



Understanding the Link between Family Violence and Gambling: Information for Local Government

- Family violence is three times more likely to occur in families in which there is problem gambling than in families in which there are no gambling problems.
- Gambling increases the frequency and severity of family violence.
- Local governments play an important role in advocating for research at a local level that addresses the link between family violence and gambling.
- Local governments can adopt evidence-based, effective gambling harm measures to reduce the frequency and severity of family violence in their communities.
- A public health approach to the co-existence of gambling and family violence can help move the focus away from the notion of 'problem gambling' as individual responsibility and think in terms of 'gambling related harm'.

This paper aims to assist health, social and land-use planners to consider how local governments can work to prevent family violence in communities where harm from gambling also exists. It describes relevant public health concepts and includes suggested actions and strategies drawn from current Victorian local government policies.

The information in this paper builds on the work of the 'Increasing the Odds for Safety and Respect' project conducted by Women's Health In the North (WHIN), Women's Health East and North East Primary Care Partnership. The project has addressed the co-occurrence of family violence and gambling harm through raising awareness in the community and health and human service sectors and through professional development of family violence and problem gambling practitioners. The project was funded by the Victorian Responsible Gambling Foundation. Further information on the 'Increasing the Odds for Safety and Respect' project can be found on the WHIN website.

Much of WHIN's work occurs in partnership with local governments and community health services, with WHIN's role being to bring an understanding of the impact of gender on individual and community health and raise awareness of the ways in which councils' and other workplaces' policies and programs can affect women's health, both positively and detrimentally. WHIN's work on family violence and gambling applies both a gendered lens and a public health approach, each of which are discussed below.

The link between family violence and harm from gambling

Recent Australian research shows that people who have significant problems with their gambling are more likely than people without gambling problems to be victims and perpetrators of family violence.¹ This research reveals that family violence is three times more likely to occur in families where there is problem gambling than in families in which there are no gambling problems.² Furthermore, over half of people with gambling problems report perpetrating physical violence against their

children.³ In 2016, the Victorian Royal Commission into Family Violence noted that the relationship between gambling and family violence is an emerging area of inquiry. The commission noted that economic security was one of the necessary pillars for women's recovery from family violence and that financial abuse as a form of family violence is not yet widely recognised nor addressed. When gambling occurs in the home, it has the potential to negatively impact on women's economic security.⁴

"Most of the women who come to our service as a family member of someone who is gambling have experienced family violence, particularly financial abuse."

Anouk Ceppithomas,
Senior Financial Counsellor
Banyule Community Health

The relationship between family violence and gambling is complex. In some instances, family violence has been found to precede gambling, with victims and perpetrators of violence using gambling as a coping mechanism.⁵ Research by the Women's Information and Referral Exchange (WIRE) into women experiencing problem gambling and isolation suggests that some women who are experiencing family violence use gaming venues as a safe space away from home.⁶ Gambler's Help counsellors and family violence workers have reported anecdotally that some female clients who are also victims of family violence visit gaming venues to escape violence at home and that some then develop problems with gambling. "[A gaming venue is seen as] a safe place for women to be, it's under cameras. There's other people there, you can be social without actually talking to anybody".⁷

In many cases gambling has also been found to occur before incidences of family violence.⁸ Gender inequality, disrespect and the condoning of violence are factors driving violence against women (including family violence), however other factors are known to increase the frequency and severity of violence in relationships. Alcohol is one such factor, with the relationship between alcohol and violence well understood. Whilst research suggests that gambling is another activity strongly associated with family

¹ N Dowling, *The impact of gambling problems on families: AGRC discussion paper no. 1 – November 2014* (webpage) 2014, <https://www3.aifs.gov.au/agrc/publications/impact-gambling-problems-families/what-are-impacts-gambling-problems-families> (accessed 14 February 2017).

² NA Dowling, C Ewin, GJ Youssef, SA Thomas, & AC Jackson Problem gambling and family violence: Findings from a population representative community study. Manuscript in preparation. 2016.

³ N Dowling, A Suomi, A Jackson, T Lavis, J Patford, S Cockman, S Thomas, M Bellringer, J Koziol-McLain, M Battersby, P Harvey & M Abbott. 'Problem gambling and intimate partner violence: A systematic review and meta-analysis', *Trauma, Violence, and Abuse*, vol. 17, no. 1, 2014, pp. 1-19. <http://dx.doi.org/10.1177/1524838014561269> (accessed 15 February 2017).

⁴ State of Victoria, Royal Commission into Family Violence: Summary and recommendations, Parl Paper No 132 (2014–16) p. 100.

⁵ L Korman, J Collins, D Dutton, B Dhayananthan, N Littman-Sharp & W Skinner, 'Problem gambling and intimate partner violence', *Journal of Gambling Studies*, 24(1), 2008, pp. 13 – 23.

⁶ Women's Information and Referral Exchange. *Opening doors to women: Assistance for organisations working with women experiencing problem gambling and isolation*. Melbourne: WIRE. No date (research conducted 2007).

⁷ Rintoul, A., Deblaquiere, J., Thomas, A., Gambling in Suburban Australia: summary findings, Australian Gambling Research Centre: Melbourne, *forthcoming March 2017*.

⁸ NA Dowling, *ibid*.

violence, further research is needed to better understand the nature of this association.⁹ As Markham, Doran and Young note, “further research utilising strong quasi-experimental designs should be undertaken to disentangle the causal relations underlying this association” (2016, p. 113). Given that many gaming and betting venues generally also serve alcohol, these environments provide the necessary conditions to increase the frequency and severity of violence.

A recent Victorian study describes the link between police-recorded family violence and EGM accessibility. Postcodes with no EGMs were associated with 20% fewer family violence incidents and 30% fewer family violence assaults, when compared with postcodes with 75 EGMs (per 10,000 people).¹⁰ This association does not explain causality and it is interpreted as gambling being both a cause and effect of domestic violence. Despite the lack of proven causality, the magnitude of this correlation between EGM numbers and family violence is of great concern, warranting further investigation and with direct implications for planning and public policy.

Family violence and EGMs in the Victorian northern metropolitan region

It is important to consider different measurements of the link between family violence and gambling. In a recent Victorian Commission for Gambling and Liquor Regulation (VCGLR) decision in the City of Whittlesea, there was discussion regarding whether EGM density and its association with family violence is relevant in areas with low EGM density.¹¹ The table and chart below features data analysed by Hayden Brown, Social Research Planning and Policy at City of Greater Dandenong, and shows a very strong, positive correlation between financial losses per adult and police call out rates for the northern metropolitan region in the 2015–16 financial year.¹² More comprehensive population- based research into the coexistence of family violence and gambling harm is needed to gain a complete picture and understand how and what level of gambling increases the frequency and severity of family violence.

⁹ F Markham, B Doran, & M Young. ‘The relationship between electronic gaming machine accessibility and police-recorded domestic violence: A spatio-temporal analysis of 654 postcodes in Victoria, Australia, 2005–2014’, *Social Science & Medicine*, no. 162, 2016, pp106-114.

⁹ F Markham, *ibid*.

¹¹ Victorian Commission for Gambling and Liquor Regulation. *Gaming decision – EGMs – Australian Leisure and Hospitality Group Pty Ltd*. [web page] 2016, <http://www.vcglr.vic.gov.au/utility/about+us/meetings+and+hearings/gaming+decision+-+egms+-+australian+leisure+and+hospitality+group+pty+ltd> (accessed 15 February 2017).

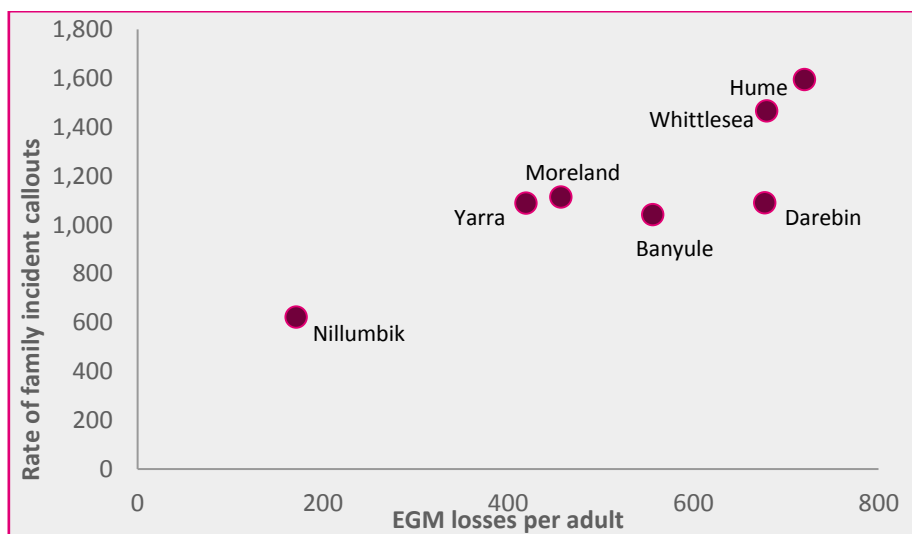
¹² H Brown. Association between EGM losses per adult (\$) and rates of police callouts to family incidents: Selected metropolitan municipalities, 2015-2016. Unpublished data analysis by Social Research Planning and Policy, City of Greater Dandenong, 2016.

Association between EGM Gambling Losses per Adult (\$) and Rates of Police Callouts to Family Incidents: Selected Metropolitan Municipalities, 2015/16

	EGM \$ Losses per adult 2015/16	Rate of family incident callouts 2015/16
Banyule	556	1,043
Darebin	677	1,091
Hume	720	1,596
Moreland	457	1,115
Nillumbik	171	623
Whittlesea	679	1,468
Yarra	419	1,090
Victoria	526	1,310

Correlation coefficient: 0.87

The above correlation coefficient indicates a very strong, positive relationship between EGM gambling losses per adult and rates of police callouts to family incidents.



Conceptual Issues

Family violence and gambling as a public health issue

A public health approach to community wellbeing recognises the importance of prevention, community awareness, education, partnerships, policy, research and targeted advocacy to achieve positive outcomes for women, men and children.

Family violence has long been recognised as a public health issue. Violence between intimate partners¹³ is “responsible for more ill-health and premature death in Victorian women over 18 than any other of the well-known risk factors, including high blood pressure, obesity and smoking”.¹⁴ Anxiety disorders comprise the greatest proportion of this attributable burden (35%), followed by depressive disorders (32%) and suicide and self-inflicted injuries (19%). In 2011, intimate partner violence was responsible for almost half (45%) of the total burden due to homicide and violence amongst young women.¹⁵

The impacts of harmful gambling behaviour on individuals and their families are well documented and include physical and mental ill-health, family breakdown, neglect and abuse of children, family violence, financial ruin, crime and associated incarceration, and in some cases self-harm and suicide.^{16,17}

When gambling co-occurs with family violence, the short and long term health impacts for women and children are potentially magnified and responses to each issue require an understanding of the link between the two. This understanding is important not just in relation to service responses delivered in the community but also for policy makers and planners working in both family violence and the gambling reform areas.

“We have to act on many fronts to prevent violence against women and children. At Moreland we see gambling as one of many social factors that contribute to family violence. While gender inequity is at the heart of this complex problem, we need to tackle other social determinants of health as well. To build a safer community for everybody, Moreland City Council will engage councils and other organisations across our region in coordinated action to reduce the harm from gambling.”

Arden Joseph, Director Social Development, Moreland City Council

¹³ Intimate partner violence is violence between partners or ex-partners. ‘Family violence’ includes intimate partner violence, as well as violence between other family members, such as siblings or adult child to parent.

¹⁴ K Webster, *A preventable burden: Measuring and addressing the prevalence and health impacts of intimate partner violence in Australian women*, (ANROWS Compass, 07/2016). ANROWS, Sydney. https://issuu.com/anrows/docs/bod_horizons?e=15370348/40203970 (accessed 15 February 2017) 2016.

¹⁵ ANROWS. *Examination of the burden of disease of intimate partner violence against women in 2011: Final report*. ANROWS, Sydney. <http://anrows.org.au/publications/horizons/examination-the-burden-disease-intimate-partner-violence-against-women-in-2011>, 2016.

¹⁶ Australian Medical Association. Health effects of problem gambling, 2013, AMA, Canberra. <https://ama.com.au/position-statement/health-effects-problem-gambling-2013> (accessed 15 February 2017), 2013.

¹⁷ R Kalischuk, N Nowatzki, K Cardwell, K Klein & J Solowoniuk, cited in N Dowling, *The impact of gambling problems on families: AGRC discussion paper no. 1 – November 2014* (webpage) 2014, <https://www3.aifs.gov.au/agrc/publications/impact-gambling-problems-families/what-are-impacts-gambling-problems-families> (accessed 14 February 2017).

In recent years there has been a growing understanding of the wider impact of gambling and the environment in which gambling harm occurs. Gambling is now understood to be a public health issue requiring a public health response, rather than an issue of concern only for the people who gamble and their families.^{18,19} The following evidence-based definition of gambling-related harm encapsulates this shift in approach, clearly locating gambling harm as a public health issue:

Gambling-related harm is any initial or exacerbated adverse consequence due to an engagement with gambling that leads to a decrement [reduction] to the health or wellbeing of an individual, family unit, community or population.²⁰

The Victorian research that led to this definition found that low-risk, moderate-risk and problem gambling behaviours all impact on the health and wellbeing of gamblers, and affect others and the community. This research concluded:

Gambling problems are more prevalent than many mental illnesses. For example, problem gambling is more than twice as common as schizophrenia. ... Problem gambling [occurs] at just over half the prevalence of alcohol dependence. Therefore, based on prevalence alone, gambling is an issue of similar magnitude to other health conditions of national importance.²¹

The harms to health that were found in the research include: stress; depression and reduced sleep due to worry; increased use of health-related services; suicidal thoughts; self-harm and the need for emergency treatment.

The report concluded that:

- The overall burden of harm from gambling experienced by Victorians equates to approximately two-thirds the harm caused by major depressive disorders and alcohol misuse and dependency;
- The burden of harm is primarily due to damage to relationships, emotional/psychological distress, health and financial impacts; and
- A majority of the harm from gambling is attributable to 'low-risk' gamblers (50.2%), as compared with 'moderate-risk' gamblers (34.5%) and 'problem gamblers' (15.2%).

Applying a gendered lens to family violence and gambling

A gendered approach to health recognises gender as a critical determinant of health and gender inequality as a key determinant of women's ill health. Gender inequality permeates all aspects of women's social, economic and civic lives, and prevents many women from living with dignity and free from gender-based fear, discrimination and violence. A gender analysis can inform actions to address inequalities arising from

¹⁸ M Browne, E Langham, V Rawat, N Greer, E Li, J Rose, M Rockloff, P Donaldson, H Thorne, B Goodwin, G Bryden & T Best, *Assessing gambling-related harm in Victoria: a public health perspective*. Victorian Responsible Gambling Foundation, Melbourne. 2016.

¹⁹ E Langham, H Thorne, M Browne, P Donaldson, J Rose & M Rockloff, M. 'Understanding gambling related harm: a proposed definition, conceptual framework, and taxonomy of harms', *BMC Public Health*, Vol. 16, no. 80. 2016. <https://bmcpublichealth.biomedcentral.com/articles/10.1186/s12889-016-2747-0> (accessed 15 February 2017)

²⁰ E Langham, *ibid*.

²¹ M Browne et al. *ibid* p. 144.

the different roles of women and men, the unequal power relationships between them, and the consequences of these inequalities on their lives, health and wellbeing.

Applying a gendered lens to health gives voice to women's lived experience, acknowledging the many ways in which women's experiences of the same issue, such as gambling harm are different to men's experiences. As identified previously, violence against women is a violation of human rights and is the greatest contributor to ill-health in women in Australia. To reduce violence against women, we must seek to prevent activities and harms that co-exist with this violence.

A gendered lens raises awareness of the ways in which councils' and other workplaces' policies and programs can affect women's health, both positively and detrimentally. WHIN's 'Gender Analysis Tool'²² assists organisations to look at their policies and plans through a gendered lens, i.e., to consider gender and gender inequalities when analysing data and in program and policy planning and to make sense of the gender implications of their work. The Victorian Government 'gender and diversity lens' for health and human services views a gender lens as a quality improvement resource designed to identify:

- hidden assumptions and values which may sustain inequality and contribute to discrimination
- the possible consequences and impacts of initiatives
- service gaps and research in areas which require further work.²³

In recognition that particular groups of women, such as women with disabilities, migrant women, or low-income women, experience even greater disadvantage, gender analysis processes have expanded to incorporate an intersectional lens. Just as gender-blind policy and practice can discriminate against women and deepen inequality, policy and practice that views all women as a homogenous group can discriminate against groups of women – especially women who face multiple forms of discrimination.²⁴ Gambling, as with all other social issues is not experienced in the same way by all members of society. For example, women in disadvantaged communities will have fewer resources to use when in financial stress or when experiencing violence at home. Aboriginal women and migrant women also experience structural racism and discrimination which impacts on their access to services related to both gambling and family violence. There is also a very high prevalence of problem gambling in Victorian Indigenous communities. Approximately 8.71% of Indigenous people experience problem gambling.²⁵

²² Women's Health In the North. *Gender Analysis Overview* [web page] 2015, http://www.whin.org.au/images/PDFs/Gender_Equity/Gender%20Analysis%20Overview%20August%202016.pdf (accessed 15 February 2017).

²³ Victorian Government, *Gender and diversity lens for health and human services: Victorian women's health and wellbeing strategy: Stage two (2006 – 2010)*. Victorian Government. 2008.

²⁴ Women's Health In the North, *ibid*.

²⁵ S Hare, *Study of Gambling and Health in Victoria*. Victorian Responsible Gambling Foundation and Victorian Department of Justice and Regulation. <https://www.responsiblegambling.vic.gov.au/information-and-resources/research/recent-research/study-of-gambling-and-health-in-victoria> (accessed 15 February 2017) 2015.

The role of local government in responding to family violence and gambling

Local governments across Victoria are strong advocates for gambling policies which improve the health and wellbeing of their communities. As well as developing, promoting and supporting a municipal gambling policy, local governments can bring their knowledge of the harms associated with gambling into their council plans, health and wellbeing plans and other relevant planning documents. Local governments also have an important role in building strong, resilient and connected communities. Collectively, local governments are in a position to advocate for the strengthening and reform of state planning laws related to land use.

The Cities of Monash and Moreland have both shown strong leadership in this area. Monash has “elevated gambling to the highest level of public health prominence. [Gambling] is a leading public health priority in Council’s Health & Wellbeing Partnership Plan 2013 – 2017 and Council Plan 2013 – 2017”.²⁶ Monash Council has recognised gambling as an evidence-based public health issue affecting individuals, families and communities through addiction, significant loss of financial resources, health, social and economic impacts and even suicide.

The City of Moreland is the first northern metropolitan council to acknowledge the link between family violence and gambling in their gambling strategy, noting:

A growing concern is the relationship between family violence and problem gambling. Along with other social determinants of health that contribute to people being vulnerable to gambling harm, multi-pronged interventions and integrated solutions are required.²⁷

Moreland Council has included an action in their strategy to, “enhance understanding of the role of problem gambling among the multiplicity of social determinants impacting on community health and wellbeing, especially those impacting on disadvantaged and culturally diverse communities; and the link between problem gambling and family violence”.

Strategies for local governments

Local governments can address the coexistence between gambling and family violence in their policies and plans by:

- Addressing gambling harm and its link to family violence in council plans, Municipal Public Health and Wellbeing Plans (MPHWP), family violence plans, prevention of violence against women plans, community safety and crime prevention plans, as well as gambling/gaming policies; and by
- Consistently applying a gendered lens to programs, plans, policies, and research which seek to prevent, understand or respond to harm to the community, particularly gambling related harm and harm from violence.

The strategies outlined in this paper are based on the recognition that there is a relationship between family violence and gambling and that there is no minimum number of EGMs in a community that will guarantee

²⁶ City of Monash. *City of Monash Public Health Approach to Gambling: Policy Statement 2016-2020* [web page] 2016, <http://www.monash.vic.gov.au/files/assets/public/about-us/council/organisation/advocacy/monash-public-health-approach-to-gambling-policy-statement-2016-2020.pdf> (accessed 15 February 2017).

²⁷ Moreland Council, *Gambling in Moreland 2015-2012: A Strategy to Reduce Harm from Gambling* [web page] 2015, <http://www.moreland.vic.gov.au/globalassets/key-docs/policy-strategy-plan/gambling-in-moreland-2015--2020.pdf> (accessed 15 February 2017).

no-one will be harmed. The key frameworks that underpin these strategies are *Change the Story: The National Framework to Prevent Violence against women and their Children* and *Assessing Gambling-Related Harm in Victoria: A Public Health Perspective*. The strategies and accompanying actions align with the principles and ideas outlined in these frameworks and provide some approaches that local governments could adopt.

Local governments in Victoria vary greatly in terms of communities, needs, and internal structures and processes, and given that local governments are at different stages in their thinking and actions regarding gambling and family violence, planners may wish to tailor these strategies to their local context. The examples provided are drawn from current Victorian local government plans and policies and are not exhaustive but indicative of the excellent work being carried out in this area across the state.

“Family violence and gambling are both very complex social issues facing local governments today. Harms from gambling and family violence permeate through our communities and are far reaching, affecting women and girls, men and boys right through their lifespan. There are very high rates of family violence in the City of Whittlesea and also very high poker machine losses. Without a doubt, the interaction between gambling and family violence is very concerning to Council and we have developed strategies to confront these issues such as refusing applications to increase poker machines, addressing gender inequalities and advocating for increased access to family violence services locally.”

City of Whittlesea Mayor Ricky Kirkham 2017

1. Strategies to lead, collaborate, advocate and facilitate

Local governments can:

- 1.1 Consider moving away from using the term ‘problem gambling’ within their plans and instead use the term ‘gambling related harm’ and/or ‘harm from gambling’ where possible. This will assist with the promotion of current understandings that low risk and moderate risk gambling also creates harm to individuals, families, communities and society.²⁸ This shift will increase recognition that there are many other types of harm related to gambling experienced by individuals, families and communities in addition to financial harm, and enable them to clearly identify family violence (including violence towards children) as a harm that is related to gambling.
- 1.2 Include actions to support organisations within their Local Government Area (LGA) to promote and research the link between family violence and gambling related harm. The weight given to the link between family violence and gambling at a recent Victorian Commission for Gambling and Liquor Regulation (VCGLR) hearing is indicative of growing awareness of the issue.²⁹ Further research to strengthen this understanding would assist the ability of local governments to advocate regarding this issue.

²⁸ E Langham *ibid*.

²⁹ Victorian Commission for Gambling and Liquor Regulation, *ibid*.

- 1.3 Monitor and collect data on both family violence and gambling harm (including financial losses) and ensure this information is readily accessible to policy makers and planners.
- 1.4 Acknowledge that whilst the latest research suggests that harm occurs across the community, there is still particular harm experienced by those who gamble more. Therefore, councils should consider how to support Gambler's Help services and other measures developed by Victorian Responsible Gambling Foundation (VRGF) within the legislation, such as maximum bets.
- 1.5 Liaise with their regional women's health services to develop questions regarding harm from gambling and its link to family violence for inclusion in local government surveys of community/households/organisations.
- 1.6 Develop policies promoting sponsorship and on council grounds. Local government policy could support health promoting and inclusive sport and recreation environments which reduce harm from alcohol, gambling, social exclusion and gender inequity.
- 1.7 Include a statement in local governments' community grant programs to the effect that council will not provide funding, grants, sponsorship or other resources for activities that promote gambling. Ensure that all relevant council guidelines align with this policy statement.
- 1.8 Partner with local and regional health and wellbeing organisations and services to strengthen their advocacy position:
- 1.9 Avoid holding local government meetings and events in gaming venues. Holding workplace outings in gaming venues can reinforce the 'normalisation' of gambling behaviour and increase employee exposure to and likelihood of experiencing gambling related harm.
- 1.10 Ensure that council sponsored or organised events, such as senior citizen outings do not involve visits to gaming venues.

Example of contemporary language to describe gambling

"Monash Council rejects 'responsible gambling' rhetoric, which seeks to shift the responsibility to the individual. This language deliberately hides the predatory conduct of the gambling industry, state participation in profiting from gambling revenue and the harmful gambling environments which lead individuals to gamble. Council will consciously use public health language in communicating gambling messages. Language including 'responsible gambling' and 'problem gamblers' will not be used by Council due to the notion that the responsibility or problem lies with the individual. 'Problem gambler' is to be replaced with 'People harmed by gambling.' 'Pokie players' is to be replaced with 'poker machine users.' 'Pokie venues' is to be replaced with 'Poker machine operators' or 'Gambling industry' and 'Gambling expenditure' is to be replaced with 'gambling losses' or 'money taken'.³⁰

³⁰ City of Monash, *City of Monash Public Health Approach to Gambling: Policy Statement 2016-2020* [web page] 2016, <http://www.monash.vic.gov.au/files/assets/public/about-us/council/organisation/advocacy/monash-public-health-approach-to-gambling-policy-statement-2016-2020.pdf> (accessed 15 February 2017).

Examples demonstrating council advocacy

OBJECTIVE 4 – Promote conditions that improve the living standards of residents.

	Strategic Actions	Indicators	When	Lead Responsibility
5.4.3	Implement and review the Gambling Policy to reduce gambling-related harm in the community.	Gambling Policy implemented, including responses to gambling applications, advocacy for reform, and supporting for initiatives to reduce gambling problems. Gambling Policy reviewed, updated and endorsed by Council.	Year 1-2	CGD - Community Engagement

Community Wellbeing Plan for the City of Greater Dandenong 2013-2017, p.25.³¹

Advocate for best practice gambling regulation and policy changes that reduce the potential harms to the social, economic, environmental and health outcomes of current and future City of Whittlesea residents.

Number	Action	Council's Role	Activity	Time Line
2.1	Undertake and participate in advocacy efforts to reduce the harm of gambling to the City of Whittlesea community.	Advocate	In collaboration with key community Organisations advocate to other levels of Government for best practice gambling regulation and policy reform that reduces the harms associated with gambling.	Short to Long-term

City of Whittlesea Gambling Strategy, p.49.³²

³¹ City of Greater Dandenong, *Community Wellbeing Plan 2013-2017* [web page] 2013, <http://www.greaterdandenong.com/document/25455/community-wellbeing-plan> (accessed 15 February 2017).

³² City of Whittlesea, *Gambling Strategy and Action Plan 2014 to 2024* [web page] 2014, <https://www.whittlesea.vic.gov.au/about-us/news-publications/plans-strategies-and-policies/gambling-strategy-and-action-plan/> (accessed 15 February 2017).

Examples of Council partnering and advocacy

Local Action	Role
<p>We will:</p> <ol style="list-style-type: none"> 1. Develop a health promotion response to the recommendations of the 2013 <i>Impacts of Problem Gambling Research Project</i>, within budget parameters and subject to external funding. 2. Strengthen the focus and work of the Monash Responsible Gambling Taskforce to have a united response to problem gambling in the Monash community. 	<ul style="list-style-type: none"> ● Facilitate / Lead / Advocate / Partnership ● Facilitate / Lead / Partnership
Regional/State Action	Role
<p>We will:</p> <ol style="list-style-type: none"> 1. Work in partnership with the Eastern Region Gambling Group to prevent harm from gambling and promote alternative social, recreational and entertainment opportunities for our residents. 2. Work in partnership with Inner East Primary Care Partnership (IEPCP) and Gambler's Help East/EACH to contribute to projects that address the social determinants of gambling harm. Gambling projects to be explored in partnership include youth and online gambling, international students and Chinese restaurant shift workers. 3. Continue to take strong leadership in advocating against harm from gambling by considering applications to increase Electronic Gaming Machines (EGMs), promote non-gambling facilities to the community and for Council events. 4. Participate in the Victorian Local Government Working Group on Gambling (LWGOG). 	<ul style="list-style-type: none"> ● Partnership/Advocate ● Partnership/Advocate ● Advocate ● Partnership
<p>Internal</p> <p>This will be achieved through implementation of the Council Plan 2013 – 2017, Responsible Gambling Strategy 2012 – 2015 and Youth Plan 2013 – 2016.</p>	
<p>External</p> <p>Inner East Primary Care Partnership and Problem Gambling Program Plan.</p>	

Strategic Objectives

Future Direction 5: Health and Wellbeing

Strategic Objective	Council Goal	Indicators	Council Role	2013 - 2014 Actions	2014 - 2015 Actions	2015 - 2016 Actions	2016 - 2017 Actions
We take a prevention approach to health issues and health policy	H 5.16 Council will work in partnership with community and service providers to reduce and minimise the negative social, economic and health impacts of gambling	Monitor influence on local communities through - Victorian Commission for Gambling and Liquor Regulation (VCGLR) electronic gaming machines expenditure data - Ballarat University Survey	Facilitator Advocate	Review and develop the City of Whittlesea Responsible Gambling Strategy Work in partnership with community, service providers and venue operators to reduce and minimise the negative social and, economic impacts of electronic gaming machine gambling on the community	Implement the Responsible Gambling Strategy action plan in partnership with key stakeholders Continue to work with other councils across Victoria to advocate for responsible gambling through the Victorian Local Government Association's Local Government Working Group on Gambling	Council to advocate for policy and regulatory changes that reduces harm from gambling in the community	

City of Whittlesea Council Plan 2013-2017: Shaping our future³⁴ p.49

Strategies to inform and engage

Local governments can:

- 2.1 Work to improve community and stakeholder understanding and awareness of gambling related harm, family violence and attitudes to gender equity.
- 2.2 Develop a public position statement about the current research on the link between family violence and gambling harm, (including local statistics) and the impact that this has on the health and wellbeing of the community, particularly women and children.
- 2.3 Apply a 'gender analysis' to programs, plans and policies to ensure that they consider women's and men's different experiences of gambling harm.
- 2.4 Collaborate with local community organisations, women's health services and community health organisations to capture sex disaggregated data regarding gambling and family violence to inform health and well-being plans and other relevant plans and policies.
- 2.5 Provide decision makers, policy staff and the community with current local information about gambling related harm and local family violence statistics.
- 2.6 Work with the community to provide safe recreational alternatives to gaming venues for women.

Example of information about the link in council policy

A growing concern is the relationship between family violence and problem gambling. Along with other social determinants of health that contribute to people being vulnerable to gambling harm, multi-pronged interventions and integrated solutions are required.³⁵ The example show below shows local information by the City of Moreland.

³⁴ City of Whittlesea. *Council Plan 2013-2017: Shaping our Future*. [web page] 2013, <https://www.whittlesea.vic.gov.au/about-us/news-publications/plans-strategies-and-policies/council-plan-shaping-our-future/> (accessed 15 February 2017).

³⁵ Moreland Council, *Gambling in Moreland*, *ibid*.

2.2 Resilience to Harm from Gambling

Evidence

- Monash has 950 Electronic Gaming Machines (EGMs).³⁶ The City of Monash ranks second to the City of Greater Geelong for having the greatest number of EGMs of any municipal area in Victoria.³⁷
- In 2012, expenditure within Monash on EGMs totalled \$122 million. Monash ranks third highest in Victoria for EGMs expenditure loss.³⁸ Research suggests that high EGM expenditure may be linked to problem gambling.³⁹
- Approximately 70% of Monash EGM expenditure is gambled in suburbs with higher concentrations of people from lower socio-economic backgrounds.⁴⁰
- Over the last few years, there has been an emergence of online gaming applications directed at children and youth that simulate gambling; designed to 'groom' a new generation into gambling.⁴¹

Impact

- Harms from gambling can include negative impacts on personal, family life and employment, financial burden and poor mental health.⁴² 2013 Monash research, *Impacts of Problem Gambling in the City of Monash* found that suburbs within Monash, which experience significant EGMs-related gambling harm are Clayton, Ashwood and Chadstone. Many residents from these suburbs reported wide-ranging impacts from gambling including housing loss, job loss, financial stresses, mental health issues, loss of superannuation, relationship breakdowns, domestic violence, poor food security (especially for children) and embezzlement crimes.⁴³
- The 2013 *Impacts of Problem Gambling in the City of Monash* also found that groups most at-risk from gambling in Monash are: residents from Asian backgrounds (particularly young people), international students, people from low socio-economic backgrounds, older people experiencing social isolation, restaurant workers, people with mental health issues, people with other addictions (drug and alcohol), trade and manual labour workers and young males in football and cricket clubs.⁴⁴
- This research also found a need to increase multicultural services in Monash and build the capacity of community organisations to recognise gambling harm. Due to the stigma associated with gambling harm, people often present to welfare services with 'a more acceptable reason' due to shame about disclosing gambling harm.
- Young people are exposed to advertising and access to gambling even though they are not of legal age. There are fewer controls and restrictions to online gambling, which can make it easier for young people to gamble online, even though they are not of legal age.⁴⁵

City of Monash Health and Wellbeing Partnership Plan 2013-2017, p. 23

Council will be a highly effective leader in working towards reducing the harm to public health caused by gambling.

1.5	In line with the City of Whittlesea Gender Equity Strategy, a gender lens is applied to information disseminated.	Provider and facilitator	Adopt a 'gender analysis' approach to ensure that education and information disseminated consider both womens' and mens' understanding and relationship with gambling.	Short to Medium-term
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City of Whittlesea Gambling Strategy and Action Plan, p.48.³⁶

3. Strategies for Planning

Local governments can:

- 3.1 Audit all council plans to identify where the intersection of gambling harm and family violence might be addressed.
- 3.2 Advise land use planning staff, in their considerations of social and economic effects of the use or development, examine the impacts of gambling and family violence when appropriate when making planning decisions.
- 3.3 Ensure that available statistics regarding the link between family violence and harm from gambling are articulated in any submissions to the VCGLR.
- 3.4 Acknowledge and refer to council's plans that include gender equity, safety and health and well-being as well as the prevention of violence against women and their children when considering the development of actions, policies or plans responding to gambling related harm.

Conclusion

In conclusion, local government has a strong role to play in recognising and responding to the co-existence of family violence and gambling as a public health issue. This can include adopting evidence-based strategies to address gambling related harm and violence against women. It is also important that local government keeps abreast of new and emerging evidence and research to inform their strategic approaches to this issue.

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³⁶ City of Whittlesea, Gambling Strategy, *ibid*.



**WOMEN'S HEALTH
IN THE NORTH**

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