

LEICESTER CITY HEALTH AND WELLBEING BOARD DATE

Subject:	Gambling Harms Health Needs Assessment
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EXECUTIVE SUMMARY:

1. Gambling is a commonly conducted activity in the United Kingdom (UK), with around 40% of the population having participated in a gambling activity other than the National Lottery in 2018. Although many engage in gambling behaviour that is not associated with significant adverse effects, there are some for whom gambling behaviour can involve taking considerable risks and experiencing substantial harms.

2. The aim of the Leicester City Gambling Harms Needs Assessment was to describe the health needs related to gambling harms in Leicester, services that are in place to address these needs, and recommendations for further actions to meet this health need.

3. It is estimated that there could be around 1,500 people in Leicester experiencing problem gambling (gambling to a degree that compromises, disrupts or damages family, personal or recreational pursuits). Problem gambling is associated with worsened mental health, alcohol and substance use and higher risk of suicide; people aged 20-49 who experience problem gambling are 19 times more likely than average to die by suicide. Population demographics of Leicester have several characteristics associated with an increased risk of problem gambling.

4. Data suggests that Leicester City is in the lowest quintile for prevalence of non-problem gambling, but in the highest quintile for problem and moderate-risk gambling. It is also predicted that Leicester is in the lowest quintile for demand and uptake of treatment and support by those experiencing problem gambling.

5. The needs assessment recommends that a strategy to address gambling harms in Leicester City is developed and implemented. This is being led by Public Health and is currently in the early stages of development, with engagement from key stakeholders.

6. A link to the full Gambling Harm Needs Assessment 2024 can be found [here](#).

RECOMMENDATIONS:

7. The Health and Wellbeing Board is requested to:

- a. Note the findings and recommendations of the Health Needs Assessment.
- b. Support the development of an upcoming strategy on Gambling Harms for Leicester City through ongoing commitment and departmental/organisational representation on the strategy development group.

HEALTH NEEDS ASSESSMENT FINDINGS:

8. Summary of literature: It is estimated that around 54% of the general population take part in gambling at least once in a year (when not including the national lottery, this figure drops to 40%). Problem gambling (gambling to a degree that compromises, disrupts or damages family, personal or recreational pursuits) is estimated to be experienced by 0.4% of the population; At-risk gambling (gambling that leads to less severe negative consequences) by 3.8%; and around 7% are negatively affected by someone else's gambling ('affected others'). If these estimates were accurate for Leicester's 368,600 population, this would suggest there to be around 1,500 experiencing problem gambling, 14,000 experiencing at-risk gambling, and 26,000 affected others. Problem gambling is associated with worsened mental health, alcohol and substance use and higher risk of suicide; people aged 20-49 who experience problem gambling are 19 times more likely than average to die by suicide.

9. Local profile related to gambling: Population demographics of Leicester have several characteristics associated with an increased risk of problem gambling, including having a larger-than-average proportion compared to England who are: aged between 16 and 34 years; living in a deprived area; or unemployed. Leicester also has a higher-than-average proportion of people of Asian or Asian British ethnicity. National survey data indicate that people of this ethnicity are generally less likely to gamble, but more likely to experience problem gambling than other ethnic groups. We do not know of reliable evidence investigating gambling behaviours within more specific ethnicity categories.

10. Data from GambleAware (2015-22): Data for 166 Leicester clients was received. Eighty percent were male, 63% were of White British ethnicity and 22% were of Asian or Asian British ethnicity. Over 70% were employed. Around 90% were referred because of personally experiencing problem gambling, and the remainder were referred due to being affected by someone else's gambling. Almost 9% had lost a job and around 30% had lost a relationship due to gambling. Over a quarter had a gambling debt of over £5,000. The commonest type of reported gambling activity was online gambling, at 78%

11. Mapping: Accessibility of Leicester gambling outlets is highest in the central shopping area and is high in many areas with high deprivation. Data from a YouGov survey performed on behalf of GambleAware suggests (with a low level of certainty due to small numbers of participants) that Leicester City is in the lowest quintile for prevalence of non-problem gambling, but in the highest quintile for problem and moderate-risk gambling. The survey results also predicted Leicester to be in the lowest quintile for demand and uptake of treatment and support by those experiencing problem gambling.

12. Treatment and support services: There are three services providing treatment for gambling harms in Leicester City: the NHS East Midlands Gambling Service (which launched in July 2023), which is based in Derby and accepts referrals from across the East Midlands; Gamblers Anonymous, which is a national organisation,

with a local branch that holds meetings in Leicester; and GamCare East Midlands, which delivers structured treatment online.

13. Stakeholders: Given the risks associated with gambling harms, and the populations particularly vulnerable to these harms, the following stakeholders were identified: those working in suicide prevention, mental health, primary care, children and young people, substance misuse or homelessness services; the police and criminal justice system; alcohol harm reduction charities; those whose work involves licensing of gambling premises; those with previous or current experience of high risk or problem gambling, of who have been negatively affected by someone else's gambling.

HEALTH NEEDS ASSESSMENT RECOMMENDATIONS:

14. A strategy to address gambling harms in Leicester City will be developed and implemented, based on the themes of:

- a. **Collaboration:** Working with stakeholders identified above (Section 13); influencing organisations and political colleagues to protect people of Leicester from gambling harms; and will determine how to work with industry-funded organisations.
- b. **Data collection:** Improving gambling data collection and screening people at risk.
- c. **Training and education:** Implementing staff training on signposting and advice provision; and educating for children and families on avoiding harms.
- d. **Influencing advertising and licensing** and promoting regulation of licensing to protect people from harmful exposure to gambling promotion.