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Preventing and Minimising Gambling Harm Submission
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Tēnā koe Derek i nga ahuatanga o te wa

Te Pūtahitanga o te Waipounamu is writing in response to the draft document, Preventing and Minimising Gambling Harm 2016/17 to 2018/19.

Te Pūtahitanga o Te Waipounamu is a limited partnership, supported by the nine iwi of Te Waipounamu through a Shareholders Council known as Te Taumata. Te Pūtahitanga o Te Waipounamu was launched in July 2014 as the South Island Commissioning Agency for Whānau Ora.

The view from Nga Iwi o Te Waipounamu is that Te Pūtahitanga will develop innovative means for contributing to whānau oranga through whānau rangatiratanga (self-determination).

Whānau Ora is an inclusive approach to support whānau to work together as whānau, rather than separately with individual family members. The Taskforce on Whānau Centred Initiatives (2010) identified six goals that suggest outcomes will be met when whānau are:

- Self-managing;
- Living healthy lifestyles;
- Participating fully in society;
- Confidently participating in Te Ao Māori;
- Economically secure and successfully involved in wealth creation; and
- Cohesive, resilient and nurturing.

Accordingly, Te Pūtahitanga considers that Whānau Ora is an ideal means for confronting problem gambling. Like any addiction, gambling has the potential to destroy a whānau because any person with an addiction affects everyone else in the whānau.

When we refer to whānau in the context of problem gambling it encompasses the person who has an issue with gambling, or family members who attempt to manage the situation through perhaps managing the finances, or caring for those who may be vulnerable such as children and mokopuna (p16).

The recognition of the damage caused at the whānau level is the basis by which Te Pūtahitanga seeks to engage in the policy development process to prevent and minimize gambling harm. We are also mindful of the concept of intergenerational harm, wherein patterns of destructive behaviour are passed on from one generation to the next.

Whānau Ora causes us to look critically at learned behaviours and to consider whether they are appropriate to follow, and if not, what changes need to occur. This is not just a matter of reducing individual or whānau expenditure on gambling but also to reduce expenditure on gambling through maintaining a 'sinking lid' on gambling machines in our communities.

The link between gambling and lower health outcomes is clearly concerning and warrants increased investment in addressing the causes.

Maori have higher levels of gambling and negative impacts

The reality, as articulated in the draft document, is that Māori are more likely to suffer gambling harm, whether as a result of their own or someone else's gambling than other population groups, and this situation has changed very little over the years. In the 2011/12 New Zealand Health Survey Maori and Pasifika people were estimated to be approximately three times more likely than European to be categorized as moderate risk problem gamblers (p61-62).

Maori males are two times more likely and Maori females 2.5 times more likely to have experienced problems due to someone's gambling in the previous year than females in the total population.

We are also concerned that the ripple effect of gambling beyond gamblers will create future harm for subsequent generations.

In light of this data we are disappointed that the consultation draft, in reference to the draft service plan, notes that funding for the Health Promotion Association will be maintained at current levels for Maori and Pasifika peoples.

One would have thought, given that the Gambling Act 2003 states that the strategy must include services to treat and assist problem gamblers and their families/whānau, that an investment approach might have applied to fund services that prevent and minimize gambling harm for priority populations.

If HPA would like all New Zealanders to experience less gambling related harm there needs to be increased information and free face to face support for people affected by their own or someone else's gambling, and that includes for Maori.

We were heartened that the consultation document identified that inequities between Maori and non-Maori are a particular challenge for New Zealand; and also reinforced that "*there is clear evidence that some population groups (Maori and Pacific peoples in particular) are significantly more likely to experience gambling harm* (p5). This evidence has obviously influenced Objective 1 and 2 of the 11 measurable objectives in the Outcomes Framework, which we support.

Given all of this context we can not understand why the focus is on the continued provision of dedicated Maori, Pacific and Asian services, instead of a bolder approach to increase the investment in such services.

Research and Evaluation

We are very impressed with the range of research and evaluation studies, including:

- A kaupapa Maori student on the impact of gambling on Maori gamblers and whanau
- An investigation into Maori input into decision-making on gambling;
- The effectiveness of a sinking lid policy for addressing problem gambling and the health and wellbeing of Maori gamblers and whanau
- An evaluation of a financial literacy and budgeting programme for problem gambling in Maori and Pacific people and their whanau.

The obvious issue for Te Pūtahitanga is to understand what might the results of these studies look like in public promotion and communication strategies? Are there stories that can be shared in social media format?

Younger Generations at Risk

From 1 July 2015 State funded employers of people who work with children must make sure anyone starting a new job where they work alone with children or have prime responsibility over the children they're caring for, is safety checked to the new regulatory standard before they start the job. The new Vulnerable Children (Requirements for Safety Checking of Children's Workers) Regulations 2015 spell out what State funded employers must do from now on to ensure employees are safe to work with children. While the impact of the Act was alluded to in the draft, we think greater specificity should demonstrate how the act will apply in practice (p25).

The draft is limited in its capacity to represent the issues for rangatahi. There was no breakdown of figures for youth by ethnicity – such a connection would be helpful (p62).

Cultural competency

We welcome the statement from the Ministry that expects *“all services to be culturally safe and culturally competent”* and are interested in the compliance methods that may be taken up to ensure this expectation is realized.

Intervention Service Data

In light of the fact that since 2004/5 Maori have ranged between 26.9% and 36% we think that more provision should be established for Maori specific services. As a Whānau Ora commissioning agency we emphasize that problem gambling harm can and does extend beyond gamblers to encompass their whānau and we would recommend that particular reference be made to whānau centred services.

Areas for further exploration

Territorial authorities seem to be the key mechanism for engagement over places of gambling but have limited powers (p65). How can concerned communities engage over gambling issues?

What are the strategies to deal with increased technological access to gambling facilities? (p15). We are particularly interested in the initiative to create a smartphone application for preventing and minimizing gambling harm which we would recommend as being appropriate to promote on tribal websites (p26).

The statement on p56 about the use of non-casino gambling post-earthquake is a concern, noting that spending increased after the earthquake despite the numbers of functioning machines and venues dropping substantially (p56).

Heoi ano



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