be a trusted and effective decision maker on whether redress is due to a consumer following a complaint.

From their own experiences, members of LEAP are clear that the current system of investigating gambling operators, either potential failures in abiding by their terms and condition (T&Cs) or possible breaches of their licensing conditions and achieving satisfactory customer redress in all cases is totally inadequate. We also personally know many other customers who feel that they have been failed by the current system, as well as being aware of a much wider set of consumers who feel let down.

Many people that we have spoken to don't even realise that it is possible to make a complaint against a gambling operator for possible breaches of LCCPs. Indeed most people are not aware that the Gambling Commission and such licensing conditions even exist. There is widespread feeling that it is wrong that there is no route for individuals to achieve any sort of redress for LCCP breaches beyond going to court. Furthermore, we are aware that there is real anger and resentment that companies fined for such breaches are not required to make any reparations to customers who have been abused or to others who may have been affected as family members or victims of crimes.

There are a variety of failings which we believe need to be addressed:

- lack of clarity over rights and routes – any complaints procedures should be well known, clear and seamless to the consumer
- lack of independent route – there is no trust in a system which relies on Alternative Dispute Resolution providers (ADRs) which are seen as being too close to the industry
- harmful processes – it is dangerous and a continuation of abuse for potential victims of LCCP breaches to be forced to have further direct contact with the operator
- lack of financial redress for customers failed by non-compliance with the LCCP – the failure to provide equivalent redress for customers harmed by LCCP breaches as those available for T&Cs failures is not defensible
- no route for third parties – many of the harms from the failures of gambling operators are suffered by third parties who have no routes or rights to redress.

Examples of LEAP's experience

“While struggling with his gambling addiction, my husband borrowed from credit cards and loans extensively and in secret. Over the past three years while we've been chipping away at this debt, we've had a number of refunds from banks and credit card companies who have realised retrospectively that he was not treated with care when credit was extended repeatedly to him and subsequent penalties have in some instances been returned to us. We've had no such contact from the operators with whom he spent all these borrowed funds.”

“Despite the Gambling Commission finding that the company had severely breached its LCCPs and a financial penalty being imposed on them, there was no satisfactory redress for the individual or the people that had had money stolen. Instead, the operator's penalty payment went to industry funded charities and the victims of crime had to seek redress through the courts.”

LEAP's recommendations in this section focuses on:

- creation of an ombudsman with clear independence from the gambling industry
- financial redress available to all individuals, including third parties, regardless of whether the claim is based on T&Cs breaches or social responsibility failures
- immediate action to make existing processes clearer for consumers and to recognise the high-risk of harm many complainants may be experiencing.

Creation of an independent ombudsman

It is clear that an independent ombudsman is needed for consumer redress, rather than operator appointed ADRs under the current system. This will give consumers a clear pathway for redress and faith in a system that gives a fair and transparent result.

Consumers can use ADR providers to adjudicate on disputes when the internal operator's procedures have been exhausted. The latest figures from the Independent Betting Adjudication Service (IBAS), the biggest ADR provider, show that [54 percent of complaints were not upheld \(PDF\)](#)⁴¹, however, as they are funded by the industry this may cause consumers to question the independence the process is.

653 consumers who registered on the IBAS website and completed an online claim form had their dispute rejected since it was deemed to be a regulatory matter, some of which may have contacted the Commission to pursue as a regulatory complaint.⁴² This is further evidence showing the difficulties consumers face in terms of a clear pathway to obtain redress. In July 2021 [IBAS published their 2020 annual report](#) supporting the principle of creating a gambling ombudsman.⁴³

Claims through the ombudsman would need to be relayed to the Commission, enabling them to act on poor practice, lack of duty of care and failures of policies and procedures. This would give the Commission information on how to act and protect consumers by challenging operators and undertaking LCCP investigations.

⁴¹IBAS, 2020 '[Championing Fair Play - Annual Report 2020](#)' (PDF)

⁴² ⁴²IBAS, 2020 '[Championing Fair Play - Annual Report 2020](#)' (PDF).

⁴³ IBAS, 29 July 2021 [IBAS publishes 2020 Annual Report](#)

Currently the Commission does not get involved with individual cases, whether they concern breaches of T&Cs or LCCPs, leaving a gap in consumer protection. An ombudsman would ensure that these processes are independently investigated, therefore generating and establishing trust.

Financial redress available to all individuals including third parties

We strongly believe that financial redress should be available to all customers who have been victims of operators' failures, regardless of whether the claim is based on T&Cs breaches or social responsibility (LCCP) failures.

It cannot be right that operators are able to retain funds from proceeds of crime and breaches of LCCP, while individual customers and third parties receive no financial redress. We acknowledge that it may be dangerous to return money to a person who is suffering gambling disorder. However, the principle of financial redress must be guaranteed. Therefore, it may be necessary to investigate safeguards in how monies are returned in individual cases, possibly involving family or other trusted third parties.

It is also recommended that an ombudsman should have the power to work with affected others and handle complaints directly from these individuals. We believe that no other ombudsman provides redress for third parties. However, we believe that the scale and speed of harms caused by gambling impact severely on third parties, in particular gamblers' families, to such an extreme and complex extent that it is necessary to consider how this obvious gap can be addressed.

Example of LEAP's experience

"I've come to understand that there is absolutely no route for me as an affected other to make a claim against any of the operators, even though much of the money that he spent was our shared money and not just his. I know I am not the only affected other who has suffered severe personal losses through no action of my own and yet we budget meticulously every month to manage while operators can continue to turn dizzying profits."

Immediate action to make existing processes clearer and safer

In the meantime, there are still changes that need to be implemented for consumers who are looking for redress. A lot of the time consumers are only able to notice abuse and poor practice from the operators when they are in recovery and have had time to process their actions. The fact that consumers need to interact regularly with gambling operators to go through this process is very dangerous and can be very triggering for further harms. There should be a clear and transparent pathway for consumers to engage and raise disputes with operators. Decisions need to be explained justifiably, with regular communication through the process, giving consumers reassurance that the complaint is being looked at fairly.

Although the Commission has been clear that operators must not use Non-Disclosure Agreements (NDAs), members of LEAP have received clear consumer feedback that this is still common and not historical practice. This is effectively sweeping bad practice under the carpet and not visible to the regulator or other consumers. It allows operators to reinforce an image that their brand is trusted and honest. If consumers were aware of such practices, it would allow them to make more informed decisions.

Example of LEAP's experience

“Working in the recovery sector, speaking to consumers on a daily basis, NDAs are still common practice in the operator/consumer relationship and are therefore not historical”

Protections for children and young people

LEAP's advice on:

- the effect that gambling as a child can have on gambling in later life
- whether there are products that carry a greater risk of harm for children and young adults
- the extent to which young adults (18-25-year-olds) may be at a greater risk of harm from gambling and, if so, how that risk could be reduced.

The majority of LEAP members started gambling illegally while they were children. Through our contacts we are aware of a large number of people under the age of 18 who gamble with registered gambling operators, a situation which is supported by research which shows that [“3 percent of 11-16-year-olds have spent their own money on online gambling in the past 7 days”](#)⁴⁴. More widely, data shows that 450,000 11-16-year-olds in England and Scotland gamble and that [55,000 are classified as problem gamblers](#).⁴⁵ This means that over 12 percent of 11-16-year-olds who gamble are addicted – an extraordinarily high proportion and much higher than any other age group.

There is widespread acceptance that children need to be protected from gambling, but that is not reflected in the reality of the imagery used around many gambling products; the fact that it is portrayed as a simple fun activity with no dangers or potential for harm; or the failure of too many operators or venues to adequately enforce age restrictions.

This section presents LEAP's recommendations that:

- all commercial gambling should be for adults only (18 and above) and there should be no child friendly iconography or imagery associated with any gambling product
- more rigorous age-verification processes are adopted to build on recent changes
- improved independent education and awareness with leadership from Department of Education (DfE).
- greater protections and information for 18-25-year-olds recognising the greater vulnerabilities in this group.

All gambling should be for people aged 18 and over

Gambling is not about money it is about behaviour, if that behaviour starts young it sets pathways that continue into adulthood. Gambling as a child establishes behaviour which [research indicates can lead to gambling disorder post-18 years of age \(PDF\)](#) with evidence

⁴⁴ Gambling Commission (2019) [‘Young People and Gambling Survey 2019’](#)

⁴⁵ Gambling Commission (2019) [‘Young People and Gambling Survey 2019’](#).

that starting gambling as a child starts off a tolerance of greater and greater risk which leads to harm as an adult.⁴⁶

[Vulnerability to harm later in life can come from childhood exposure](#) to gambling on slot machines and in gaming arcades⁴⁷. Use of child friendly animations and popular children's characters entice children into harmful behaviour which can become a gambling disorder. We believe that no child friendly iconography or imagery should be used on any gambling product. Additionally, [children from areas of high deprivation are most likely to suffer gambling harms \(PDF\)](#)⁴⁸, exacerbating the levels of disadvantage they already experience.

Rigorous ID and/or age verification before any gambling

New customer identity rules were introduced in May 2019, but LEAP have concerns that underage commercial gambling still happens too often. It has been shown that 37 percent of 11–16-year-olds in England and Scotland have gambled in the last 12 months – some of which is on age restricted products. We are aware of current examples where people aged under 18 have been able to gamble in land-based venues and to register for online accounts using adults' details.

We believe that the process of registering for an online gambling account needs to be more rigorous even though this may impose a greater delay in any account becoming active. The gambling operator must establish beyond doubt that they are dealing with someone who is 18 or over.

For land-based venues, LEAP recommend that the current LCCP requirements that licensees should check ages of customers who appear to be under 21 is implemented more rigorously. We recommend that a "Think 21 or 25 Policy" is adopted industry-wide – as is the case with alcohol purchases in many pubs and supermarkets.

Improved independent education and awareness

Gambling is portrayed and promoted as a fun activity for all the family, including children, without indicating that gamblers always lose long-term or that some gambling products are highly addictive and dangerous. Children are heavily influenced by their peers and family members, who may innocently introduce them to gambling without realising the potential harms.

Gambling can be used by children as a coping mechanism or self-medicating to take their minds off issues. This behaviour can lead to further harms. Interventions are currently thin on the ground to protect children, from a medical or public health perspective, especially when considering that [1 in 6 children are dealing with a mental illness](#)⁴⁹, before gambling harms are taken into account.

There is a lack of sufficient education about gambling harms in the National Curriculum, which is independent of gambling industry funding and verified as such by the Department of

⁴⁶ Ipsos Mori (2020) '[Final Synthesis Report: the effect of gambling marketing and advertising on children, young people and vulnerable adults](#)' (PDF)

⁴⁷ House of Lords, 2020, Select Committee on the Social and Economic Impact of the Gambling Industry: Time for Action, [Chapter 6 'Children and Young People'](#)

⁴⁸ R. Rogers et al., 2019, '[Framing a public health approach to gambling harms in Wales: Challenges and opportunities](#)' (PDF)

⁴⁹ NHS Digital, 2020, '[The Mental Health of Children and Young People in England 2020](#)'

Education. We believe that the current education which is available does not adequately address the differences between gambling products and their potential for addiction and harms; the advertising and marketing activities of the industry; or the potential harms to mental health which might occur. Too often education focuses on understanding the odds rather than addressing these wider and more important issues.

This means children and their parents are often unaware of the potential for different types of gambling to lead to major harms, what the signs of gambling disorder are or what to do about it, this leaves them vulnerable to exploitation and significant harm.

Greater protections and information for 18-25-year-olds

When young people reach the age of 18 they have legal access to the full range of commercial gambling activities – including many that are considered high-risk and addictive. In the experience of members of LEAP, habits that were destructive at mid-thirties were established in early twenties.

It is generally agreed that the human brain is more ‘plastic’ for younger people and that the brain’s neural pathways ‘solidify’ around age 25. This means that not only are young people’s brains more vulnerable to the development of gambling disorder, but also that the pathways established during youth are more difficult to change. Therefore, we believe that there is a strong case for providing greater protections for younger people.

However, we acknowledge that 18 is considered as the legal age for most activities so that, without further research, it is difficult to impose specific restrictions around gambling or particular gambling products.

Despite this we believe that stronger protections are needed for this age group. We note that even the gambling industry acknowledge that this is the case: their initial proposals for changes to VIP schemes included the restriction that such schemes should not be available to anyone under 25.

Therefore, we recommend that there needs to be much more and clearer information targeted at this younger age group. We also recommend that age should be considered as a factor when applying other protections. Age should be a factor when undertaking affordability checks or setting time limits for playing different products.

Finally, we recommend that the Gambling Commission ensure that neuroscience and other research is undertaken to investigate the addictiveness and dangers of gambling to younger people.

Land-based protections

LEAP’s advice on the use of cashless technologies, tracked play in land-based environments, local authority powers and machine allocations in casinos and pubs.

Most of the members of LEAP had their first encounter with gambling in a land-based venue, whether a bookies, arcade or machine in a pub. Further, the lack of monitoring or rigorous self-exclusion controls in land-based venues mean that the harms suffered by people with gambling disorder can continue undiscovered for very long periods. So, whilst we fully

support the Review's primary focus on online gambling, we believe that land-based venues remain a highly accessible gateway to gambling and gambling harm. As greater controls are introduced to be able to identify and monitor individual's online gambling, land-based venues may become the place where dangerous and harmful gambling will continue, hidden and for long periods with no intervention.

Examples of LEAP's experience

"I wasn't a gambler when I first visited a casino, I'd never so much as bought a lottery ticket. I didn't even know gambling addiction was a thing: to me it was just a fun night out. Within 12 months of that first visit I was going almost every day, within two years I was gambling online at home, alone, with maxed out credit cards and taking payday loans to keep going."

"The anonymity afforded by bookies and other venues enabled my husband to gamble entirely in secret for over 10 years. He would stop on a random high street on his way to or from work, somewhere he wouldn't bump into anyone we knew, and would work his way along the three or four bookies that inevitably line most town centres. He would pay exclusively in cash, withdrawing more funds between each venue and spending a couple of hundred pounds at each site before moving on to the next. He was never challenged by staff, had no access to safer gambling tools and no way of ever really understanding the extent of his losses."

"The reason I gambled in betting shops was it was so easy to pay with large amounts of cash with no questions asked, leaving no paper trail for my partner to find out. Never did I receive any safer gambling interactions while in any betting shops either, so this made it very accessible to play in cash with lots of money and made to feel very special by the industry at the same time."

There has been a significant lack of investment in technology in land-based venues either to allow tracking of individual's gambling or to establish robust self-exclusion mechanisms, which still relies on paper-based systems. The group believe that this lack of investment in technology and the continued reliance on the diligence and efforts of low paid staff, often working on their own, where management reward structures remain linked to turnover and profit mean that land-based venues will become increasingly risky in terms of gambling harms.

Finally, the high-profile presence of bookmakers on the high street, with much higher levels of clustering in more deprived areas, contribute to the normalisation of gambling as an activity which people might turn to as a way to get money. [Bookmakers remain the least wished for establishments on the high street](#)⁵⁰ and action is needed to reduce their prominence in response to public and local concerns.

LEAP's recommendations to improve protections for land-based gambling focus on:

- requiring account-based play on all land-based gambling – urgent need to develop mechanisms to allow tracking of individuals play to allow affordability, stake limits and other safety measures to be implemented and to identify and automatically intervene to prevent gambling harms

⁵⁰ You Gov, 2018, '[Here's what Britain's ideal high street looks like](#)'

- technology to improve self-exclusion and protect staff – it is unrealistic and unfair to rely on low paid staff to implement restrictions and safety measures in potentially highly charged situations
- actions to make gambling machines safer – further changes to product design to make gambling machines safer and better information for gamblers on the risks and dangers of specific products
- greater powers for local authorities to control the number and prominence of gambling venues.

Account-based play

Arguably one of the key barriers to preventing gambling harms in premises is that it remains largely anonymous. Gamblers can generally move from one venue to another, or from one gambling product to another in the same premises, without any monitoring of their gambling. It is important that land-based gambling should be subject to the same safety controls and restrictions which are proposed in the ‘Online Protections’ section.

Tracking a customer’s gambling, for example via a loyalty card or digital payment wallet, would enable the time and money that a customer has spent in total across multiple gambling sessions in different premises to be monitored, with actions taken as appropriate. It would also enable a Single Customer View (noted in the ‘Online Protections’ section) across an individual’s full gambling experience: online and land based.

This could provide a platform for better operator-led decision making by providing staff in premises with much more data about an individual customer’s gambling spend and could increase the accountability of operators for ensuring that gamblers are not harmed. It would also allow automated interventions to limit an individual’s harmful gambling, taking the responsibility out of the hands of hard-pressed local staff. For instance, it would be possible to implement a maximum time that an individual could spend on any gambling experience, requiring them to have a break every 15 minutes, say. It could also enable customers themselves to have better visibility and control over their own gambling behaviour.

Society is moving away from the use of cash towards card-based and contactless payments. This creates risks as well as opportunities: research and experience show that card-based payments can increase the risk of overspending. Currently, debit cards cannot be used to make a payment directly on a gaming machine in gambling premises. LEAP believe that this rule should remain and that all gambling should be account based so that gamblers would be required to load up a loyalty card or digital wallet, using cash or a debit card, to allow monitoring of spend and appropriate interventions.

Technology to improve self-exclusion and protect staff

LEAP is highly critical of the lack of technology for allowing people to self-exclude. The current Multi Operator Self Exclusion Scheme (MOSES) still relies on phone calls, specifying geographical areas and providing photographic ID which is then circulated to individual venues. Thereafter the system relies on the vigilance of hard-pressed low paid staff to identify and act to exclude people who they may never have seen before. Our own and wider experience have shown that this system is both cumbersome and ineffective.

The whole system requires a much greater level of automation, including the ability to register online for self-exclusion from all gambling venues. It should be possible to link the process to Gamstop thereby allowing a simple one-stop approach. The system could also be

linked to whatever tracking or digital payment mechanisms are established which would prevent a self-excluded individual from gambling without intervention by staff. If cash gambling is still to be allowed, all venues should be required to install face recognition software which would alert staff to not accept cash bets.

LEAP is concerned about the safety of individual members of staff working in bookmakers' premises. Many shops are single staffed, often by women or young staff, working on low wages. It is unreasonable to expect them to oversee people who may be suffering gambling disorder or to intervene at a time when someone may have suffered a most catastrophic gambling experience. We believe that one of the drivers of using increased technology is to remove the responsibility for direct intervention to prevent gambling harms from individual staff.

Actions to make gambling machines safer

Fixed Odds Betting Terminals (FOBTs) were the starting point for many of LEAP members' catastrophic engagement with gambling. The imposition of the £2 maximum stake on FOBTs was the first time that government acknowledged that some gambling products were too dangerous to be on the market. The [stake restriction had a huge impact on the earnings of these machines](#), though arguably some of the trade on these machines will have transferred to other (perhaps) less harmful products.⁵¹ LEAP believe that a range of other actions are needed to make products safer and to give gamblers much better information about the dangers of individual products.

LEAP recognise and welcome that the Gambling Commission has recently put in place some new restrictions on online game design to make them safer. In LEAP's view, further work is needed in this area, but at a minimum next step, equivalent restrictions should be placed on land-based versions of these products.

In addition, the spin speed of machines must be substantially slowed so that the current maximum spin time of 2.5 seconds per spin needs to be substantially increased on land-based machines as well as online. The group have direct experience of just how fast this is, allowing no time for rational thought or consideration and being a key element of making a product addictive and highly dangerous in the speed at which financial losses and harms happen.

There is a substantial literature on what makes gambling products addictive and dangerous. Immediately, there needs to be a precautionary approach with further actions on reducing the speed of play and maximum stake sizes. But gambling machines should also be tested and classified according to their addictiveness and/or danger. There should be clear messaging about the dangers of individual products, both through a public health campaign and through clear point of sale warnings giving clear and understandable messages about the financial consequences of products and the mental health implications. LEAP acknowledge that research will be required to hone this messaging and future development should be undertaken separate of industry influence.

Gambling machines are highly addictive products, with that in mind, there should be no increase in the number of machines allowed in casinos or other venues. A key argument for

⁵¹ Gambling Commission [Industry Statistics](#): April 2015 to March 2020

safety in land-based premises is the presence of staff to allow more monitoring. We know that harms already exist so there should be no reduction in the ratio of staff to machines.

Prominence and design of land-based gambling

Local authorities and communities should have greater powers to reject applications for gambling licences for premises based on clustering, demand, public representations and proximity to schools and other youth facilities.

LEAP recognise the impact that the presence of so many prominent bookmakers' premises had on the development of their own disorder and how they continue to represent a trigger for so many gamblers in recovery. Local authorities should have wider powers to limit the style and displays in bookmakers' windows making them less prominent and garish.

Other priority topics

LEAP's priority recommendation on other topics for legislative change beyond the scope outlined by DCMS.

Treatment of gambling disorder

LEAP were disappointed that the Gambling Act Review is narrowly focused on regulation. Reform needs to stretch beyond the remit of DCMS to include the funding and commissioning of treatment and education (including a statutory levy, which we address in the Gambling Commission Powers and Resources section) and links to the criminal justice system. We hope that can be resolved within Government.

We are particularly concerned that the commissioning and funding of treatment has not been included in the terms of the Review and are keen that the Commission includes a recommendation about treatment in its advice to DCMS.

Several members of LEAP and their families have been severely let down by the current treatment service arrangements. This has been not only through the lack of availability and accessibility of treatment and the lack of integration with other health provision, but also through the quality of treatment delivered. Family members suffering severe gambling disorder have not received Cognitive Behavioural Therapy from fully qualified clinicians, but instead received person-centred counselling from counsellors with no substantial training in gambling disorder.

LEAP is particularly concerned that there is no guaranteed funding for treatment and no public oversight of provision. We believe strongly that treatment needs to be commissioned and administered by the NHS to guarantee a genuine national treatment system which is fully integrated with primary care and other mental health services.

Example of LEAP's experience

"Working in the recovery sector I see and hear first-hand the inconsistencies in the treatment service available for compulsive gamblers. The lack of metrics and assessment done both on the agency and the individuals within them, mean the service delivered is too inconsistent. An independent assessment of the treatment service that is provided would

ensure an accurate level of success of the service and in turn creates confidence for service users that this kind of support is beneficial and enhances recovery.”

Convergence of gambling and gaming

The gaming industry has been revolutionised by new technology since the Gambling Act 2005, to enable wagering on outcomes with no age restrictions. Casinos and lotteries incorporate technology developed by the gaming industry, using themes familiar in games which are attractive to children and young people.

The term gaming is frequently used by the gambling industry as synonymous with ‘play’, further indicating a blurring of lines between the two activities. Gamers can wager on the outcome of events leading to a “[convergence of gambling and gaming over the past decade](#)”⁵² in the form of loot boxes, skin betting, simulated casinos and esports.

We believe that the much greater oversight of this blurred boundary between gaming and gambling is needed to enable regulation of gambling activities taking place in online gaming and to prohibit under-18 wagering in gaming.

We recommend that the definition of gambling needs to be reviewed to consider how chance-based activities which may not involve money can be regulated similar to gambling. We also recommend the consideration of a widening of the powers of the Commission and any forthcoming ombudsman to include oversight of these activities within computer games. We recognise that this may be more efficiently regulated by a body which focuses on game design and development.

Experts by experience

Many other sectors, in particular health, have long recognised the unique insights which can be provided by users in the sector. The NHS has [recently established the role of ‘Patient Director’](#) with recent National Institute for Health and Care Excellence (NICE) guidelines⁵³ stating:

“every organisation or system, regardless of its size, should ... consider appointing a patient director (from a healthcare service user background) ... responsible for: raising the profile of the service user voice in planning, implementing, and monitoring shared decision making, especially from those in under-served populations; supporting the embedding of shared decision making at the highest level of the organisation.”

We believe that LEAP has provided a clear demonstration of the value of ‘experts by experience’ or ‘lived experience’ of gambling related harms in the development and implementation of gambling policy and regulation. We believe over the past 18 months that we have proved that it is possible to work alongside colleagues in the Commission even on the highly charged issue of gambling reform.

We also note that GambleAware have recently funded Expert Link to establish an independent network of people with lived experience of gambling related harms. They also

⁵² Derevensky J and Griffiths M (2019) [Convergence between Gambling and Gaming](#), Gaming Law Review 633-639

⁵³ BMJ Opinion, 25 June 2021 [Patient directors—the next step in the patient revolution](#)

fund the [ALERTS group of people with lived experience of gambling treatment](#) to be involved in the design and delivery of treatment for gambling disorder.⁵⁴

At the outset of the establishment of the Interim Group of People with Lived Experience of Gambling Harms, a core ask of the group was for the appointment of a Lived Experience Commissioner to the Board of the Commission. We made this request to the Secretary of State when we met in October 2020, since we are aware that decisions on membership of the Board are matters for the Secretary of State.

LEAP recommend that the Commission should formally request the appointment of a 'Lived Experience Commissioner' to the Board to ensure that the unique insights of lived experience are available to inform decision making at the highest level within the Commission.

⁵⁴ GambleAware, 2021 [GambleAware Promotes the Voice of People who have Lived Experience of Gambling Harms](#)