

Tasman District Council's Gambling Venues Policy Review 2019

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Submitter details

1. Nelson Marlborough Health (Nelson Marlborough District Health Board) (NMH) is a key organisation involved in the health and wellbeing of the people within Te Tau Ihu. NMH appreciates the opportunity to comment from a public health perspective on the Tasman District Council's Gambling Venues Policy Review 2019.
2. NMH makes this submission in recognition of its responsibilities to improve, promote and protect the health of people and communities under the New Zealand Public Health and Disability Act 2000 and the Health Act 1956.
3. This submission sets out particular matters of interest and concern to NMH.

General Comments

4. NMH welcomes this review of the Council's Gambling Venue Policy. NMH commends TDC on proposing to introduce a sinking lid for the number of gaming machines in the area. Gambling is a public health concern: Gambling harms includes depression, suicide, emotional and psychological distress, job losses, bankruptcy, reduced work or educational performance, relationship breakdowns and crime including theft from family members, theft from businesses and theft from communities¹. Harm from problem gambling affects many people other than the gambler in particular children who may be exposed to crime, household stress and poverty. Gambling has a major impact on the wellbeing of children and young people. The impact of indebtedness, criminality, poor physical and mental health, family violence, and household stress all have a significant and lasting impact on children. The harm done to the children of problem gamblers can be severe and long-lasting.
5. Ministry of Health research shows that 50% of problem gamblers experience family violence.² Based on the figures shown in the Council report³ on Gambling Venues, there are potentially 260 problem gamblers in Tasman, therefore there could be 130 families at risk of family violence as a result of gambling and related compounding factors. In order reduce family violence and child abuse, we need to

¹ Ministry of Health (2015) Strategy to Prevent and Minimise Gambling Harm 2016/17 to 2018/19

² Ministry of Health (2017) Problem Gambling and Family Violence in Health-Seeking Populations: Co-occurrence, impact and coping

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https://www.tasman.govt.nz/document/serve/EP_06092018_AGN_AT.pdf?path=/EDMS/Public/Meetings/EnvironmentPlanningCommittee/2018/2018-09-06/000000877530

address the drivers for the abuse and address child poverty and this includes looking at the correlation between gambling, poverty and children.

6. Research shows that increased availability and accessibility to gaming machines leads to an increase in problem gambling. Studies have found that although there are fewer gaming machines than there had been historically, they are still concentrated in more deprived areas.^{4,5,6}
7. Across New Zealand, gaming machines tend to be more concentrated in socially deprived areas⁷. The resulting harm disproportionately affects Maori, Pacific, people who are separated, divorced and those from single-person households as well as lower income families and communities. The Council report⁸ states that Tapawera (deprivation index 5) has 1 machine per 74 people compared with Wakefield (deprivation index 1) has 1 machine per 273 people. In addition, the number of machines has increased in Tapawera in recent years.
8. There is no guarantee that the grants benefit the communities who have put their money in these machines. The return from these machines therefore does little to reduce the social impact of gambling in this already deprived communities.

Specific Comments

9. NMH strongly supports the introduction of a sinking lid policy: a district wide ban on any new gambling venues or machines and gaming machines cannot be transferred to a new pub or owner if the venue closes. A sinking lid policy would reduce the number of venues over time but would not affect existing venues or current community funding in the short term.
10. This approach supports the first objective of the TDC policy to minimise the harm caused by gambling to the community and is consistent with the Tasman's Community Outcome 4 as identified in the 2018-2028 Long Term Plan, particularly: *Our communities are healthy, safe, inclusive and resilient.*

⁴ Ministry of Health 2015 Strategy to Prevent and Minimise Gambling Harm 2016/17 to 2018/19

⁵ Orme, C. (2008). *Problem Gambling: The Hidden Disorder*. Mindnet: Mental Health Foundation of New Zealand. <http://www.mentalhealth.org.nz/newsletters/view/article/4/33>

⁶ Abbott, M. (2001). *What Do We Know About Gambling and Problem Gambling in New Zealand?* The Department of Internal Affairs: Wellington

⁷ Rook, H. & Rippon R., (2018) *Gambling Harm Reduction Needs Assessment* Ministry of Health <https://www.health.govt.nz/system/files/documents/publications/gambling-harm-reduction-needs-assessment-aug18.pdf>

⁸

https://www.tasman.govt.nz/document/serve/EP_06092018_AGN_AT.pdf?path=/EDMS/Public/Meetings/EnvironmentPlanningCommittee/2018/2018-09-06/000000877530

11. From an administrative perspective, sinking lid policies are also favourable for Councils. Introducing a sinking lid results in natural attrition therefore it reduces the need for extensive reviews of gambling policies every few years to ensure that cap is appropriate.

Conclusion

1. NMH thanks the Tasman District Council for the opportunity to comment on the Gambling Venues Policy Review 2019.
2. NMH wishes to be heard on its submission.

Yours sincerely

A handwritten signature in blue ink, consisting of a stylized 'P' followed by a long horizontal line that ends in a small loop.

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