

Understanding the gambling related harms

for the adult population who gamble at at-risk levels in Walsall

Who is most likely to participate in gambling?

Nationally the evidence tells us that people with high educational attainment, higher life satisfaction, better mental health, are in employment and living in the least deprived areas, tend to participate most in gambling¹.

However, at risk gambling, including experiencing the harms of gambling, are most associated with men aged 18-30 who:

- are unemployed or economically deprived
- have lower life satisfaction
- have poorer health and wellbeing
- live in areas of deprivation^{1, 2}

This means gambling related harms widen inequalities.

Framing and language

This summary intends to take a compassionate approach towards people who gamble and/or gamble at at-risk levels leading to harms.

It is important to note that gambling does not occur in isolation or purely due to individual susceptibility, but rather, within the context of multi-billion-pound industries that have developed and continue to promote harmful gambling products.

Gambling at a level that is harmful is often framed as being an individual's choice, and that they should simply 'stop when the fun stops'. This narrative created by the industry downplays the role industry has.



Walsall Council

Gambling related harms

Gambling harm is most often hidden, and individuals experiencing harms rarely present to health or social care services with problem gambling as their presenting condition. This means that its occurrence will be under-estimated.

People are affected by gambling harm even at lower levels of risk, such as PGSI 0 or 1, as gambling at any level poses the risk of harm³.

Harms include health, both mental and physical, and the wider factors that are essential to health, including the breakdown of relationships, finances/debt, housing, employment, and education.

A person who gambles at levels that pose risk are:

- **19.3 times** more likely to die by suicide compared to the general population if 20-49 years, and 9.6 times more likely to die by suicide if 50-74 years old.
- **8.7 times** more likely to access homelessness services.
- **8.5 times** more likely to be accessing mental health services.
- **5.5 times** more likely to have been a hospital inpatient within the last 3 months.
- **4.4 times** more likely to be in prison.
- **2.7 times** more likely to have visited their GP in the last 12 months with a mental health issue.
- **2.7 times** more likely to be claiming Jobseeker's Allowance.
- **2.2 times** more likely to be alcohol dependent^{4, 5, 6}.

The number of gambling products someone participates in, the product, the amount spent in relation to income, and the frequency of participation, can all increase the risk of harm.

Public Health England (now known as The Office for Health Improvement and Disparities), estimated that the annual economic burden of harmful gambling is approximately £1.27 billion, yet gambling is still not always seen as an issue to address⁷.

Definitions

Commercial gambling

The commercial provision of gambling by companies and entities established to provide these products at scale for profit¹¹.

Gambling is widely understood as the act of risking money or items of value in an activity of uncertain outcome in the hopes of winning a prize. It can either take place remotely (online) or non-remotely (on gambling premises)¹⁰.

Gambling related harms are any initial or exacerbated adverse consequence due to an engagement with gambling that leads to a decrement to the health or wellbeing of an individual, family unit, community, or population¹¹.

Problem Gambling Severity Index (PGSI)/At-risk gambling

At risk gambling is gambling which may cause harm. The Problem Gambling Severity Index (PGSI) is a standardised assessment tool which aims to identify those at risk of gambling harms, or who may have an addiction¹². Scores of; 0 implies no risk, 1-3 are considered low risk, 4-7 are considered moderate risk 8 and above are considered to be severe risk/problematic severity.

References

1. Gambling-related harms evidence review: quantitative analysis of gambling involvement and gambling-related harms among the general population in England (publishing.service.gov.uk) Public Health England. Quantitative analysis of gambling involvement and gambling-related harms among the general population in England [Internet]. 2021.
2. Bristow LA, Afifi TO, Salmon S, Katz LY. Risky Gambling Behaviors: Associations with Mental Health and a History of Adverse Childhood Experiences (ACEs). *J Gambl Stud.* 2022 Sep 1;38(3):699–716.
3. Prevalence of gambling-related harm provides evidence for the prevention paradox - PMC (nih.gov)
4. Dowling, N · Suomi, A · Jackson, A · et al. Problem gambling and intimate partner violence: a systematic review and meta-analysis *Trauma Violence Abuse.* 2016; 17:43-61
5. Andreeva, M · Audette-Chapdelaine, S · Brodeur, M Gambling-related completed suicides: a scoping review *Addict Res Theory.* 2022; 30:391-402
6. Gray, HM · Edson, TC · Nelson, SE · et al. Association between gambling and self-harm: a scoping review *Addict Res Theory.* 2021; 29:183-195
7. Gambling-related harms evidence review, PHE (2021).
8. Gambling-related harms evidence review: summary - GOV.UK (www.gov.uk). Constituency Data
9. Public Health England. Gambling related harms evidence review 2021. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1020883/Gambling_evidence_review_quantitative_report.pdf.
10. Definitions of terms (gamblingcommission.gov.uk).
11. The Lancet Public Health Commission on gambling
12. Statistics on gambling participation – Year 2 (2024), wave 1: Official statistics (gamblingcommission.gov.uk)

Key local insights in the borough

1 in 4 adults in the past 4 weeks have participated in gambling

Excluding the lottery, approx. 58,000 adults in Walsall have participated in gambling in the past 4 weeks – this is 26% of the adult population, 1 in 4 adults.

However, certain groups have a higher level of participation than seen nationally, such as men, and 18-24s, 45-54 and 64+ age groups.

Gambling widens inequalities

The amount of people who gamble is highest in the adult population living in areas of deprivation, and slightly lower in less deprived areas.

This means that inequalities in relation to gambling harm are worse in Walsall than nationally, as the harms of gambling impact the most socio-economically deprived communities the greatest.

Nearly 1 in 4 (23%) who have gambled in the past 4 weeks have a moderate to high risk of experiencing gambling related harms

Walsall scores high on the gambling problem severity index (PGSI) across all levels of gambling participation⁸. In 2022, the annual estimated cost in Walsall of gambling harms was £6.6m⁸.

In the past 4 weeks, 13,200 adults in Walsall have had a moderate to high risk of experiencing gambling related harms – This is 23% of the adults who have gambled, and 6% of the overall adult population. However, some estimates show that in our most deprived areas, this could be as high as 1 in 10 people (9.9%).

In our most deprived communities, it is estimated that 23.2% of people who have a PGSI score of 1+ would like treatment, support or advice⁸. This increases to over 70% for people who have a score of 8+⁸.

There is a high proportion of 18-24 and 45-54 year olds that have a risk of experiencing gambling harm. If we do not work to reduce gambling related harms and gambling participation, over the years ahead, Walsall could see an even larger proportion of adults experiencing harm into later life.

On average, 6-10 people in addition to the person suffering from gambling harms will also experience harms⁹

This could mean that:

- At its lowest estimation, this could be 28% of people in the borough
- At its highest estimate, this could be up to 46% of people in the borough.

Many of these will be children.

There is lots we can do as a local authority to reduce gambling harms

In the borough there are 39 commercial gambling premises. These are mostly in areas of deprivation.

We also know that adults in Walsall are choosing to gamble both in person and online, and participation in in-person gambling is higher than nationally across most age ranges. This demonstrates the role that the local authority can play in reducing gambling related harms.