

Two years on: progress delivering the National Responsible Gambling Strategy

May 2018

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Foreword

This document is the second annual progress report on the 2016-19 National Responsible Gambling Strategy. The Strategy's over-riding objective is to reduce gambling-related harms. With an estimated 430,000 problem gamblers in Great Britain, and many more either at risk of harm or affected by somebody else's gambling, the importance of this task is as great as ever.

The picture of progress presented in this report can only be described as patchy, both in terms of the 12 priority actions set out in the Strategy and in the response of operators and others. Some individual operators are doing better than others. But no single sector can claim to be leading the way. Not all the actions, of course, are the responsibility of operators.

With only 12 months of the three-year period remaining, there is much to do if the Strategy's vision and ambitions are to come anywhere near to being realised. We need collectively to inject more energy and focus into the activities that are now taking place, and more rigour into the arrangements for implementation, for assessing outcomes and for sharing best practice. Failure to do this, or to do it effectively, would be likely to call into question some of the assumptions about the nature of regulation on which the Strategy is based.

It is helpful therefore that the Gambling Commission has now published a new Corporate Strategy, which further prioritises the need to create a safe and fair gambling market and to prevent harm to consumers and other members of the public from gambling. The welcome implication is greater strategic oversight and direction about what the Commission would like to see happening, and greater clarity about its expectations of individual operators.

This report includes an updated estimate of the funding required to deliver the research, education and treatment (RET) elements of the Strategy effectively. The new estimate takes a different approach from the last one. It is not constrained by a view of existing capacity. Instead it seeks to quantify what would need to be spent in order to increase the chances of having a significant impact on reducing gambling-related harms. The result is a recognition that considerably more funding will be required in the future compared to previous estimates.

The Board is grateful to all those who have contributed evidence for this report. The judgements in it have been discussed with representatives of the industry and other stakeholders through our Advisory Group, and with the Gambling Commission and GambleAware. The views expressed are, however, our own.



Sir Christopher Kelly
Chair, Responsible Gambling Strategy Board

I. Executive summary

1. The principal aim of the National Responsible Gambling Strategy is to reduce gambling-related harms, especially among the most vulnerable. This progress report provides the Responsible Gambling Strategy Board's assessment of what has been achieved after two years of the three-year Strategy, and of the action which is still needed. It also updates the Board's assessment of the funding required to deliver the research, education and treatment (RET) elements of the Strategy.

Overall assessment of progress

2. In producing this report we have drawn on all the evidence available to us, including stakeholder submissions to the Board, the Assurance Statements provided by major operators to the Gambling Commission, meetings with operators and other observations.
3. The availability to us for the first time of the vast majority of the Assurance Statements has been especially useful, in particular in giving us greater insight into the wide range of activity happening across the industry.
4. It is clear from our assessment that there is a lot of activity underway in relation to the Strategy. Some welcome progress has undoubtedly been made. But progress has been faster in some areas, and in the actions taken by some operators, than in others. Real impact has, in consequence, so far been patchy. If we are to be in a position to claim any measure of success for the Strategy by the end of its three years, now only 12 months away, there is a considerable amount for all the delivery partners still to do.
5. Figure 1 summarises our assessment of progress in relation to each of the Strategy's 12 Priority Actions after the second year. The arrows show changes from the year one progress report. The colours represent our rating of progress at the end of year two. The ratings have improved for four priority actions, and deteriorated for one. There have been some achievements in most or all of the rest, but not of a sufficient scale to cause us to want to change their overall rating.
6. It is a significant concern that after two years all but one of the ratings remain at red or amber.
7. Figure 1 also sets out the responsibilities for each Priority Action.¹ As well as operators there is a wide range of stakeholders who need to take further action, including the Gambling Commission, GambleAware, the Responsible Gambling Strategy Board and other public agencies.

¹ In some areas responsibilities have changed slightly since the original Strategy was published.

Figure 1: Summary of overall progress and responsibilities



8. Later sections of this report set out our view of progress against each of the priority actions in more detail. In brief, however:
- i. Initial work commissioned by GambleAware to build a better shared understanding of what is meant by gambling-related harms (Priority Action 1) proved to be unsatisfactory. Effectively a year was lost. There is a considerable amount of work still to do, but a credible action plan has been developed. This plan has involved input from an expert group including health economists and others experienced in methodologies for measuring harm in different areas of public health. A report on progress will be published shortly.
 - ii. We have been greatly encouraged by the growing recognition of gambling-related harms as a public health issue (Priority Action 2). This development represents a major step forward. It will be critical over the next few years to turn recognition of the issue into concrete plans to address it, and subsequent action.
 - iii. Evaluation of interventions (Priority Action 3) is still far from well-established practice. Some operators and trade associations have clearly understood its importance. Too many others have made claims in their Assurance Statements about efforts to promote safer gambling without producing any meaningful evidence of effectiveness. In general, evaluations need to include more evidence from consumers themselves on the impact of interventions to reduce harm. Without such evidence, it is difficult to regard evaluations as robust or meaningful.
 - iv. Some limited research has been undertaken directed at increasing understanding of the relevance of different environments and product characteristics (Priority Action 4). But there is a lot more that needs to be done. We are updating our Research Programme to reflect this. A number of further projects are in the process of being commissioned. They will be helped by the increased availability of significant new datasets.
 - v. There has been some progress by operators on improving methods of identifying harmful play (Priority Action 5). Many operators are developing algorithms or other ways of using markers of harm, either in-house or as part of a trade body. But these activities require considerable investment of resources and technical development. Two years into the Strategy, appropriate algorithms are in consequence still very much work in progress for many operators. Algorithms are unlikely to be completely effective on their own and should be supplemented by good staff training and the application of common sense. The need for recent Gambling Commission regulatory sanctions illustrate how much of a culture change in this respect is still required. Symptomatic of this is the extent to which some operators significantly underestimate the number of problem gamblers, or those at moderate risk of harm, who might be using their products. In too many cases, operators appear to believe that prevalence of gambling problems among their customers is less than in the population as a whole. That is, to say the least, extremely unlikely. It implies an unacceptable degree of complacency.
 - vi. Identification of potentially harmful play needs to be combined with subsequent interventions designed to reduce or mitigate harm. A number of operators are trialling new ways of helping their customers gamble safely (Priority Action 6). Such operators are, however, in a minority. Even now, not all operators seem to be clear what safer gambling requires or where best to focus their efforts. Rather than focusing on whether their activities are carried out in a way which helps to protect the vulnerable, too many operators instead focus strictly on compliance with the minimum standards set out in the Licence Conditions and Codes of Practice (LCCP). The Gambling Commission could usefully provide greater clarity on the types of activity it wishes to see piloted, and increase further their efforts to disseminate information on best practice.

- vii. In our last progress report, we were optimistic about the progress that was being made in setting up multi-operator self-exclusion schemes (Priority Action 7). We are disappointed by what has happened since. The introduction of GAMSTOP, the self-exclusion scheme for the remote sector, was delayed (perhaps not surprisingly in view of its complexity). Evaluation of the impact of other schemes has been limited, with little evidence collected from consumers about what impact the scheme had on helping them with the problems they were experiencing. Awareness of the existence of the schemes has also fallen slightly. The Gambling Commission has now taken responsibility for coordinating evaluation of all these schemes. In retrospect, it was probably a mistake that it did not do so earlier.
- viii. An effective strategy for the dissemination of information and preventive education (Priority Action 8) has the capacity to consume considerable resource. Moreover, experience elsewhere suggests that if great care is not taken the impact could be counter-productive. It is critical therefore that activities in this area are effectively and appropriately focused. Over the last 12 months a number of pilot projects have been undertaken and are now being evaluated. A national information campaign is also being planned. The task for the next 12 months will be to complete these activities, assess their effectiveness and develop an overarching strategic framework within which they and other relevant activities can be considered and prioritised.
- ix. Prevention is better than cure. But it is still important that effective treatment is available for those who are suffering harm from gambling, either their own or someone else's (Priority Action 9). Over the last 12 months there have been a number of steps to improve the quality and value for money of treatment services, leading to significant organisational changes among some core providers. There is a limit, however, to what can realistically be achieved with the current level of funding. There also remains a recognised need to develop an overarching strategy for the whole range of treatment services. That will be a major task for the next 12 months, informed by a delivery gap analysis of treatment needs and a systematic review of effective treatment approaches for gambling problems, both of which are about to be commissioned by GambleAware.
- x. There has been some increased interest in gambling-related research from a wider pool of academics and researchers (Priority Action 10). This positive development brings new perspectives and skills to gambling research and is likely to pay dividends in the future. The task is to make sure that the change continues and is not held back by inadequate funding.
- xi. The Gambling Commission's new Corporate Strategy includes a greater focus on horizon scanning (Priority Action 11). We are, however, still some way from a coordinated and comprehensive approach to gathering, analysing and sharing information about emerging risks across the industry.
- xii. Some progress has been made on paying greater attention to the views of gamblers and other members of the public as gambling policy and practice are developed (Priority Action 12). But it has so far been fairly limited. Greater focus on evaluation, would help stimulate faster progress. More activity to understand impact would necessarily require greater engagement with consumers, including with the families of those harmed by gambling.

Focusing on priorities

9. Our overall assessment is that, for the moment, the 12 priority actions continue to reflect the right approach to ensuring that gambling-related harms are reduced. But the need for more intense effort over the next 12 months is probably greater in some areas than in others.
10. For operators we believe that most effort is particularly required on:
 - i. Making further progress in the detection of consumers who are suffering, or at risk of, harm (Priority Action 5).
 - ii. Developing and piloting new types of interventions, gambling management tools and other methods of protecting players from harm (Priority Action 6).
 - iii. Combining both with far greater attention to evaluation (Priority Action 3), so as to better understand what works, and equally importantly, what does not.
11. We believe that these efforts would be helped if there was a more structured and coordinated approach to understanding what works. The Gambling Commission could provide more direction on the different types of interventions that could most usefully be piloted across a number of operators, as well as continuing their existing efforts to disseminate best practice, where that can be identified.

Figure 2: Top priority actions for operators



12. For other stakeholders, we believe the most important priorities for the next 12 months are:
 - i. A continued focus on understanding, identifying and measuring gambling-related harms (Priority Action 1), led by the Responsible Gambling Strategy Board and GambleAware.
 - ii. Further embedding the work to ensure that gambling-related harms are recognised as a public health issue and moving from exploration and debate to the commitment of resources (Priority Action 2), led by the Gambling Commission, other public sector bodies and Government.
 - iii. The development and implementation of national strategic frameworks on preventive information and education and the commissioning and delivery of treatment (Priority Actions 8 and 9), now led by the Gambling Commission and the Responsible Gambling Strategy Board, as well as by GambleAware.

Figure 3: Top priority actions for the Gambling Commission, RGSB, GambleAware and Government



Funding requirement

13. This report incorporates our updated estimates of the funding required to deliver the research, education and treatment (RET) elements of the Strategy. Previous estimates of funding have been made in the context of what funding levels appeared realistic and current capacity to spend any funds raised. The estimates in this report are based on a less constrained starting point. We have attempted to quantify the levels of funding needed if a significant impact is to be made on reducing gambling-related harms, rather than simply maintaining the status quo.
14. Our new estimates of the funding required to make a significant impact represents a major step change from current levels. They are based on fairly modest assumptions about what needs to be spent on research and prevention. Current levels of spending on treatment are, however, wholly inadequate. Only two per cent of problem gamblers currently receive support through GambleAware funded services. Estimating exactly how much more an effective treatment system might cost is not possible until further research is carried out. We should be prepared for it to be of a different order of magnitude to the £6 million currently spent on treatment each year by GambleAware.
15. As with our previous estimate of required funding, there will be additional costs not included in these figures, including those borne by operators in developing new systems to identify harmful play, in piloting new interventions and in evaluation. These costs are additional to those needed to fund the research, education and treatment costs covered by the new estimates.

II. Introduction

Background

1. The National Responsible Gambling Strategy for 2016-19 was published in April 2016 with the aim of reducing or mitigating gambling-related harms. In the Strategy we committed to publishing an annual assessment of progress to review the continuing appropriateness of the Priority Actions, to ensure that delivery against the actions remained on track, and to make any necessary amendments or refocus our combined efforts where required. An annual assessment of progress provides a means of holding ourselves, and others to account.

Important developments over the last 12 months

2. Notable developments since the first progress report 12 months ago include:
 - i. The Department for Digital, Culture, Media and Sport (DCMS) launched an initial call for evidence in relation to the Review of Gaming Machines and Social Responsibility Measures in October 2016. We submitted advice on the review to the Gambling Commission in January 2017. Our advice was published in October 2017.² Some believe that the length of the review process has been inhibiting innovation and providing a distraction from delivering the Strategy. This is not, however, an acceptable excuse for poor progress.
 - ii. The Gambling Commission published its Corporate Strategy 2018-2021 in November 2017, setting out the Commission's commitments to create a fair and safe gambling market.
 - iii. A joint programme of work has been undertaken by the Gambling Commission and Competition and Markets Authority (CMA) into unfair terms and conditions. The CMA subsequently took regulatory action against four online operators, requiring them to change bonus promotions to ensure players could always access and withdraw their own money. The Commission has made clear that it expects other operators to make similar changes. The Commission has also published a consultation document on proposed changes to the LCCP in relation to the fair and open licensing objective. Linked to these developments, a number of operators have been withdrawing or scaling back their affiliate marketing programmes.
 - iv. The Gambling Commission itself has taken regulatory enforcement action against a number of operators in the past 12 months, issuing significant penalty packages where operators have failed to take reasonable and adequate steps to protect consumers.

Gambling perception and participation

3. In February 2018 the Gambling Commission published its 2017 gambling participation and perceptions report.³ This report tracks participation rates, problem gambling estimates, online gambling behaviour, consumer awareness of gambling management tools and attitudes towards gambling. It shows a decline in the number of people who have gambled in the past four weeks (including on the National Lottery) to 45 per cent (compared with 48 per cent in 2016). It also shows that on average online gamblers hold four accounts (broadly the same as in 2016) and that 51 per cent of online gamblers did so using a mobile phone or tablet, compared with 43 per cent in 2016.

² [Advice in relation to the DCMS review of gaming machines and social responsibility measures](#), Responsible Gambling Strategy Board, October 2017.

³ [Gambling participation in 2017: behaviour, awareness and attitudes](#), Gambling Commission, February 2018.

4. The same report records further, marginal, changes in people's attitudes to gambling. 64 per cent of people in Britain agree that people should have the right to gamble whenever they want (compared with 67 per cent in 2016). 33 per cent think that gambling is fair and can be trusted (broadly the same as in 2016). 80 per cent agree there are too many opportunities for gambling nowadays (compared with 78 per cent in 2016) and 71 per cent agree that gambling is dangerous for family life (broadly the same as in 2016).
5. In August 2017, new estimates⁴ were published of the number of problem gamblers and those at moderate risk of harm in England, Scotland and Wales. The new estimates suggest that 430,000 should be defined as problem gamblers by the most widely used screens, with as many as 1.9 million at low or moderate risk of harm. The numbers do not represent a statistically significant change from previous estimates. As usual, they do not take account of those who may be harmed by gambling, but not sufficiently to be captured by the screens, nor of those who may be damaged by someone else's gambling.
6. In December 2017 the Gambling Commission published a report on Young People and Gambling, based on the latest in a series of annual school-based surveys by Ipsos MORI.⁵ The report found that 12 per cent of 11-16 year olds (approximately 370,000) had spent their own money on a gambling activity in the week prior to taking part in the study. This estimate is lower than the equivalent figure of 16 per cent in 2016, continuing a declining trend since 2011. The 2017 survey found that 11 per cent of 11-16 year olds had bet (illegally) with in-game items available in online gaming (so-called skins). The report also found that 0.9 per cent of 11-16 year olds were problem gamblers⁶ and a further 1.3 per cent were at moderate risk of harm. These prevalence rates are not materially different from those found in previous years. But any problem gambling among this group is a matter of considerable concern.

Production of this report

7. In preparing this report we have followed the same approach as last year. In February and October 2017, we held meetings with our Advisory Group, which includes gambling industry representatives and other stakeholders, to exchange views on activity under way and to consider progress. We also invited written evidence from industry trade associations and other stakeholders.
8. We were given access to all but one of the Assurance Statements submitted to the Gambling Commission by the larger operators in December 2017. The statements, which are still at a relatively early stage in their development, serve a useful purpose in compelling operators to think about what they should be doing. The Commission responses provide an opportunity to draw attention to deficiencies and to point the way to better practice as reported by other operators. It is positive that the Commission has evaluated this process and shared its findings with operators. In the light of our concerns about progress by the industry in delivering parts of the Strategy, we suggest that the Commission consider increasing the prominence and importance of its feedback to operators. One option would be to use formal letters to the chair and chief executive of the relevant operator. Formal letters may be particularly effective when targeted at those operators identified as providing weak Assurance Statements.
9. Our emerging assessment was discussed widely with the Gambling Commission, and shared in draft for accuracy with our Advisory Group. As before, the judgements in this report remain those of the Responsible Gambling Strategy Board.

⁴ [Gambling behaviour in Great Britain in 2015](#), NatCen for the Gambling Commission, August 2017.

⁵ Previous iterations of the survey had been based on 11-15 year olds in England and Wales. The 2017 report was expanded to include 11-16 year olds across England, Wales and Scotland. For this reason, the 2017 results are not directly comparable with previous years. However, provided that readers bear this in mind, it is possible to make some broad comparisons.

⁶ Based on the DSM-IV youth-adapted screen.

How we have applied the ratings

10. As with our previous report, we have judged each priority action on a red, amber or green scale based on our assessment of the available evidence. The ratings are intended to reflect our overall level of concern, taking account of:
- i. progress against delivering the priority actions set out in the Strategy and against the identified indicators of success;
 - ii. overall achievement; and
 - iii. level of risk to the delivery of the Priority Action by the end of the Strategy period.

Structure of this report

11. The remainder of this report is structured as follows:



Part III contains our detailed assessment of progress and ratings

Part IV includes our estimate of the RET funding requirement

Part V contains our conclusions

Annex A details many of the research projects, industry initiatives and other actions that have been delivered during the period April 2017 to March 2018.

III. Assessment of progress and ratings 2017-2018

Priority action	Indicators of success	Assessment of progress
 <p>PA1</p> <p>Understanding and measuring harm</p> <p>GA RGSB GC</p> <p>Rating: AMBER</p>	<p>A better, shared understanding of what is meant by gambling-related harm.</p> <p>A range of indicators that will assist in its measurement and monitoring.</p> <p>Greater insights into the factors that can cause transition from non-harmful to harmful play.</p>	<p>The rating for this Priority Action has improved, from Red to Amber.</p> <p>This priority action was rated red last year. Preparatory work commissioned by GambleAware did not prove very fruitful. An expert steering group has now been established, chaired by the deputy chair of the Responsible Gambling Strategy Board. The group includes health economists and others experienced in methodologies for measuring harm in different areas of public health. It has made good progress in a short space of time and will shortly publish an initial paper for wider consultation.</p> <p>It is not surprising that the work has proved difficult. There are a number of complex methodological and practical challenges to solve. A significant amount of work is needed to collect the data to measure and monitor gambling-related harms in the way envisaged. Some initially promising discussions have, however, now taken place with other public services and agencies on access to data. The group expects soon to have in place a working definition of gambling-related harms, and a clear framework on which to base the next phase of the work.</p>
 <p>PA2</p> <p>Engagement with relevant public sector bodies</p> <p>RGSB GA GC</p> <p>Rating: AMBER</p>	<p>Demonstrable engagement by a wider range of public bodies, evidenced both by the commitment of resources, action to help reduce gambling-related harm and by the adoption of appropriate policies.</p>	<p>The rating for this Priority Action has improved, from Red to Amber.</p> <p>There have been some welcome positive signs of engagement across England, Scotland and Wales on the notion of gambling-related harms as a public health issue, together with an appetite for some strategic coordination. The Gambling Commission, among others, has been active in moving the agenda forward.</p> <p>In particular, it was announced in December 2017 that the Department of Health, working with Public Health England, was considering the scope for commissioning further research to better understand the impacts of gambling-related harms on health. In February 2018 the Chief Medical Officer for Wales' annual report included a focus on gambling-related harm; and the National Institute for Health Research has an open funding invitation for 'Interventions to prevent or reduce gambling-related harm'.</p> <p>These developments represent a considerable step forward from the position two years ago. Turning the assessment to green over the next 12 months will require evidence of policies being developed, concrete action being taken and resources committed in pursuit of the agenda.</p>



Rating: **RED**

Every significant new intervention to be routinely and independently evaluated in line with the Evaluation Protocol.

Evaluations published or shared between operators, so that learning is disseminated.

High levels of take up of training and support materials.

There have been some developments in relation to this Priority Action, but not enough to shift its overall rating which remains Red.

Consolidating a culture of evaluation is proving more difficult than we had expected. There have been some positive signs. For example, some operators have been collecting data on whether responsible gambling campaigns or messaging have increased the use of gambling management tools. But in general we are disappointed that too many operators are failing to take effective steps to evaluate the impact of their player protection activities.

Where evaluation is taking place, it is not always made publicly available, so that any learning can be shared. There are also very few examples of players being asked about the impact that interventions had on them. Without these insights, it is difficult to see evaluations as robust.

Culture change is difficult. Inevitably it takes time. But the slow pace of change in this area strongly suggests the need to find further ways of encouraging and supporting the industry, both to improve the effectiveness of their evaluation and to share the lessons learnt – good and bad – with others. We therefore welcome the changes the Gambling Commission has made to its 2017 Assurance Statement template asking operators to demonstrate the impact and effectiveness of their actions to address gambling-related harms. We suggest the Commission provides further guidance to the industry on its expectations. The Commission has undertaken an evaluation of the Assurance Statement pilot and could also lead by example through the publication of evaluations of its own regulatory changes.

The Board will continue to encourage operators to undertake appropriate and proportionate evaluations of their responsible gambling initiatives. Such evaluations need not always involve large-scale, independent reviews. Often it can simply mean the establishment of a control group, making it possible to compare changes in behaviour following a change in process. Most operators ought to be familiar with such concepts through their work to understand the impact of changes in their commercial activities. They need to apply the same discipline to harm mitigation work. They also need to be transparent with others about their successes and failures, so that lessons can be learnt more generally. It would help in that regard if there was a recognised way of sharing such lessons, perhaps by a development of GambleAware's InfoHub.



Rating: **AMBER**

Increased understanding of the relevance of different environment and product characteristics and the impact they have on gambling-related harm.

There have been some developments in relation to this Priority Action, but not enough to shift its overall rating which remains Amber.

The Research Programme we published in April 2017 included a number of projects intended to improve understanding in this area. Largely for capacity reasons, progress has been slower than anticipated.

A helpful step towards the aim of this priority action has been the publication by the Gambling Commission of a number of datasets on machine play which have been useful in understanding patterns of staking and sessional loss on B2 and B3 gaming machines. GambleAware has also published research on the characteristics of online play, using data collected by the Commission from the remote sector. More work is needed to combine this type of information with insights into players' own experiences and the extent to which different activities might cause harm. GambleAware has also published a relevant report, not included in the Research Programme, called 'Getting grounded in digital theory'.⁷

The Board is currently scoping a large-scale programme of work on patterns of play to advance understanding of how different gambling products are offered and consumed in different sectors – especially online. The research will involve analysis of real play data. Where possible, we want to see this combined with data on consumers to investigate links between products and the risk of harm. The research will require further access to industry data, including some data which might not currently be collected.

GambleAware has commissioned two research projects exploring the effects of marketing and advertising, predominantly in relation to children, younger people and more vulnerable consumers. A further project will explore the impact of environmental factors in a longitudinal study focusing on why people move in and out of harmful play.

There is still a significant amount of research to be undertaken in this area if limitations on what we know are to be addressed effectively. It is important that capacity and funding issues are not allowed to inhibit necessary progress.

⁷ [Getting grounded in problematic play: Using digital theory to understand problem gambling and harm minimisation opportunities in remote gambling](#), J Parke, A Parke, November 2017.



Rating: **AMBER**

Well-established methods across the industry so that operators are able to identify which of their customers are most likely to be suffering harm.

There have been some developments in relation to this Priority Action, but not enough to shift its overall rating which remains Amber.

Many operators are developing and applying their own methods of identifying harmful play. Others are using commercial products, such as BetBuddy. A number of casino operators are working with the National Casino Forum and Focal Research on methods of identifying gamblers likely to be experiencing or at elevated risk of harm. The bookmaking sector is also undertaking work to develop its Player Awareness System for identifying potentially harmful patterns of play. In addition, phase two of a GambleAware remote research programme exploring behavioural markers of harm was published in August 2017.⁸ So far, steps to put lessons from this work into practice have been slow.


The Remote Gambling Association has, however, now published good practice guidelines to disseminate the learning and catalyse more action from operators. The Gambling Commission has also published guidance for remote gambling licensees on identifying and interacting with customers who may be experiencing, or at risk of developing, problems with their gambling.

In the light of this activity, and the considerable research now available to enable operators to put in place much more sophisticated approaches to identifying harm, we had hoped to see evidence of greater progress across the industry as the learning was operationalised. Even though some operators are making progress, too many appear to be taking what we regard as insufficiently effective action. A significant number appear to be setting trigger levels too high to capture enough of those who may be suffering harm. Others appear to be relying on flawed triggers, for example only looking at whether players pass a particular threshold of money or time spent in a particular day or week, rather than using data to understand if a player's behaviour is changing over time, and considering whether this should trigger further interaction or messaging.


Moreover, Assurance Statements provide very little evidence on what interaction happens when potential issues are identified. The necessity for recent high-profile Gambling Commission regulatory sanctions involving operators who have failed to identify highly risky behaviour, despite very clear warning signs, reinforces our concern that change in this area is not happening with sufficient pace.

Part of the problem appears to be the unrealistic views held by many operators about the proportion of problem gamblers and those at moderate risk of harm likely to be in their


⁸ [Remote gambling research, interim report on phase 2](#), PwC, August 2017.


		<p>customer base. It must be a cause for concern when operators claim in their Assurance Statements that the proportion of problem gamblers in their customer base is lower than the proportion found in the overall population of Great Britain – of which nearly 40 per cent have not even gambled at all in the past year, even on lottery products.⁹ Genuine corporate commitment to minimising harm would appear unlikely in any organisation which seriously underestimates the extent to which there is an issue to be addressed.</p> <p>It is important also to avoid unrealistic expectations about the effectiveness of algorithms alone in capturing harmful play, particularly in sectors where account-based play is limited. A number of operators claim to recognise the ability of well-trained staff to spot harmful play, and to be investing in improved staff training. We have not yet, however, seen a great deal of evidence of the effect such initiatives are having. Better trained staff can, of course, only be expected to be effective if they are present in sufficient numbers and in an environment where they feel safe to implement their training. Any training also needs to be subject to appropriate quality assurance controls to ensure its effectiveness.</p>
 <p>Rating: RED / AMBER</p>	<p>Operators, often working in collaboration with each other, designing and implementing pilot projects to test interventions to reduce harmful gambling.</p> <p>This should be across a wide range of different types of support and interventions, taking place in all sectors of the industry, and accompanied by evaluation and development to put learning from trials into practice.</p>	<p>There has been a marginal improvement in this rating, from Red to Red/Amber.</p> <p>A number of operators have invested in testing and trialling new ways of protecting players from gambling-related harms. Hence the small improvement in this rating. Examples include:</p> <ul style="list-style-type: none"> • reducing deposit limits for age groups that are at greater risk of harm • reducing deposit limits at certain times of day when gambling-related harms are more likely • increasing the prominence of, and better promoting the use of, gambling management tools • introducing stronger age verification standards, such as Think 25 • using facial recognition technology at the point of entry to improve the enforcement of self-exclusion • preventing marketing material from reaching players who are identified in player tracking as being at risk of harm • introducing additional restrictions and controls for new customers in their first 30 days • developing best practice guidance for managers and staff on how to conduct successful interactions with potential problem gamblers; and

⁹ [Gambling behaviour in Great Britain 2015, evidence from England, Scotland and Wales](#), Gambling Commission, August 2017.

	<p>Results should be shared at conferences and in other ways.</p>	<ul style="list-style-type: none"> developing, piloting and independently evaluating a customised qualification around customer service, risk management and the identification of problem gamblers. <p>Such operators appear, however, to be in a minority. Too many others have produced little or no evidence in their Assurance Statements of taking responsibility for finding new and innovative ways of protecting players. In order to protect vulnerable people and children, gambling operators need to take action beyond focusing on strict compliance with the minimum standards set out in the LCCP. Ensuring vulnerable people are protected from harm should be approached with the same energy and commitment that is applied to operators' commercial endeavours.</p> <p>GambleAware has commissioned the Behavioural Insights Team to undertake phase three of a remote gambling research programme which will focus on developing and testing interventions to reduce gambling-related harms. This is a positive step forward, not least because the testing of new interventions is being combined with credible plans for evaluating their impact – an approach which needs to become more widespread. At present, even when operators do identify new activities to pilot, this is not often done in combination with a clear plan for evaluation of the impact.</p> <p>In most cases player protection initiatives are being treated as a commercial endeavour, involving intellectual property to be protected. A more open and collaborative approach is required if greater progress is to be achieved.</p>
 <p>Rating: AMBER</p>	<p>Schemes in place and followed by evaluations designed to improve their effectiveness and assess the extent to which they are effective at reducing gambling-related harm.</p> <p>Improvements in levels of awareness amongst gamblers of the possibility of self-exclusion as a tool to</p>	<p>There has been a marginal decline in the rating, from Green/Amber to Amber.</p> <p>We identified the need to evaluate the impact of multi-operator schemes as a priority in our last progress report. Since then, our rating has moved backwards. Where industry evaluations have taken place, they have not always been published; and the reports we have seen contain very little information collected from consumers on the impact of the schemes. Moreover, there has been no increase in the number of gamblers who are aware of self-exclusion. Indeed, there has been a small, but statistically significant, decrease. 59 per cent were unaware in 2017, compared with 57 per cent in 2016.¹⁰</p> <p>The Gambling Commission decided last summer to coordinate the evaluation of existing schemes through GambleAware, rather than through the trade associations. In retrospect, given that multi-operator self-exclusion schemes were a new requirement of the LCCP, it was probably a mistake in the first place to think that trade associations should be expected to</p>

¹⁰ [Gambling participation in 2017: behaviour, awareness and attitudes](#), Gambling Commission, February 2017.

	<p>manage their gambling.</p>	<p>take responsibility for impact evaluation of the schemes. As a result of the change, progress has been slow.</p> <p>It is important that this delay in evaluating the existing schemes through GambleAware is not used as a reason to hold up process improvements in the schemes where the need has become apparent.</p> <p>There has also been a delay to the launch of GAMSTOP, the multi-operator self-exclusion scheme for the remote sector, originally due to be launched in December 2017. The next stage of its development is the provision of a multi-operator self-exclusion service involving a number of online gambling websites. Coverage is not of the entire sector. The requirement for all online operators to participate in the scheme will come into effect later in the year, once the Commission is assured that the scheme is fit for purpose. Though the delay is disappointing, it is important that the scheme is subject to sufficient testing to ensure that it is as robust as possible when it is fully operational.</p> <p>The delay in the launch of GAMSTOP, the slowness of the evaluation of other schemes to get off the ground and the fact that there has been no increase in awareness of the possibility of self-exclusion are the reasons for the deterioration in this rating.</p>
 <p>Rating: AMBER</p>	<p>Completion of a systematic review of the role of education and decisions taken about how best to follow up its conclusions, and scale-up activities that are proven to have a realistic prospect of being successful in reducing harm.</p>	<p>There have been some developments in relation to this Priority Action, but not enough to shift its overall rating which remains Amber.</p> <p>GambleAware is currently funding a number of education and harm prevention projects focusing on particularly vulnerable groups – the homeless, military personnel and children and young people – promoting a ‘Make Every Conversation Count’ approach across the public health community. In March, Demos launched materials for schools to use in Personal, Social, Health and Economic (PSHE) classes. These materials have been positively evaluated. A successful pilot with Newport Citizens Advice is now being developed for adoption by the national Citizens Advice network. GambleAware expects to evaluate the effectiveness of all these projects over the next 12 months, after which it will be possible to form a view about the potential to roll them out on a wider scale.</p> <p>The industry delivered a Responsible Gambling Week in October 2017 to raise public awareness of responsible gambling. The organisation of the week was led by the Industry Group for Responsible Gambling (IGRG).</p> <p>Some operators are also supporting harm prevention through other activities. For example, YGAM receive funding directly from operators to deliver a Train the Trainer gambling-related</p>

		<p>harm-prevention programme to teachers, youth workers, community mental health colleagues, prison and probation colleagues and others. In addition, a two-year national broadcast prevention campaign has been announced by the Government. GambleAware is leading a board deciding the objectives of the campaign, its content, its target market, its core messages and its eventual evaluation. Unintended consequences are a significant risk in campaigns of this type.</p> <p>What remains missing is a clear strategic framework in which to fit these and other education and information activities. The development of such a framework will be an important task for the future. It should become easier once the evaluations of the pilot projects and of the public information campaign have been completed.</p>
 <p>Rating: AMBER</p>	<p>The creation of a body of evidence about the quality and effectiveness of different treatment options. More will be known about the steps that can be taken to encourage people to seek support through treatment and prevent them from dropping out.</p> <p>The Data Reporting Framework will be fully embedded in funded treatment provision and independent analysis will be published regularly. The learning from these activities will inform future commissioning decisions.</p>	<p>There have been some positive developments in relation to this Priority Action, but not enough to shift its overall rating which remains Amber.</p> <p>GambleAware has taken some major steps over the past 12 months to improve the quality and value for money of the treatment services it funds. The new approach has led to some core service providers making significant organisational changes, the introduction of a new stepped model of clinical care and clearer pathways and assessment for treatment. A new Quality Assurance Framework has also been introduced, along with more robust contract management processes and improvements in training. Further work is needed to determine the optimum delivery structure and to help ensure that the right mix of treatment services are offered. Barriers to access also need to be identified and addressed, and more done to engage a larger proportion of problem gamblers in the treatment and support they require. These changes may have significant implications for the amount of funding required.</p> <p>To help create the evidence base needed for this more strategic approach, the Board has finalised three research briefs – a delivery gap analysis/needs assessment of treatment, a systematic review of effective treatment approaches, and a project to develop an evaluation framework for existing services. GambleAware has recently published the invitations to tender for two of these projects.</p> <p>GambleAware has also commissioned an independent analysis of the information collected by their Data Reporting Framework; and it has recently published a Brief Intervention Guide which can be used by specialist and non-specialist providers to screen and triage those who may require treatment for gambling problems.</p>





Rating: **GREEN / AMBER**

A wider range of researchers tendering for gambling-related research. Fewer expressions of unwillingness to do so because of concern about the source of funding. Researchers will have access to a broader range of funding streams and expertise from other sectors and fields of research. They will be assisted by greater availability and sharing of data and results will be disseminated widely and transparently. There will be a greater degree of public confidence in the quality and independence of gambling-related research, and a reduction in criticism of the way research funds are allocated and research questions set.

There has been a marginal improvement in this rating, from Amber to Amber/Green.

New research governance and commissioning procedures have been implemented which give the Responsible Gambling Strategy Board responsibility for scoping each of the projects in the Research Programme (including setting the research questions). The role of GambleAware is commissioning and quality assurance. Partly as a consequence, there are signs of increased breadth in the range and number of researchers responding to invitations to tender, thus widening and strengthening the research field. For example, the first project on advertising and marketing commissioned under the new governance arrangements has been awarded to the Institute of Social Marketing – an organisation which had not previously engaged in gambling research. The Behavioural Insights Team has also been commissioned to carry out research on gambling for the first time.

These developments are sufficient to warrant an improvement in the rating for this Priority Action. However, the overall pace of commissioning the Research Programme needs to improve if full advantage is to be taken of this progress. There are fewer projects under way this year than we had hoped. More also needs to be done to synthesise the key findings from research into meaningful and practicable insights. One way of addressing this might be to produce an annual report which summarises and share what we have learnt from research. Additional capacity and funding will be needed.

 <p>PA11 Horizon scanning</p> <p>GC GA RGSB Industry</p> <p>Rating: AMBER</p>	<p>Horizon scanning will involve a range of different techniques to gather information, including media scanning, data analysis and insights from industry stakeholders.</p> <p>Such analysis will be disseminated so that a wide range of partners can benefit from any insights.</p>	<p>There have been some developments in relation to this Priority Action, but not enough to shift its overall rating which remains Amber.</p> <p>We are still some way from a coordinated and comprehensive approach to gathering, analysing and sharing information about emerging risks across the industry. Inevitably, it is the Gambling Commission which has to take the lead in this area. Its new Corporate Strategy places a strong emphasis on risk; and as part of its internal restructuring it has created a number of new teams, one of which will have responsibility for identifying strategic risks and threats. The Commission has also created a Digital Advisory Panel to advise on digital, data and technology developments that may impact on gambling and regulation of the industry, and has held a series of round tables to help understand emerging risks.</p> <p>These are promising signs. Improving the rating over the next 12 months will require evidence of effective implementation of the new arrangements and dissemination of the results.</p>
 <p>PA12 Public engagement</p> <p>GC GA RGSB Industry</p> <p>Rating: AMBER</p>	<p>Gamblers, whether experiencing harm or not, should be consulted during the planning of interventions at a point when their insights and experiences can influence those plans.</p>	<p>There have been some developments in relation to this Priority Action, but not enough to shift its overall rating which remains Amber.</p> <p>The Strategy requires all organisations with a responsibility for implementation to pay greater attention to the views of gambling customers and members of the public about their experiences. Evidence of this happening to any significant extent is still limited.</p> <p>There has been some progress. The Gambling Commission has made a commitment to understanding consumer views in its Corporate Strategy, and all research briefs prepared by the Board now require consideration of consumer and public engagement.</p> <p>Within the industry, at least one operator has surveyed its customers better to understand their views of its approach to responsible gambling. Others are using focus groups to gain insights into the use of gambling management tools. We are also aware of an operator who runs workshops in local communities to discuss issues related to gambling.</p> <p>These practices are not, however, as yet very widespread. Consultation with customers is more commonly focused on understanding the commercial aspects of products, rather than on issues of safer gambling.</p> <p>Greater focus on evaluation would help stimulate faster progress. More activity to understand impact would necessarily require greater engagement with consumers.</p>

VI. RET funding requirement

Background and context

12. This section provides an updated estimate of the funding required to deliver research, education and treatment (RET) in line with the National Responsible Gambling Strategy. Making this estimate is one of the Board's responsibilities, set out in our terms of reference.¹¹
13. Our last estimate of the funding requirement was provided in January 2017. That estimate of £9.5 million for 2018-19 was heavily caveated. We made clear there was significant potential for funding requirements to increase once more was understood about what works in education and treatment, and as new research needs were identified. We also took account of current levels of capacity to spend the funds raised.
14. The estimates in this report take a different approach. They consider the levels of funding needed if a real impact is to be made on reducing gambling-related harms. We have looked at what needs to be done, not what we are currently able to do. The new figures also in part reflect the Gambling Commission's stated ambition for Great Britain to be a world leader in minimising gambling-related harm.¹² They are inevitably to some extent speculative.
15. There will be additional costs associated with the Strategy borne by operators in developing new systems to identify harmful play, piloting new interventions and evaluating them. These costs should be seen as additional to those needed to fund the research, education and treatment costs outlined here.

Explanation of estimate for each element of RET

Research

16. It has become increasingly clear that research that will influence policy and regulatory change requires a more ambitious approach than that embodied in our current Research Programme. Making a significant difference will require programmes of work (rather than single projects). It may also often involve consortium teams and/or multi-phased approaches. Additionally, our initial costing for research focused on the costs of the projects within the Research Programme. It did not include funding for capacity building, research dissemination, or broader initiatives, such as a data repository.
17. Experience from the first year suggests £3 million a year will be required to deliver the existing Research Programme through wider thematic programmes of work. Additional funding of perhaps £1.5 million a year might be required for capacity building, dissemination and broader initiatives such as a data repository. On this basis, delivery of the research elements of the Strategy would require a minimum of £4.5 million a year.
18. There is a case for the establishment of a multi-disciplinary gambling research centre or network. The costs of this would depend on the precise details, but could add several millions of pounds annually, depending on the extent to which partnership funding is secured.

Education and prevention

19. An effective approach to education and prevention is likely to involve a combination of national awareness campaigns and targeted prevention initiatives for specific vulnerable groups, provided that both are demonstrated (through evaluation) to be effective.

¹¹ [RGSB terms of reference](#), Responsible Gambling Strategy Board, August 2011.

¹² Strategy 2018-2021 (page 14), Gambling Commission, November 2017.

20. GambleAware will shortly begin a one-off national broadcast prevention campaign, at a cost of approximately £7 million. This cost is broadly consistent with that of other large-scale public campaigns. The Register to vote on EU, Helmet Safety, and This Girl Can campaigns, for example, all cost between £5 million and £9 million. Experience from other fields suggests that any campaign will need to be repeated at intervals to fully realise the potential benefits.
21. GambleAware estimates that effective targeted initiatives for a wide range of specific vulnerable groups, for example children and young people, homeless people, and prison populations, would cost in the region of £5 million per year. Some operators are already funding organisations to carry out harm prevention work in other ways. We believe these efforts would be more effective if coordinated through a national strategy.
22. Once we know what is effective, spend on education and prevention could therefore be of the order of £12 million a year (£7 million for a national campaign if repeated annually and £5 million for prevention initiatives targeted at specific vulnerable groups).

Treatment

23. Last year's estimate of the funding required for treatment assumed broadly similar numbers accessing services as in previous years.
24. Only about 2 per cent of problem gamblers are, however, currently accessing GambleAware-funded treatment. It is difficult to regard this as an adequate response to the problem, even after taking account of those accessing treatment in other ways. By comparison around 30 per cent of drug users and people with alcohol dependency in England present for treatment.¹³
25. As indicated earlier, a review of treatment provision and potential gaps is about to be commissioned by GambleAware as part of the RGSB Research Programme. It will be carried out during 2018-19. We do not want to anticipate its outcome. But bearing in mind that existing provision has developed organically, and been subject to funding constraints, we think it likely that the review will identify shortfalls in volume, geographical coverage and types of service provided. Until the review is completed we will not be in a position to estimate with any confidence the cost of a treatment service that really meets the true level of need. When complete, we will have more evidence about the most effective mix of different types of services and the scope for economies of scale or efficiencies to be made from better aligning treatment services for gamblers with other services.
26. We expect, however, that significantly greater funds will be needed than the £6 million or so currently available for GambleAware funded services. We note that in their advice to the DCMS in relation to the Gambling Review, the Gambling Commission has suggested a range of between £11 million and £30 million.¹⁴
27. GambleAware's own new strategy includes the objective of tripling the number of people accessing the services they fund by 2021 (which is well beyond the period of the existing strategy), within the existing budget. The expectation is that this will be achieved primarily through efficiencies, implementing a common screening tool and a tiered treatment approach, and extending (cheaper) online self-help and brief interventions.
28. This target, if it can be reached, would still imply that only 21,000 people were treated by GambleAware funded services each year, less than five per cent of the number of

¹³ The number of problem users for drugs and alcohol is not hugely different than the number of problem gamblers (300,000 for drugs and 600,000 for alcohol, compared to an estimated 430,000 problem gamblers).

¹⁴ The Gambling Commission's overall assessment of total RET funding requirements was £21.5 million to £67 million when fundraising costs are also factored in.

problem gamblers and an even smaller proportion of those who might benefit if those at moderate risk of harm and affected others were also included. We doubt that many would regard this as a sufficiently ambitious response to the problem. In our view it would be appropriate to aim to reach a significantly greater proportion of those being harmed by their own or others gambling, or at risk of it. That will inevitably come at a price. By way of illustration, at current unit costs,¹⁵ treating 10 per cent of problem gamblers a year would cost up to £30 million. 20 percent might cost £60 million, and so on.

29. These figures may appear high. We note, however, that:

- i. Public health grants to addiction-specific treatment services for drugs and alcohol are larger by an order of magnitude, totalling £490 million and £230 million respectively.¹⁶
- ii. Demand for treatment – both from gamblers and from affected others – is likely to be stimulated by the planned national broadcast campaign.
- iii. It has recently been announced that £6 million will be provided by the Department for Health and Social Care and the Department for Work and Pensions to support the children of alcoholic parents.¹⁷ This is the same amount as the total currently provided through GambleAware for treatment.

Overall estimate

30. Realistic estimates of the annual funding requirement for RET (a) if there was a commitment to making a real difference in this area, and (b) depending on the evaluation of a number of different initiatives might therefore be:

- Research: a minimum of... £4.5 million
- Education: eventually rising to... £12 million
- Treatment: too early to estimate, but likely to be significantly more than at present, whether commissioned by GambleAware, provided through the NHS or available in other ways.

31. In addition, the establishment of a world-leading gambling research centre in Great Britain could cost several additional millions of pounds per year, depending on the approach taken.¹⁸

32. These figures, especially when a significant increase in the funds available for treatment is included, would be a step-change from previous estimates, reflecting the greater degree of ambition underlying them. They would bring Great Britain more into line with some other leading international jurisdictions (though many others spend considerably less per problem gambler), and with spending on other public health issues.

33. The gambling industry's gross gambling yield when the National Lottery is included is £13.8 billion a year.¹⁹ A significant increase in its contribution to mitigating the harm associated with its activities does not seem unreasonable, even taking into account the tax and gaming duties it already pays.

¹⁵ Based on GambleAware's current spend of circa £6 million to treat 2 per cent of problem gamblers.

¹⁶ [Commissioning impact on drug treatment \(online\)](#). The Advisory Council on the Misuse of Drugs 2017.

¹⁷ [New support to help children living with alcohol dependent parents](#), Department of Health and Social Care, April 2018.

¹⁸ In their advice to the DCMS the Gambling Commission estimated the annual cost of research, including a dedicated research centre, as being around £20 million.

¹⁹ Gambling Commission Industry Statistics, April 2014 – March 2017.

The transition to a new level of funding

34. There is insufficient capacity to make best use of a greatly increased volume of funding for treatment services immediately. A pragmatic approach would need to be taken to how quickly it might be possible to make progress. In the light of experience with the present programme, increased funding for research, is, however, needed immediately. The creation of a truly world class research centre, if the case for that was made out, would take some time to plan and set up. Increased funding for public information and targeted preventive education should depend on the evaluation of existing initiatives, which will be happening over the next year.
35. In the short-term, funds to accelerate this work may come through voluntary settlement arrangements between operators and the Gambling Commission. This is, however, unlikely to be a sustainable long-term solution. The need for a step change in funding, and the desirability of ensuring that costs are spread fairly between operators, adds to the case for a statutory levy to replace the existing voluntary arrangements.
36. An increase in funding will also require consideration of the best mechanisms for its distribution. That may require thinking beyond existing RET structures.

V. Conclusion

37. Our overall assessment of progress with the National Responsible Gambling Strategy is that it is good in parts, but not yet sufficiently good to make us comfortable about the position likely to be reached at the end of the third and final year. Some operators are more active than others in responding to the challenges of the Strategy. Progress on some of the Priority Actions is looking more successful than others; and there are a number of areas where things could have gone significantly better – not all of these being the responsibility of the industry.
38. Generally, the pace of change has been slower than we had hoped, and expected, given the degree of sign-up when the Strategy was first published. We believe there to be a number of possible reasons. Two appear to us to be particularly important:
- i. Despite what we believe to have been genuinely good intentions at the beginning, ownership of the Strategy by operators is much less complete than we had hoped. Only a minority seem really to understand what is required of them if the Strategy is to be successful; and genuine culture change is, perhaps inevitably, proving to be difficult.
 - ii. In retrospect, it was probably a mistake not to have a more fully worked through implementation plan for delivering the Strategy, with individual accountabilities more clearly established and greater direction from the Gambling Commission about what they expected to happen.
39. We therefore welcome the intention of the Gambling Commission to provide greater leadership to coordinate and encourage implementation in the future.
40. Once a type of intervention or action has been shown to be effective at protecting players from harm, greater consideration needs to be given to mandating it across all operators. Those operators who are leading the way and investing more time and effort in the identification and reduction of gambling-related harms should not be commercially disadvantaged.
41. In our view, all 12 Priority Actions in the Strategy remain relevant. But to maximise the impact that can be achieved over the final 12 months of the Strategy period we believe that operators should pay particular attention to better detection of consumers who are suffering, or at risk of, harm, to further work to develop, pilot and test new ways of protecting players from harm, and to the evaluation of these interventions. For other stakeholders, the continued focus should be particularly on understanding, identifying and measuring gambling-related harms, on further embedding the work on gambling as a public health issue and on developing national strategies on preventive education and treatment.
42. We continue to believe in the relevance and importance of the Strategy. There is, however, a great deal to be done over the next 12 months if it is to be judged a success. That will require considerable effort from everyone concerned. Failure would, or ought to, call into question some of the assumptions on which the current framework for the regulation of gambling is based.

Annex A: Summary of actions

This annex contains more detail on many of the research projects, industry initiatives and other actions that have been delivered in the 12 months from April 2017 to March 2018. The list is not exhaustive and does not include details of operator-led projects (unless already in the public domain). It does, however, attempt to capture a large proportion of what has happened at a national and sector level.

Priority action 1: Understanding and measuring harm

- Creation of an expert group, chaired by the Responsible Gambling Strategy Board, to lead on the development of a conceptual framework for gambling-related harms (September 2017).
- Launch of a funding opportunity by the National Institute for Health Research (NIHR) for 'Interventions to prevent or reduce gambling related harm' (January 2018).
- Publication of research by Citizens Advice exploring the causes and impacts of problem gambling (January 2018).

Priority action 2: Engagement with relevant public sector bodies and other agencies to encourage greater sharing of responsibility for delivering the strategy

- Launch of new research to explore the public health impact of gambling throughout Wales led by Bangor University and Swansea University working closely with Public Health Wales (May 2017).
- Publication of the results of a pilot project between Beacon Counselling Trust, GamCare, Cheshire Police and Mitie Care in Custody to raise awareness of, and screening for problem gambling at the point of arrest (November 2017).
- Publication of *Gambling with our Health*, the 2016/17 Annual Report from the Chief Medical Officer for Wales, which this year looks in particular at the relationship between gambling and health (January 2018).

Priority action 3: Consolidating a culture of evaluation

- Publication of a range of resources designed to support the gambling industry to undertake effective evaluation by GambleAware (June 2017).
- Publication of a first stage independent evaluation of the YGAM programme by City, University of London (September 2017).
- Publication of the GambleAware funded evaluation of the BetKnowMore 'Don't Gamble with Health' pilot project (December 2017).
- Second PwC audit of members Player Awareness Systems, commissioned by the Association of British Bookmakers.
- Quantitative evaluation of phase 1 and phase 2 of the Anonymous Player Awareness System, commissioned by the Association of British Bookmakers.
- OKO qualitative evaluation of the Anonymous Player Awareness System, commissioned by the Association of British Bookmakers.
- Cross industry evaluation of Responsible Gambling Week 2017, commissioned by Industry Group for Responsible Gambling.

Priority action 4: Increased understanding of the effects of product characteristics and environment

- Completion and publication of the GambleAware commissioned scoping investigation of eye-tracking in Electronic Gaming Machine play (April 2017).
- Completion and publication of the GambleAware commissioned research to use digital grounded theory to understand problem gambling and harm minimisation opportunities for remote gambling (November 2017).
- Completion and publication of research funded by GambleAware analysing play among British online gamblers on slots and other casino-style games (March 2018).

Priority action 5: Improving methods of identifying harmful play

- Launch of a new £5 million predictive algorithm initiative by Sky Betting and Gaming and William Hill (July 2017).
- Launch of a three-year research project by Kindred Plc analysing anonymous customer data to strengthen their player protection practices (June 2017).
- Completion and publication of phase two of the GambleAware commissioned research exploring behavioural markers of harm in the remote sector (August 2017).
- Review into customer interaction practices in the remote sector by the Gambling Commission and publication of its high-level findings (September 2017).
- Commencement of trials in non-remote casino sector, working with Focal Research, to identify risky gambling behaviours (January 2018).
- Launch of a third phase of remote gambling research funded by GambleAware which aims to develop and test interventions to reduce gambling-related harms (January 2018).
- Publication of guidance for remote operators on customer interaction by the Gambling Commission (February 2018).
- Publication of consumer research commissioned by the Gambling Commission on how machine gamblers feel about tracked play (March 2018).

Priority action 6: Piloting interventions

- Launch of the 'PlayRight' application by Praesepe (August 2017).
- Completion and publication of the GambleAware commissioned phase one research to identify responsible gambling industry initiatives (October 2017).
- Publication of a report by Senet on its 'When the fun stops, stop' responsible gambling campaign (November 2017).
- Launch of the SkyBet responsible gambling campaign (November 2017).
- Commencement of a pilot between operators and YGAM to develop an accredited qualification around Customer Service, Risk Management and identifying Problem Gamblers (November 2017).

Priority action 7: Self-exclusion

- Publication of a set of Evaluation principles for multi-operator self-exclusion schemes by the Gambling Commission (June 2017).

Priority action 8: Education to prevent gambling-related harm

- Launch of the GamCare national youth outreach programme in four areas which has trained 500 youth facing professionals and supported more than 1,000 young people.
- Development of an ASDAN accredited Train the Trainer gambling-related harm-prevention programme by YGAM. The programme is quality assured by Pearson and quality-marked by the PSHE Association. Between 1 July 2016 to 30 June 2017 YGAM worked with 348 organisations to deliver the programme to 28,648 young people.
- Creation of an online training module on 'Managing and Protecting Vulnerable Customers in Casinos' by Playing Safe in consultation with the Alzheimer's Society to raise awareness of mental health issues amongst customers.
- Publication of the Demos report from their two-year GambleAware funded gambling education pilot project (March 2018).

Priority action 9: Building the quality and capacity of treatment

- Publication of a Brief Intervention Guide to support professionals who do not specialise in the treatment of gambling problems by GambleAware (November 2017).
- Continued facilitation of the GambleAware National Clinicians Network Forum (quarterly).
- Publication of GambleAware updates on wait times for assessment and treatment (quarterly).
- Analysis and reporting of aggregate statistics on Gambling Treatment in Great Britain in 2016-2017 from the Data Reporting Framework.

Priority action 10: Widening and strengthening the research field and improving knowledge exchange

- Publication of the Research Programme for 2017-2019 by the Responsible Gambling Strategy Board (May 2017).
- Publication of GambleAware's Commissioning Plan setting out how it plans to commission research and evaluation activity in line with the RGSB Research Programme (May 2017).
- GambleAware funds a new PhD student (March 2018).

Priority action 11: Horizon scanning

- Publication of the Gambling Commission's new Corporate Strategy 2018-2021 which places a strong emphasis on being risk-based (November 2017).
- Creation of a Digital Advisory Panel to advise the Gambling Commission on digital, data and technology developments that may impact on gambling and regulation of the industry.

Priority action 12: Public engagement

- Launch of Resolver, an online support tool, for gambling consumers to make complaints related to gambling (August 2017).
- Organisation and delivery of the IGRG's first pan-industry Responsible Gambling Week 2017 where the theme was "let's talk about responsible gambling" (12-18 October 2017).
- Refresh of the GamCare Service User Panel.
- National Casino Forum (NCF) led pilot survey of casino customers under 30 years of age, to understand more about their experience of gambling, and how they might respond to responsible gambling messaging.