RURAL CITY OF WANGARATTA
Gambling Policy and Action Plan
Background Report

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Rural City of Wangaratta
Gambling Policy and Action Plan Background Report

Author:

Bonnie Rosen,
Principal, Symplan
Suite 1301
9 Yarra Street
South Yarra
Vic 3141

Tel: (03) 9523 7538
Mobile: 0419 574 481
Email: brosen@symplan.com.au
www.symplan.com.au

Symplan respectfully acknowledges the Traditional Owners and Custodians of the land, the Boon Wurrung peoples of the Kulin Nation and pays respect to their Elders, past, present and emerging.

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Acronyms

ABS	Australian Bureau of Statistics
ALH	Australian Leisure and Hospitality
CAA	Central Activities Area
CBS	Community Benefit Statement
CCV	Community Clubs Victoria
CSF	Community support fund
EGM	Electronic gaming machine
GIA	Gender Impact Assessment
LGWGOG	Local Government Working Group on Gambling
MAV	Municipal Association of Victoria
MPS	Municipal Planning Strategy
SEIFA	Socio-economic Index for Areas
U3A	University of the Third Age
VGCCC	Victorian Gambling and Casino Control Commission
VLGA	Victorian Local Governance Association
VRGF	Victorian Responsible Gambling Foundation

Glossary

Advocacy	Public support for or recommendation of a particular cause or policy.
Cluster of gaming venues	Three gaming venues, including the proposal site, located within a radius of 400m[1]
Community	Refers to the people who have a stake and interest in Manningham, including: • Those who live, work, PLAY, study, conduct business or provide services in the municipality. • Those involved in local community groups or organisations. • Those who visit, use or enjoy the services, facilities and public places located within the municipality. • Those who share an interest, a sense of identity or a shared common goal.
Council	Manningham Council
Council-owned land	Land owned by Council, including vacant land, discontinued roads, and any building and development thereon.
Electronic gaming machine	An electronic gaming machine is a computerised gambling device that has a video screen displaying symbols on simulated reels. Cash is inserted into the machine and buttons are used to place bets. The machine randomly determines the position of symbols on the screen. Wins are returned as credits back into the machine. They are also referred to as EGMs, pokies, pokie machines.[2]
Equity	Equity means that available information, spaces, services and programs should deliver outcomes that are equal for all. This requires that services are able to consider and respond to the intersecting forms of disadvantage and discrimination to truly cater to all diverse needs.
Expenditure	The amount lost by people who gamble.
Gambling	Gambling/betting requires a player to risk losing something of value (usually money) for the chance of winning more. Gambling outcomes may depend on correctly predicting an uncertain outcome (such as a particular horse coming first in a race), or luck (such as a winning combination of symbols on a pokie machine).[3] It involves spending real money on electronic gaming machines (EGMS, also known as poker machines and pokies), race betting, sports betting, instant scratch tickets/lotteries, keno, bingo, poker, other casino games (blackjack, roulette, craps, etc.), esports betting, fantasy sports betting, and informal private betting, as well as betting with skins.[4]

[1] Francis Hotel Pty Ltd v Melbourne CC (includes Summary) (Red Dot) [2012] VCAT 1896 (12 December 2012)
[2] VRGF
[3] VRGF
[4] Hing, N et al (2022) *NSW Youth Gambling Study 2022: Qualitative Research* NSW Government

Gambling-related harm	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 population.[5] These harms include relationship breakdown, compromised mental and physical health and wellbeing, financial losses, demand for services, lost work productivity and crime. Gambling related harm can be divided into seven key areas: Financial harm, relationship disruption, emotional or psychological distress, decrements to health, cultural harm, reduced work or study performance and criminal activity. These harms can further be considered as general harms (which occur at any time), crisis harms, which are associated with attempts to seek help, and legacy harms, which occur long after gambling has ceased.[6]
Gaming venue	A gaming venue is classified as a 'gaming premises' under the Wangaratta Planning Scheme. The definition of a 'gaming premises' is 'land used for gambling by gaming, and where there is the ability to receive a monetary reward'. The *Gambling Regulation Act 2003* permits the use of EGMs in venues with a pub licence (hotel operating under a General Liquor Licence), club licence (operating under a Full Club Liquor Licence) and racing club licence (Full Club Liquor Licence). The definition of a club under the *Gambling Regulation Act 2003* is a 'club, society or other association of persons by whatever name called and whether incorporated or unincorporated'. There is no definition of a hotel or racing club under the Gambling Regulation Act 2003. Some clubs operating EGMs in Victoria provide sporting activities such as golf, tennis or bowls.
Gender impact assessment	A process of critically thinking about how policies, programs and services will meet the different needs of women, men and gender diverse people. The aim of a gender impact assessment is to create better and fairer outcomes and ensure all people have equal access to opportunities and resources.
Wangaratta	The municipality of the Rural City of Wangaratta.
Partnership	A relationship between Council and stakeholders, and between stakeholders themselves that involves shared responsibilities for implementing a range of actions that seek to achieve a common goal such as upholding the community's health and wellbeing.
Policy	Sets out Council's views with respect to a particular matter. It includes a set of principles or rules that provide a definite direction for the organisation.

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

Public Health Approach	A public health approach involves utilising scientific knowledge, evidence-based strategies, and community-based interventions to improve the health and well-being of populations by focusing on prevention, health promotion, and addressing the underlying determinants of health.
Stakeholder	An individual or group identified with a strong interest in a particular topic in regard to the decision-making of the Council and are directly affected by the outcome of any decisions.
Vulnerable groups	Groups within the community at an elevated risk of gambling-related harms as a result of their age, socio-economic status, gender, cultural and linguistic background or exposure to opportunities to gamble.

Executive summary

Introduction

Wangaratta City Council has identified the need for a framework which will guide it in protecting the community from gambling-related harm.

SymPlan was engaged to prepare a Background Report which will provide the evidence base supporting the preparation of this framework which will consist of a social policy and a planning policy to be incorporated into the Wangaratta planning scheme.

Context

Gambling

Gambling is a legal form of entertainment which is a part of Australian culture.

In the last ten years there has been an emergence of 'technology-based' forms of gambling due to the proliferation of internet access and mobile internet devices, such as smartphones. The most noticeable change in internet gambling has occurred for sports betting with the proportion of Australian adults gambling online increasing from 12.6 per cent of all those wagering[7] in 2020-11 to almost 31 per cent in 2019.[8] The restrictions caused by the COVID-19 Pandemic[9] significantly increased the proportion of sports bettors who gamble online. This is of concern given online gambling is difficult to regulate, widely available and accessible with a mobile device, widely promoted and covers a wide range of sports. These factors make this form of gambling particularly appealing to younger people.

Australia has 76 per cent of the world's non-casino EGMs which are located in hotels and clubs.[10] It is estimated Australians spent approximately $15 billion on legal forms of gambling in 2018-19, representing the largest per capita losses in the world.[11] This amounts to a per capita gambling loss of $1,200.[12]

Wangaratta currently has four gaming venues, two of which are hotels and two of which are clubs. All the gaming venues are located in the urban area of Wangaratta. There are currently 154 attached EGM entitlements in the municipality. The municipality is currently 69 EGMs below the municipal cap of 223 EGMs.

In the Financial Year 2022-23 expenditure on EGMs in Wangaratta was $10.8 million. In this Financial Year, compared to regional municipalities:

- higher density of EGMs per 1,000 adults and higher expenditure per attached EGM entitlement
- lower net EGM expenditure, EGM expenditure per adult and more adults per venue.

Following a reduction in EGM expenditure due to the COVID-19 Pandemic lockdown,[13] EGM expenditure in the Financial Year 2022-23 in the municipality was the highest it has been in a decade.

Between the 2018-19 and 2022-23 Financial Years, EGM expenditure in Wangaratta increased by 22.5 per cent which is higher than the average for country municipalities (16.1 per cent) and Victoria.

[7] Betting on races, sports or novelty outcomes like who will win a reality TV show.
[8] Brett Hetherington and Tony Phillips 2023, *Discussion paper: Gambling harm and the online gambling environment*, Victorian Responsible Gambling Foundation, Melbourne
[9] Brett Hetherington and Tony Phillips 2023, *Discussion paper: Gambling harm and the online gambling environment*, Victorian Responsible Gambling Foundation, Melbourne
[10] Alliance For Gambling Reform – Position Paper *A mandatory Registered Cashless Gambling Card System to Address gambling harm and criminal gaming activity* January 2023
[11] Australian Institute of Health and Welfare 2021 *Gambling in Australia*
[12] Global Local: Gambling (lgiu.org)
[13] Gambling venues across Victoria were closed between 16 March 2020 and 8 November 2020 to slow the spread of coronavirus

In the 2022-23 Financial Year the Pinsent Hotel had both the highest expenditure and the highest expenditure per attached EGM entitlement.

Gambling is recognised as a significant, global public health concern.[14] All forms of gambling have the potential to affect the health and wellbeing of individuals and families. Gambling-related harm involves more than losing money or experiencing financial problems. It can also include:[15]

- health problems including emotional, psychological distress or physical issues
- issues with relationships with family or friends
- problems with work or study
- cultural problems
- criminal activity.

It is becoming increasingly recognised that gambling-related harms have direct impacts on the person who gambles and indirect impacts on others including their families, friends and the wider community. EGMs are recognised as posing the greatest risks to existing and potential problem gamblers[16]

Community and health profile

The municipality has a higher level of socio-economic disadvantage than Victoria. The most disadvantaged areas in the municipality are Wangaratta and Wangaratta (South).

Wangaratta compares unfavourably with Victoria with regards several health and wellbeing indicators. The municipality has a high rate of family incidents and recorded criminal incidents per 100,000 people relative to the Eastern Region of Victoria and Victoria. These rates have increased in the past five years.

Regulatory and strategic framework

Regulatory framework

As the closest tier of government to the community, Council plays a significant statutory role in creating environments which establish and maintain healthy lifestyle behaviours and prevent harm from gambling. This statutory role is fulfilled in collaboration with other agencies such as peak bodies, service providers, advocacy groups and the industry. It is defined by several legislative instruments including the *Planning and Environment Act 1987, Gambling Regulation Act 2003, Local Government Act 2020, Public Health and Wellbeing Act 2008* and *Gender Equality Act 2020.*

The *Gambling Regulation Act 2003* contains several statutory harm minimisation measures which are applicable to the design and operation of all hotel and club gaming venues in Victoria.

Strategic framework

Goal 2.4.6 under Strategic Priority 2.4 *Healthy behaviours and lifestyles* is to reduce the rates of gambling amongst the community. Specific actions under this goal are:

> 2.4.6.1 Develop a Gaming Policy to guide decisions relating to gaming and gambling within our community.
>
> 2.4.6.2 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.

[14] Global Local: Gambling (lgiu.org)
[15] Gambling | Department of Social Services, Australian Government (dss.gov.au)
[16] Australian Government Productivity Commission (2010) *Productivity Community Inquiry Report, Gambling* p5.22

2.4.6.3 Partner with local services, community leaders and community and business organisations to inform the community about the health risks of gambling.

The Wangaratta Planning Scheme contains several provisions which are relevant to the location and operation of electronic gaming machines in the municipality. There is the opportunity to strengthen these provisions through amendments to the Municipal Planning Strategy and schedule to Clause 52.28 Gaming.

Conclusion and next steps

Conclusion

The research has found existing and emerging gambling behaviours, including online gambling and the use of EGMs, have the potential to result in gambling-related harms, particularly among groups at an elevated risk of gambling-related harms.

Council has statutory responsibilities to protect the community from harm caused by gambling. Its key influence on gambling within the municipality is on managing the location and operation of EGMs through its planning and regulatory roles. Council also has the capacity to protect the community from gambling related harms through other roles including advocating to the government to reduce the risks associated with gambling, collaborating with stakeholders to increase access to support services and building the community's capacity to engage in healthy lifestyle choices.

A strong, evidence based gambling policy and action plan, which is underpinned by a balanced policy position and comprehensive suite of objectives, strategies and actions can guide Council in fulfilling these statutory roles. This policy position can also guide Council's relationship with the gambling industry, and how it manages gambling activities and advertising on land it owns and/or manages.

Next steps

It is recommended Council commence drafting the new *Gambling Policy and Action Plan*, in collaboration with the stakeholders.

1 Introduction

1.1 Background and scope of tasks

In the Council Plan 2021-2025 (incorporating the Municipal Public Health and Wellbeing Plan) Wangaratta City Council has committed to preparing the necessary suite of documents which will guide it in fulfilling all its statutory obligations in relation gambling activities in the municipality.

SymPlan has been engaged to prepare a Background Report which will provide the evidence supporting the review of the preparation of these documents. The scope of the evidence covers all forms of gambling, including gambling on electronic gaming machines (EGMs).

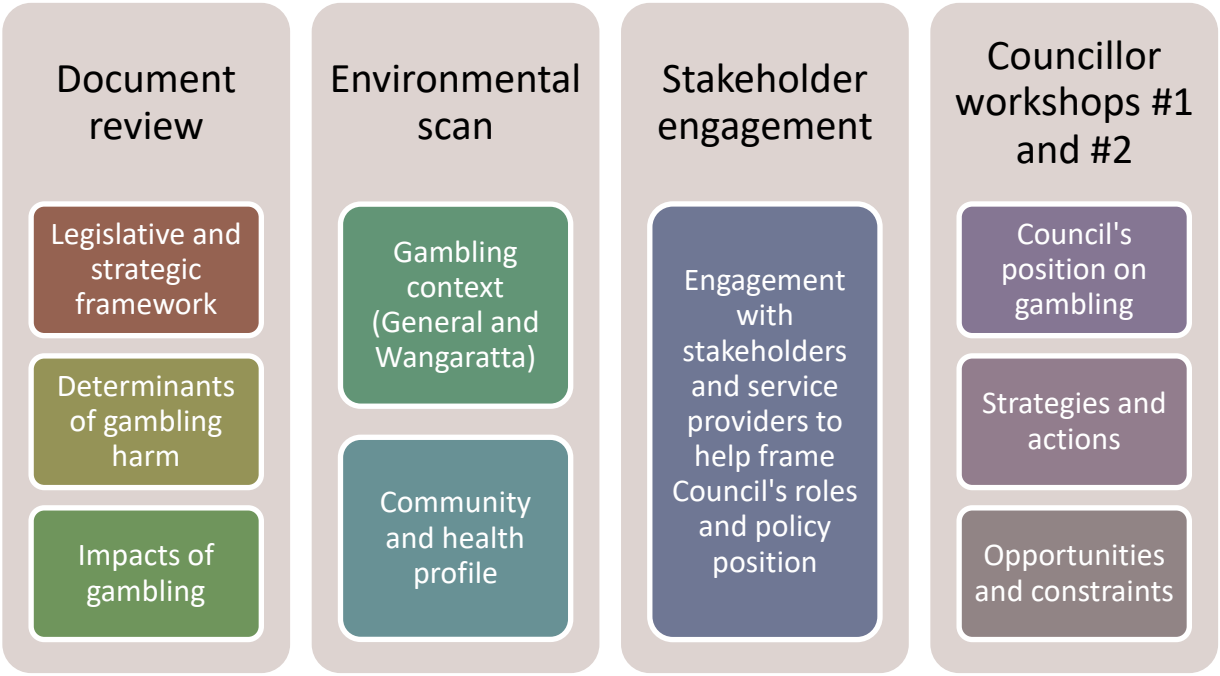
The Background Report covers the following:

- Description of the legislative and policy environment.
- Description of the current gambling context, both in general and within the Rural City of Wangaratta.
- Identification of local government's potential roles.
- Identification of key stakeholders
- Principles that can inform the development of the necessary policies and action plans.

1.2 Methodology

The preparation of the Background Report involved the following (refer to Figure 1):

Figure 1 - Methodology



2 Rural City of Wangaratta Context

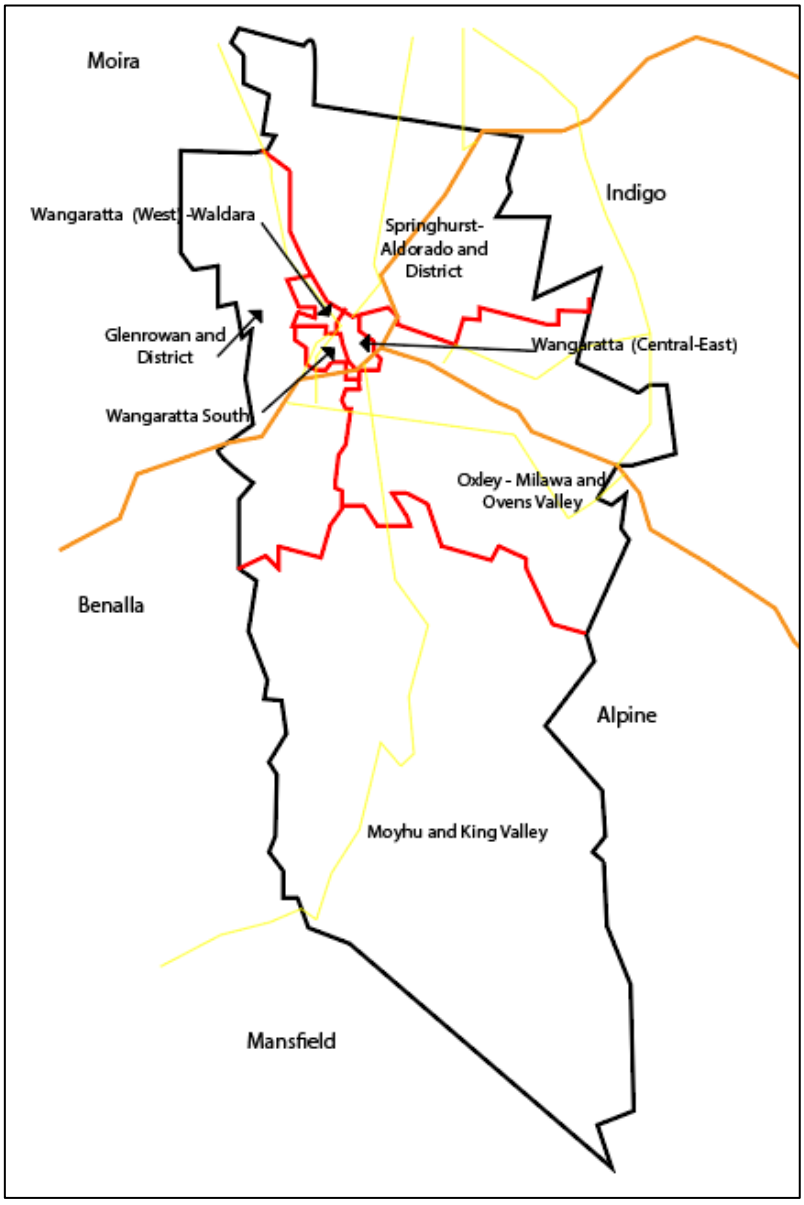
2.1 Strategic location

The Rural City of Wangaratta is located at the confluence of the Ovens and King Rivers in north-eastern Victoria, about 235 kilometres north-east of the Melbourne CBD.

The municipality is bound by Mansfield Shire to the south, Alpine Shire to the east, Indigo Shire to the north, Moira Shire to the north-west and Benalla Rural City to the west. It is located on the Hume transport corridor (Hume Freeway and Melbourne-Sydney rail link) and has a regional airport. This provides the municipality with good access to both capital and regional cities.

Localities in the municipality include Glenrowan and District, Moyhu and King Valley, Oxley-Milawa and Ovens Valley, Springhurst – Eldorado and District, Wangaratta Central-East, Wangaratta South, Wangaratta West – Waldara and Wangaratta (Refer to Figure 2).

Figure 2 – Strategic location



Source: SymPlan and .id consulting

The municipality has been identified in the Hume Regional Growth Plan as a 'Regional City', with most of its growth being directed to the North West and South Growth Areas.[17]

The Wangaratta Central Activities Area (CAA) is the municipality's principal activity centre which serves both the local community and a larger regional catchment extending into southern New South Wales.[18] Due to its location and facilities in the CAA's cultural centre, the municipality is a significant tourism destination.

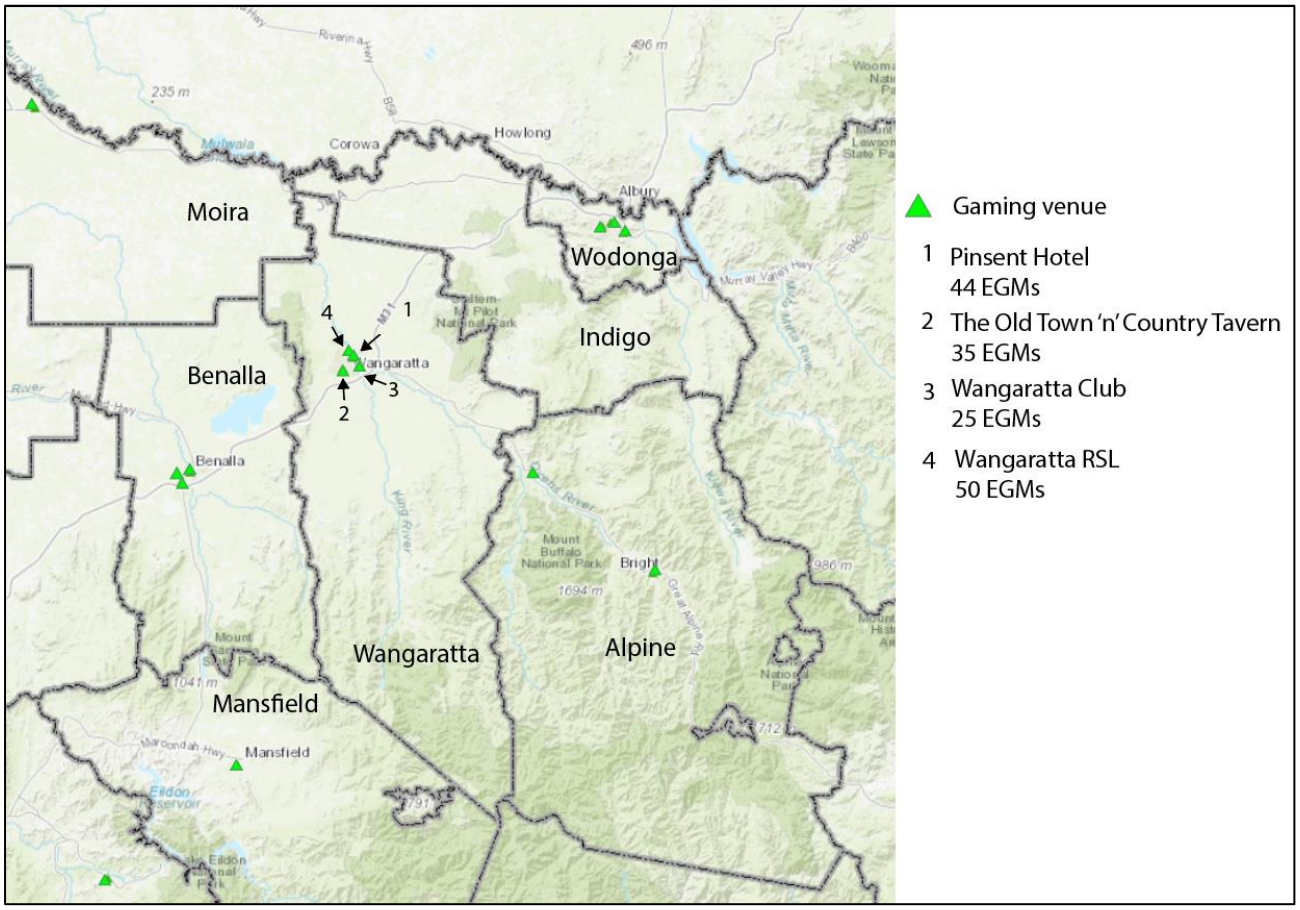
2.2 Gambling profile

2.2.1 Gaming venues and EGMs

The City of Wangaratta has four gaming venues, all of which are located in the urban area of Wangaratta (refer to Figure 3). Two of the venues are hotels and two are clubs.

There are no gaming venues in the adjoining Shire of Indigo. The gaming venues in the adjoining municipalities of Moira and Benalla are some distance from the municipal boundary. There is one gaming venue in close proximity to the eastern municipal boundary with Alpine Shire (refer to Figure 3).

Figure 3 – Gaming venues, June 2022



Source: SymPlan and VGCCC

[17] Wangaratta Planning Scheme, Clause 02.03-1
[18] Wangaratta Planning Scheme, Clause 02.03-1

There are currently 154 EGMs in the municipality (refer to Table 1).

The municipality is currently 69 EGMs below the municipal cap of 223 EGMs. A municipal cap is a maximum and not a benchmark. It is based on an average of 10 EGMs per 1,000 adults applied across all municipalities in Victoria not covered by a regional cap.

Table 1 – Gaming venues and EGM numbers, 2022-23

Venue	Address	EGM Numbers	Liquor licence type	Liquor licence trading hours	Gaming area trading hours
1. Pinsent Hotel	20 Reid Street, Wangaratta	44	General	7am to 1am	9am to 1am
2. The Old Town 'n' Country Tavern	Corner Greta Road and Mason Street Wangaratta	35	General	7am to 1am	10am to 1am
3. Wangaratta Club	4 Victoria Parade, Wangaratta	25	Full Club	at any time	10am to midnight
4. Wangaratta RSL	2-4 Templeton Street Wangaratta	50	Full Club	10am to 1am	10am to 1am
Rural City of Wangaratta		**154**			

Source: VGCCC

The two hotels operate under a General Liquor Licence and the two clubs operate under a Full Club Liquor Licence.

Both classes of liquor licences permit the sale of alcohol for consumption on and off the premises.

The gaming lounges operate within the recommended six hour shutdown period.[19]

[19] Gaming Commission Inquiry into Gambling 2010

2.2.2 EGM expenditure

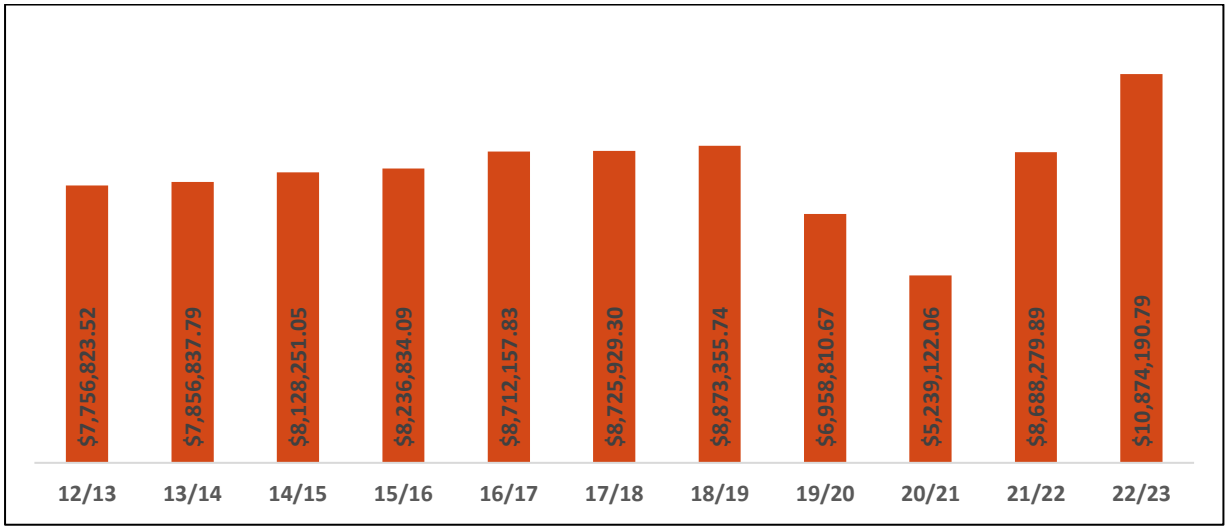
In this section the term 'expenditure' refers to total money lost on gambling.

Municipal

In the Financial Year 2022-23 expenditure on EGMs in the Rural City of Wangaratta was $10.8 million (refer to Figure 4).

Following a reduction in EGM expenditure due to the COVID-19 Pandemic lockdown,[20] EGM expenditure in the Financial Year 2022-23 in the municipality was the highest it has been in a decade (refer to Figure 4).

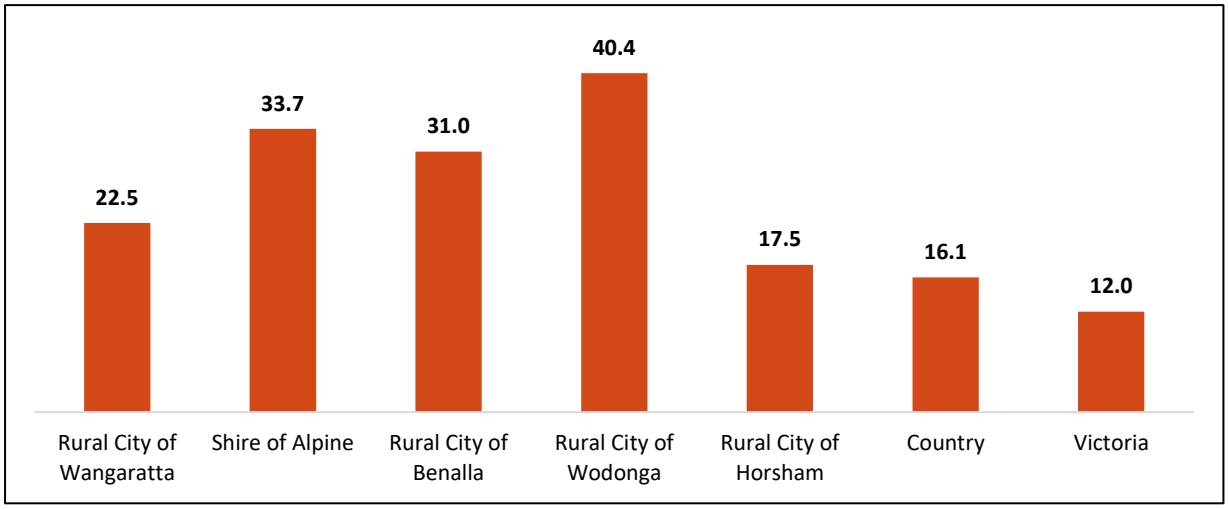
Figure 4 – EGM expenditure, Rural City of Wangaratta, 2012-13 to 2022-23



Source: VGCCC

Between the 2018-19 and 2022-23 Financial Years, EGM expenditure in Wangaratta increased by 22.5 per cent which is higher than the average for country municipalities (16.1 per cent) and Victoria (12 per cent). Refer to Figure 5.

Figure 5 – Per cent change in EGM expenditure 2018-19 to 2021-22



Source: VGCCC

[20] Gambling venues across Victoria were closed between 16 March 2020 and 8 November 2020 to slow the spread of coronavirus

Venue specific

In the 2022-23 Financial Year the Pinsent Hotel had the highest EGM expenditure and expenditure per attached EGM entitlement (refer to Table 2).

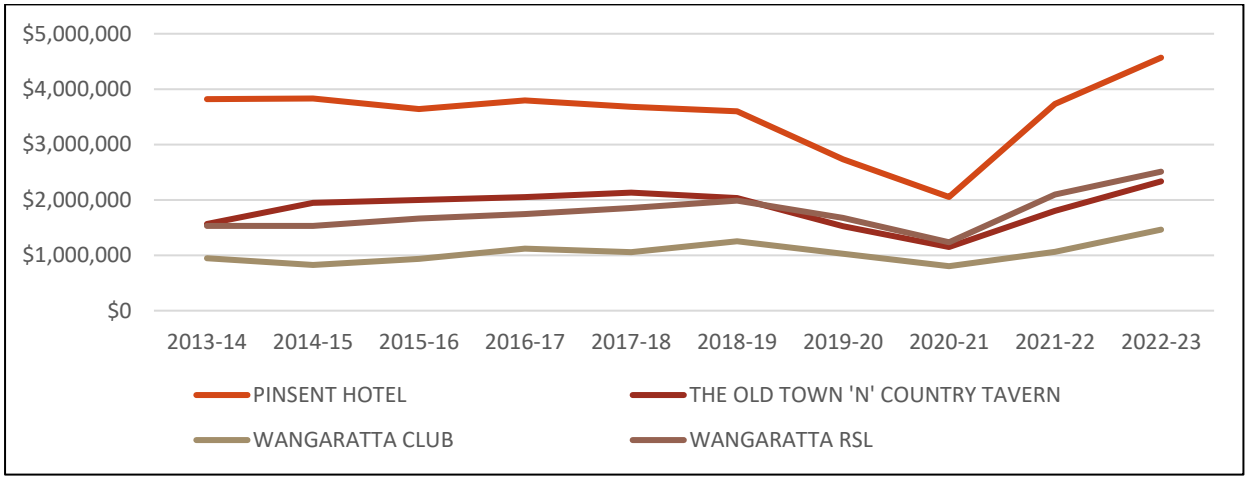
Table 2 – EGM expenditure per venue, 2022-23

Venue	EGM Numbers	EGM expenditure	Expenditure per attached EGM
Pinsent Hotel	44	$4,568,095.66	$103,820
The Old Town 'n' Country Tavern	35	$2,333,904.80	$66,683
Wangaratta Club	25	$1,462,866.77	$58,515
Wangaratta RSL	50	$2,509,323.56	$50,186
Rural City of Wangaratta	**154**	**$10,874,190.79**	**$70,612**

Source: VGCCC

In the last ten years the Pinsent Hotel has consistently had the highest and the Wangaratta Club has consistently had the lowest EGM expenditure of all the gaming venues in the municipality (refer to Figure 6).

Figure 6 – Historic EGM expenditure per venue, 2012-13 to 2022-23



Source: VGCCC

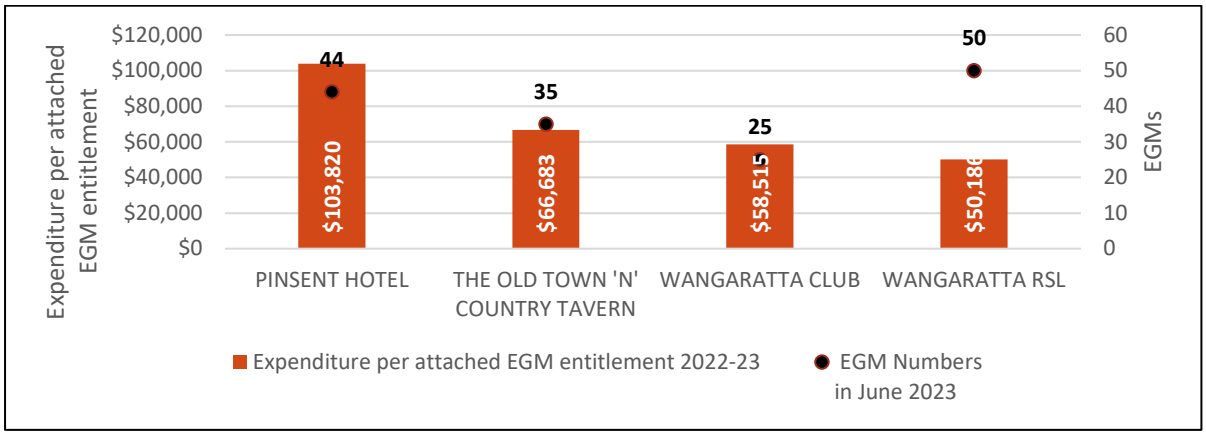
As a result of the installation of an additional 18 EGMs in 2019, the Wangaratta RSL has become the largest and second highest performing venue in the municipality (refer to Figure 7).

There is no clear relationship in the Rural City of Wangaratta between the size of the venue (number of attached EGM entitlements) and expenditure per attached EGM entitlement with the largest venue, i.e. the Wangaratta RSL having the lowest expenditure per attached EGM entitlement and the second largest venue i.e. the Pinsent Hotel having the highest expenditure per attached EGM entitlement (refer to Figure 7).

There is also no clear relationship between location and expenditure per attached EGM entitlement with the Old Town ‘n’ Country Hotel being located outside the Central Activity Area and having a higher expenditure per attached EGM entitlement than the Wangaratta Club which is located within the CAA.

In the Rural City of Wangaratta the relationship appears rather to be between venue type with the two clubs (Wangaratta Club and Wangaratta RSL) having the lowest expenditure per attached EGM entitlement and the two hotels having the highest (refer to Figure 7).

Figure 7 – Relationship between venue size and expenditure per attached EGM entitlement 2022-23



Source: VGCCC

2.2.3 Benchmarking

In the Financial Year 2022-23, compared to regional (country) municipalities, the Rural City of Wangaratta had a (refer to Table 3):

- higher density of EGMs per 1,000 adults and higher expenditure per attached EGM entitlement
- lower net EGM expenditure, EGM expenditure per adult and more adults per venue.

Table 3 – Key gaming indicators, 2022-23 Financial Year

	Net Expenditure ($)	Adults per Venue *	EGMs per 1,000 Adults *	EGM $ per Adult *	Number of EGMs	Number of venues	$ per attached EGM
Rural City of Wangaratta	$10,874,191	**5,874**	**6.6**	**$369.75**	**154**	**4**	$70,611.63
Rural City of Benalla	$14,516,476	3,868	9.0	$496.36	240	6	$60,485.32
Rural City of Horsham	$11,664,955	5,170	9.9	$575.09	153	3	$76,241.54
Rural City of Wodonga	$10,728,932	11,455	4.2	$267.50	150	3	$71,526.21
Shire of Alpine	$3,082,046	5,233	5.5	$227.56	68	3	$45,324.21
Average Country	**$25,630,284**	**4,996**	**6.0**	**$377.17**	**287**	**7**	$81,998.32
Average Victoria	**$53,011,66**	**10,659**	**4.8**	**$409.09**	**463**	**9**	**$114,962**

Source: VGCCC

* Data for 2021-22 used in absence of available data for 2022-23

2.3 Socio-economic and health profile

2.3.1 Population size and growth[21]

In 2021 there were 28,665 people living in the municipality, of which 19,827 (67 per cent) lived in the urban area and 9,838 (33 per cent) lived in the rural part of the municipality (refer to Table 4).

The population is projected to increase by 2,500 people to 32.165 people in 2036. The proportion of people in the urban area is projected to increase to 69 per cent and the proportion of people in the rural part of the municipality is projected to decrease to 31 per cent (refer to Table 4).

Table 4 – Population size and growth, 2021 to 2036

	2021		2036		Change 2021-2036	
	Population	% total	Population	% total	Population	% total
Wangaratta Rural	9,838	33.2	10,111	31.4	274	-1.7
Wangaratta Town	19,827	66.8	22,053	68.6	2,226	1.7
Rural City of Wangaratta	**29,665**	**100**	**32,165**	**100.0**	**2,500**	**0.0**

Source: Victoria in the Future

2.3.2 Health status

General

The City of Wangaratta compares unfavourably with Victoria with regards the following health and wellbeing indicators:[22]

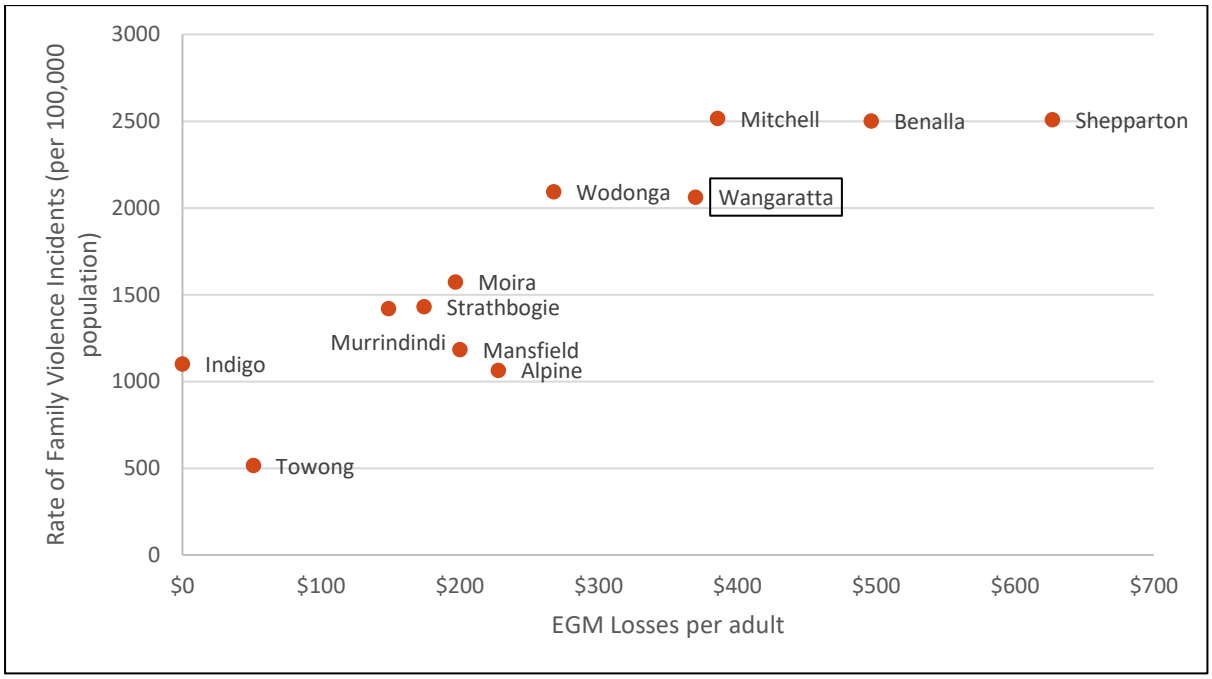
- Rates of daily smoking (16.1 per cent and 12 per cent)
- High or very high levels of psychological stress (25.1 per cent and 23.5 per cent respectively)
- Fair or poor self-reported health status (23.8 per cent and 21.4 per cent respectively)
- Feelings people cannot be trusted (13.4 per cent and 14.2 per cent respectively)
- Food insecurity (6.3 per cent and 5.9 per cent respectively)

[21] Victoria in the Future
[22] Victorian Population Health Survey 2020

Crime and safety

There is an association between EGM expenditure and family violence.[23] Refer to Figure 8.

Figure 8 – Association between EGM losses per adult ($) and rate of family incident callouts per 100,000 population, 2021-22



Source: VGCCC & Crime Statistics Agency

In March 2023 the City of Wangaratta had a much higher rate of family incidents per 100,000 people (2,310) compared with the Eastern Region (1,432). Between 2019 and 2023 the rate of family incidents per 100,000 people in the City of Wangaratta grew by 37 per cent. This increase was significantly higher than the Eastern Region (17.2 per cent) and Victoria (10.8 per cent).

In March 2023 the municipality had a higher rate of recorded criminal incidents per 100,000 people (5,966.5) compared with the Eastern Metropolitan Region (4,592.6) and Victoria (5,344.6). Between 2019 and 2023 the municipality experienced an increase in the rate of criminal incidents per 100,000 people and total number of criminal incidents. This is in contrast to a reduction in both indicators across the Eastern Metropolitan Region and Victoria.

The urban area of Wangaratta has consistently had the highest number of recorded criminal incidents since 2019.

[23] Hing, N., O'Mullan, C., Nuske, E., Breen, H., Mainey, L., Taylor, A., … Rawat, V. (2020). *The relationship between gambling and intimate partner violence against women* (Research report, 21/2020). Sydney: ANROWS.

Impact of the COVID-19 Pandemic

The long term health impacts of the COVID-19 Pandemic, which occurred during 2020 and 2021 specifically on gambling-related harms are unknown. However, the impacts of the two lockdowns in 2020 and 2021 on the wellbeing of Victorians have been the subject of two waves of research undertaken by VicHealth.[24] The findings of the second wave of research indicate the following impacts on wellbeing as a result of the Pandemic:[25]

- a reduction in subjective wellbeing
- an increase in high psychological distress, poor social connection
- an increase in reliance on low-cost unhealthy food, and a slight increase in food insecurity

Sub-populations with significantly less favourable results compared with Victorians include people aged 25-34 years, Aboriginal and Torres Strait Islanders, people who are unemployed and people speaking languages other than English at home.

While there has not been a specific study of the potential impacts of the COVID-19 Pandemic on the wellbeing of the community in the City of Wangaratta, it is likely these events have had similar impacts on these communities' mental and physical health and wellbeing and increased their vulnerability to gambling-related harm.

Research undertaken on the impacts of the COVID-19 Pandemic found that almost one in three people signed up for a new online betting account with one in 20 starting to gamble online. Young men aged 18-34 years were most likely to sign up for new online accounts.[26]

[24] VicHealth Coronavirus Victorian Wellbeing Impact Study: Follow-up survey (2020), Victorian Health Promotion Foundation, Melbourne https://doi.org/10.37309/2020.PO1011
[25] VicHealth Coronavirus Victorian Wellbeing Impact Study: Follow-up survey (2020), Victorian Health Promotion Foundation, Melbourne https://doi.org/10.37309/2020.PO1011
[26] Jenkinson, R et al (2020) *Gambling in Australia during COVID-19* Australian Gambling Research Centre

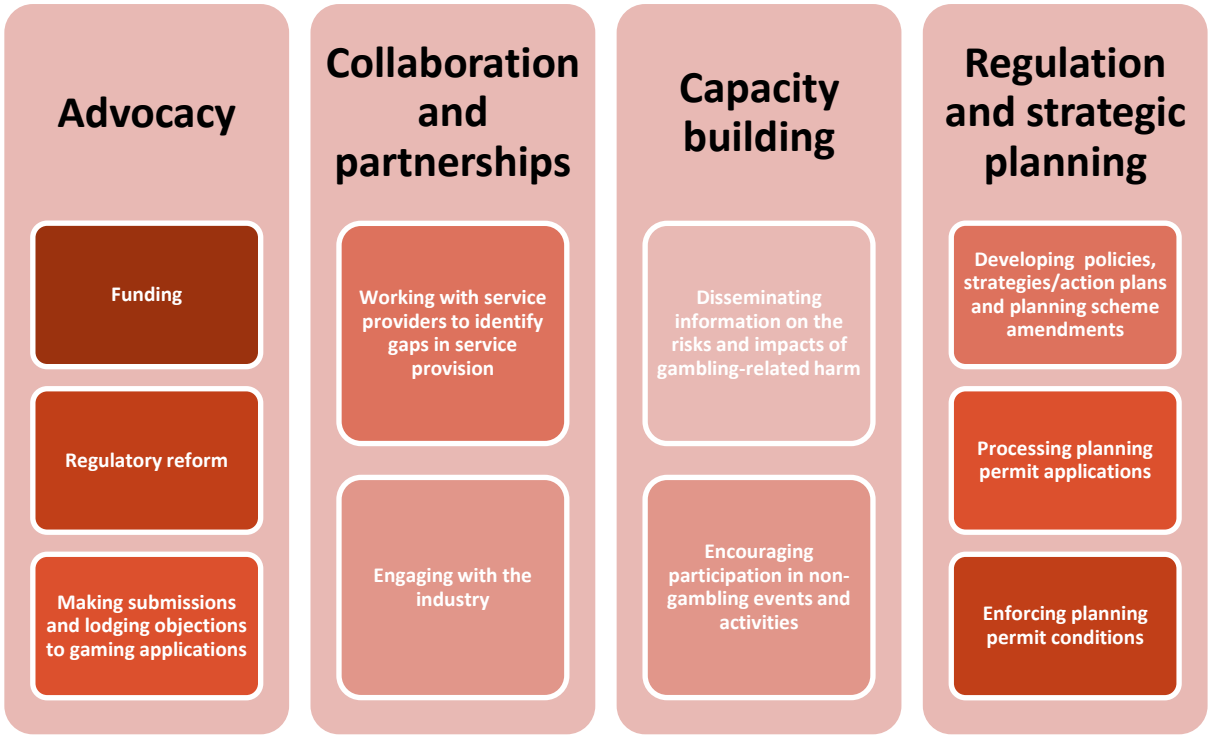
3 Regulatory and strategic framework

This section describes Council's statutory roles and the Rural City of Wangaratta's strategic and policy framework.

3.1 Council's statutory roles

As the closest tier of government to the community, Council plays a significant statutory role in creating environments which establish and maintain healthy lifestyle behaviours and prevent harm from gambling. These statutory roles are fulfilled in collaboration with other agencies such as peak bodies, service providers, advocacy groups and the industry (refer to Figure 9).

Figure 9 – Council's statutory roles



Source: SymPlan

These statutory roles are defined by three legislative instruments.

Planning and Environment Act 1987

The *Planning and Environment Act 1987* is the key legislative tool involved in assessing planning permit applications for gaming venues.

The purpose of the *Planning and Environment Act 1987* is to guide planning for the use, development and protection of land in Victoria. The Act sets out the Victoria Planning Provisions (VPPs), regulations for the operation and amendment of the Melton Planning Scheme, and other processes relating to the operation of land use in the municipality.

There is no reference to health and wellbeing in the objectives of the *Planning and Environment Act 1987.*

Amendments to the *Planning and Environment Act, 1987* in 2015 now require Council to have regard to the number of objectors in considering whether the use of development of land may have a significant social effect.

Gambling Regulation Act 2003

The *Gambling Regulation Act 2003* is the statutory instrument within which applications for gaming venues and licences are assessed.

Relevant objectives of the *Gambling Regulation Act 2003* (GRA) are:

(a) to foster responsible gambling in order to—

(i) minimise harm caused by problem gambling; and

(ii) accommodate those who gamble without harming themselves or others;

(ab) to ensure that minors are neither encouraged to gamble nor allowed to do so; and

(f) to promote tourism, employment and economic development generally in the State.

The maximum number of attached EGMs in an approved venue is 105. Venues with between 50 and 80 EGMs are typically considered medium sized venues and venues above 80 EGMs are typically classified large venues.

The Community Support Fund (CSF) is a trust fund governed by the *Gambling Regulation Act 2003* to direct a portion of gaming revenue back to the community. As prescribed by the legislation, the CSF receives 8.33 per cent of the revenue generated from the operation of EGMs in hotels. CSF funds are provided to government portfolio departments for making grants to community-based organisations and councils, supporting them in building strong and sustainable communities. The funds are not necessarily distributed to the councils that experience the greatest level of harm from gambling or generate the largest proportion of funds from gambling revenue.

The *Gambling Regulation Act 2003* requires, club venue operators to prepare and lodge an audited community benefit statement with the VGCCC for every financial year in which they receive gaming machine revenue. A community benefit statement verifies whether the community benefit provided by the club is equal to at least 8.33 per cent of its net gaming machine revenue.

Local Government Act 2020

The *Local Government Act 2020* provides councils with the authority to ensure the peace, order and good governance in its municipal district for the benefit and wellbeing of the municipal community. The Act states this role is to be fulfilled in collaboration with other Councils and Governments and statutory bodies.

Public Health and Wellbeing Act 2008

The *Public Health and Wellbeing Act 2008* gives local government specific statutory responsibilities to plan for and contribute to protecting and improving health and wellbeing. Local governments are required to protect, improve and promote public health and wellbeing by creating supportive environments, strengthening the community's capacity to lead healthy lives, developing and implementing public health policies and programs, intervening if the community's health is potentially affected and collaborating with others involved in building healthy communities.

The Act promotes evidence-based planning and decision-making and is founded on the precautionary principle which means if there is a risk to the community's health and wellbeing, the absence of scientific evidence should justify postponing measures to prevent or control the risk.

Gender Equality Act 2020

One of the purposes of the *Gender Equality Act 2020* is to require councils to promote gender equality in their policies, programs and services.[27]

The Act is founded on the following gender equality principles:

1) All Victorians should live in a safe and equal society, have access to equal power, resources and opportunities and be treated with dignity, respect and fairness.
2) Gender equality benefits all Victorians regardless of gender.
3) Gender equality is a human right and precondition to social justice.
4) Gender equality brings significant economic, social and health benefits for Victoria.
5) Gender equality is a precondition for the prevention of family violence and other forms of violence.
6) against women and girls.
7) Advancing gender equality is a shared responsibility across the Victorian community.
8) All human beings, regardless of gender, should be free to develop their personal abilities, pursue their professional careers and make choices about their lives without being limited by gender stereotypes, gender roles or prejudices.
9) Gender inequality may be compounded by other forms of disadvantage or discrimination that a person may experience on the basis of Aboriginality, age, disability, ethnicity, gender identity, race, religion, sexual orientation and other attributes.
10) Women have historically experienced discrimination and disadvantage on the basis of sex and gender.
11) Special measures may be necessary to achieve gender equality.

Section 9(1) of the Act requires Council to prepare a gender impact assessment (GIA) when developing or reviewing any policy, program or service that has a direct and significant impact on the public. Section 9(2) specifies what the GIA must contain.

3.2 Harm minimisation

The following statutory harm minimisation measures and guidelines are applicable to hotels and club gaming venues across all municipalities in Victoria:

- **Municipal and regional caps:** These are limits on the number of EGMs permissible in a municipality intended to manage the density of EGMs per 1,000 adults. Municipal limits are determined by applying a density of 10 EGMs per 1,000 adults. Regional limits are specific to areas considered vulnerable to gambling-related harms due to high levels of socio-economic disadvantage, EGM expenditure and density of EGMs per adults.
- **Responsible Service of Gambling:** All gaming venue employees working in gaming machine areas while open to the public must complete an approved Responsible Service of Gaming training course within the first six months of starting to work in the gaming machine area.
- **Responsible Gambling Code of Conduct:** Section 3.4.12B of the *Gambling Regulation Act 2003* requires all venues to have a Responsible Gambling Code of Conduct in place.

[27] Section 1 (b) Gender Equality Act 2020

- **YourPlay Self-exclusion program**: Section 3.4.12A of the *Gambling Regulation Act 2003* make it compulsory for all venues to have a self-exclusion program in place. This program enables a person to ban themselves from gaming venues, TABs and gambling websites.
- **Mandatory Pre-commitment:** From July 2024 all EGMs in Victoria will require mandatory pre-commitment limits and carded play with the cap limited at $100 (down from the existing cap of $1,000). This measure will be introduced subject to consultation with the industry.
- **Opening hours:** Section 3.3.9. of the *Gambling Regulation Act 2003* allows opening hours to a maximum of 20 hours each day and requires that there is a continuous 4 hour break from gaming after every 20 hours of gaming. The Victorian State government has announced amendments to existing opening hours commencing in July 2024 which will require gaming venues to close for a six hour shut down period between 4am and 10am.[28]
- **Signage and advertising:** Signage identifying that a venue operates EGM measuring $2m^2$ is permitted on the facades of hotels and clubs. These signs must be in white lettering on a single colour background with no decorative ridges or illumination.
- **Ban on smoking in licensed premises:** On the 1st of September 2002 smoking was prohibited in gaming areas and premises in Victoria.
- **Removal of ATM's:** Venues may not provide, or allow another person to provide, access to ATMs within an approved gaming venue, the exterior walls of an approved gaming venue, any land that is owned or leased by the gaming venue operator in which the gaming venue is located and, on any carpark owned or operated by the venue operator that is used primarily by the gaming venue patrons. The implementation and regulation of these statutory harm minimisation measures are under the jurisdiction of the gaming legislation. Even though there is no prohibition to including them in a local planning policy for gaming, they are deemed to be beyond the scope of planning and are therefore not typically included.

The VGCCC Venue Manual provides the necessary information to assist gaming venue operators to meet their regulatory and compliance obligations. The Manual covers a range of matters including gaming machine area (size, layout and facilities); gaming hours; patron interaction and support; display of notices, signs and rules; and advertising of gaming products.

In October 2013 the Minister issued guidelines relating to the location of children's play areas in gaming venues. These guidelines seek to minimise exposure of the gaming area to children in play areas by maximising distance, restricting access, and minimising the visibility and audibility of the gaming area. These guidelines align with the general prohibition of gambling and gaming among minors.

In February 2017 the Minister issued guidelines stating that the Commission should not approve gaming machines in buildings with permanent residential accommodation as this could increase exposure to gaming for residents, children and people at risk of gambling-related harms.

[28] Landmark Reforms To Reduce Gambling Related Harm | Premier of Victoria

3.3 Policies and plans

3.3.1 Wangaratta Council Plan 2021-2025 (incorporating the Municipal Public Health and Wellbeing Plan)

Key health and wellbeing priorities set out in the Council Plan and Municipal Public Health and Wellbeing Plan are:

- An engaged and connected community
- Mental health and the resilience of the community
- Preventing all forms of violence
- Reducing rates of gambling amongst the community (Strategy 2.4)

Goal 2.4.6 under Strategic Priority 2.4 *Healthy behaviours and lifestyles* is to reduce the rates of gambling amongst the community. Specific actions under this goal are:

2.4.6.1 Develop a Gaming Policy to guide decisions relating to gaming and gambling within our community.

2.4.6.2 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.

2.4.6.3 Partner with local services, community leaders and community and business organisations to inform the community about the health risks of gambling.

3.3.2 Wangaratta planning Scheme

Clause 02 - Municipal Planning Strategy

The Municipal Planning Strategy (MPS) provides an overview of important local planning issues and sets out the vision and strategic directions for future land use and development for the municipality.

The vision and supporting objectives describe Council's commitment to providing a safe environment, supporting healthy lifestyles and creating opportunities for the community to participate in social, cultural and recreational activities.

Planning Policy Framework, General Provisions and Operational Provisions

The following clauses in the Planning Policy Framework, General Provisions and Operational Provisions are relevant to drafting a gambling policy and informing Council's position on gambling (refer to Table 5).

Table 5 – Planning Policy Framework, Particular Provisions and Operational Provisions

Scope	Relevance to gambling policy and action plan
Clause 11 Settlement	
Purpose of planning is to recognise the need for and contribute towards health, wellbeing and safety, economic viability and diversity of choice.	Planning has a role to play in supporting optimal health and wellbeing.
Clause 11.02-3S Sequencing of development	
Manage the sequence of development in areas of growth so that services are available from early in the life of new communities.	Gaming venues should not be provided before there is a choice of non-gambling activities and facilities in the surrounding area.
Clause 11.03-1S Activity centres	
he Wangaratta Central Activities Area is the municipality's principal activity centre. The general objective under Clause 11.03-1L-02 is to enhance the economic performance of the Wangaratta Central Activities Area through provision of retail, office, recreation, educational and other opportunities. Encourage the concentration of major retail, residential, commercial, administrative, entertainment and cultural developments into activity centres that are highly accessible to the community.	It is a general planning principle that gaming venues should be located within, but not at the core of activity centres which provide a choice of entertainment and cultural facilities and activities.
Clause 11.03-2L Growth Areas	
Guides the development of the municipality's growth areas in Wangaratta North West and South Growth Areas	Population growth has the potential to generate a demand for additional gaming venues and EGMs.
Clause 17 Economic development	
Planning is to provide for a strong and innovative economy, where all sectors are critical to economic prosperity	Planning must recognise the potential economic benefits of gambling. These include employment, investment, supply contracts and complementary expenditure.
Clause 17.02-1S Business	
To encourage development that meets the community's needs for retail, entertainment, office and other commercial services.	Gambling is a legal form of entertainment which needs to be accommodated.
Clause 17.02-1S Facilitating tourism	
Encourage tourism development to maximise the economic, social and cultural benefits of developing the state as a competitive domestic and international tourist destination.	Gambling venues have the potential to contribute to tourism in the municipality.
Clause 63 Existing uses	

Scope	Relevance to gambling policy and action plan
Allows for the continuation of uses.	EGMs permitted prior to 18 October 2006 enjoy existing use rights.
Clause 65 Decision guidelines	
Before deciding on an application or approval of a plan councils must consider, as appropriate, the orderly planning of the area; and the effect on the environment, human health and amenity of the area.	A social and economic impact assessment should inform a decision on an application for a planning permit.
Clause 71.02 Operation of the Planning Policy Framework	
The Planning Policy Framework seeks to ensure that the objectives in Victoria (as set out in section 4 of the *Planning and Environment Act 1987*) are fostered through appropriate land use and development planning policies and practices that integrate relevant environmental, social and economic factors in the interests of net community benefit and sustainable development.	Decisions should seek to achieve a net community benefit.
Clause 71.02-3 Integrated decision making	
Planning aims to meet these [various social needs] and expectations by addressing aspects of economic, environmental and social wellbeing affected by land use and development… Planning and responsible authorities should endeavour to integrate the range of planning policies relevant to the issues to be determined and balance conflicting objectives in favour of net community benefit and sustainable development for the benefit of present and future generations.	All relevant policies need to be considered when deciding on an application for a planning permit to install and/or operate EGMs. Where there is a conflict in the objectives of these policies, the decision relies on whether, on balance, the proposal will result in a net community benefit.

Particular provisions – Clause 52.28 Gaming

Clause 52.28 Gaming was introduced into the Victoria Planning Provisions by VC39 in 2006. The purposes of this Clause are:

- To ensure that gaming machines are situated in appropriate locations and premises.
- To ensure the social and economic impacts of the location of gaming machines are considered.
- To prohibit gaming machines in specified shopping complexes and strip shopping centres.

This Clause prohibits the location of gaming machines in strip shopping centres and shopping complexes defined in the schedule to this clause. The clause defines a strip shopping centre is an area that meets all of the following requirements:

- It is zoned for commercial use.
- It consists of at least two separate buildings on at least two separate and adjoining lots.
- It is an area in which a significant proportion of the buildings are shops.
- It is an area in which a significant proportion of the lots abut a road accessible to the public generally.

Amendments to Clause 52.28 introduced in 2018 by VC148 made provisions for councils to include schedules which specify guidelines relating to appropriate locations for gaming venues and machines, guidelines relating to appropriate venues for gaming machines and information which must accompany an application considered under this clause. This schedule also provides the opportunity for Council to specify its objectives in relation to protecting the community from gambling-related harm, and shopping centres and strip shopping centres within which EGMs are prohibited.

At present the schedule to Clause 52.28 Gaming in the Wangaratta Planning Scheme does not include any objectives, lists of shopping centres and strip shopping centres, guidelines on appropriate locations and venues for EGMs, application requirements or decision guidelines.

One of the decision guidelines in this Clause is whether the gaming premises provides a full range of hotel facilities or services to patrons or a full range of club facilities or services to members and patrons.

4 Gambling behaviours and gambling-related harm

This section describes general gambling behaviours and trends and the concept of gambling-related harm. It also describes the determinants and impacts of gambling-related harms, and specific factors that increase the community's vulnerability to the impacts of gambling-related harm.

The discussion covers gambling in general, and EGMs in particular.

4.1 Gambling behaviours and expenditure

Gambling is a legal form of entertainment that is a part of Australian culture.

Australia has 76 per cent of the world's non-casino EGMs which are located in hotels and clubs.[29] It is estimated Australians spent approximately $15 billion on legal forms of gambling in 2018-19, representing the largest per capita losses in the world.[30] This amounts to a per capita gambling loss of $1,200.[31]

There has been a small decrease in overall gambling activities in the last decade with just over two thirds of Victorian adults (69 per cent) gambling in 2018/19 compared to 73.1 per cent in 2008.

There has however been an increase in gambling using casino table games and sports betting (refer to Table 6).

Table 6 – Participation in gambling activities in Victoria, 2008, 2014 and 2018-19

Gambling activity	2008	2014	2018-19
At least one gambling activity	73.1%	70.1%	69.0%
Lotteries	47.5%	46.9%	44.4%
Raffles, sweeps or other competitions	42.9%	41.6%	37.4%
Horse or harness racing or greyhounds	16.4%	20.6%	19.8%
EGMs	21.5%	16.7%	14.1%
Scratch tickets	15.3%	10.7%	11.2%
Casino table games	4.6%	5.1%	6.1%
Sports betting (excluding fantasy and eSports)	4.0%	4.8%	5.8%
Informal private betting	3.5%	2.8%	3.4%
Keno	2.3%	3.7%	3.3%
Telephone prize draw	7.4%	5.8%	2.4%
Bingo	2.1%	2.6%	1.5%
eSports	Not reported	Not reported	0.4%
Fantasy sports	Not reported	Not reported	0.3%
Anything else	0.0%	0.7%	0.9%

Source: Rockloff, M, Browne, M, Hing, N, Thorne, H, Russell, A, Greer, N, Tran, K, Brook, K & Sproston, K 2020, *Victorian population gambling and health study 2018–2019*, Victorian Responsible Gambling Foundation, Melbourne.

[29] Alliance For Gambling Reform – Position Paper *A mandatory Registered Cashless Gambling Card System to Address gambling harm and criminal gaming activity* January 2023
[30] Australian Institute of Health and Welfare 2021 *Gambling in Australia*
[31] Global Local: Gambling (lgiu.org)

Of those gambling in 2018/19:[32]

- 64.2 per cent participate in lotteries such as Tattslotto, Oz Lotto, Powerball or pools.
- 28.7 per cent participate in race betting.
- 20.4 per cent use EGMs.
- 8.8 per cent bet on casino table games such as blackjack, roulette and poker.
- 8.3 per cent bet on sports.
- 21.9 per cent of Victorians aged 18–24 years who gamble participate in sports betting.

Gender specific behaviours

Overall, women's gambling participation rates are very similar to men's[33] with women less likely to use EGMs compared with men (12. per cent compared with 15.5 per cent).[34]

The growing participation rate amongst women has been attributed to the increasing normalisation, socio-cultural acceptance and accessibility of gambling,

Research has identified the following gender specific gambling behaviours:

- Men are significantly more likely than women to bet on sports (13.9 per cent and 2.9 per cent respectively). This has increased from 10.9 per cent of men and 2.5 per cent of women in 2014, and 9.3 per cent of men and 2.1 per cent of women in 2008.[35]
- Women tend to have lower individual bets and lower overall net expenditure but not lower participation, lower frequency of play or shorter gambling sessions.[36]
- Women are less likely to use EGMs compared with men (12. per cent compared with 15.5 per cent)[37].
- Women tend to use EGMs for longer duration time than males:[38]

The reasons women gamble are boredom, loneliness, escape and a desire to be socially engaged.[39] Females are more likely than males to treat gambling as a means of escape, to relax and to lessen negative mood states like anxiety and depression.[40]

Gaming venues are particularly attractive to women, particularly those experiencing family violence[41], as they feel safe, provide what is perceived to be a cheap source of entertainment. and are open for

[32] Rockloff, M, Browne, M, Hing, N, Thorne, H, Russell, A, Greer, N, Tran, K, Brook, K & Sproston, K 2020, *Victorian population gambling and health study 2018–2019*, Victorian Responsible Gambling Foundation, Melbourne.
[33] Thomas, S, Pitt, H, Randle, M, McCarthy, S, Daube, M, Bestman, A & de Moel, C 2020, Australian young women's gambling behaviours: A socio-cultural investigation of gambling attitudes, beliefs, and consumption intentions, Victorian Responsible Gambling Foundation, Melbourne.
[34] Rockloff, M, Browne, M, Hing, N, Thorne, H, Russell, A, Greer, N, Tran, K, Brook, K & Sproston, K 2020, *Victorian population gambling and health study 2018–2019*, Victorian Responsible Gambling Foundation, Melbourne.
[35] Rockloff, M, Browne, M, Hing, N, Thorne, H, Russell, A, Greer, N, Tran, K, Brook, K & Sproston, K 2020, *Victorian population gambling and health study 2018–2019*, Victorian Responsible Gambling Foundation, Melbourne.
[36] Hing, N. and Breen, H. (2001) "An empirical study of sex differences in gaming machine play among club members" *International Gambling Studies* Vol 1, pp 1-8
[37] Rockloff, M, Browne, M, Hing, N, Thorne, H, Russell, A, Greer, N, Tran, K, Brook, K & Sproston, K 2020, *Victorian population gambling and health study 2018–2019*, Victorian Responsible Gambling Foundation, Melbourne.
[38] Rockloff, M, Browne, M, Hing, N, Thorne, H, Russell, A, Greer, N, Tran, K, Brook, K & Sproston, K 2020, *Victorian population gambling and health study 2018–2019*, Victorian Responsible Gambling Foundation, Melbourne.
[39] Thomas, S, Pitt, H, Randle, M, McCarthy, S, Daube, M, Bestman, A & de Moel, C 2020, Australian young women's gambling behaviours: A socio-cultural investigation of gambling attitudes, beliefs, and consumption intentions, Victorian Responsible Gambling Foundation, Melbourne.
[40] Hing, N. and Breen, H. (2001) "An empirical study of sex differences in gaming machine play among club members" *International Gambling Studies* Vol 1, pp 1-8
[41] Hing, N., O'Mullan, C., Nuske, E., Breen, H., Mainey, L., Taylor, A., … Rawat, V. (2020). *The relationship between gambling and intimate partner violence against women* (Research report, 21/2020). Sydney: ANROWS.

long periods when other facilities are closed. Regular female EGM users are more likely to be either young (18 – 24 years) or old (60 years and older), be from lower SES groups and be migrants.[42]

Research shows people who socialised more in LGBTQI+ venues are less likely to gamble as these venues do not contain EGMs. However, LGBTQI+ people who gamble on their own are more likely to visit EGM venues as they are open late and deemed to be 'safe places'.[43] This research also found some LGBTQI+ people used gambling to avoid dealing with their LGBTQI+ status or the stress of 'coming out'.

Online gambling

In the last ten years there has been an emergence of 'technology-based' forms of gambling which is due to the proliferation of internet access and mobile internet devices, such as smartphones. The most noticeable change in internet gambling has occurred for sports betting with the proportion of Australian adults gambling online increasing from 12.6 per cent of all those wagering[44] in 2020-11 to almost 31 per cent in 2019.[45]

This is of potential concern given online gambling is difficult to regulate, widely available and accessible with a mobile device, widely promoted and covers a wide range of sports. These factors make this form of gambling particularly appealing to younger people.

The proportion of people using EGMs online has also increased from 0.3 per cent in 2008, to 1.3 per cent in 2018-19. Consequently there has also been an increase in the demand for treatment for this form of gambling.[46]

These new forms of gambling also have the potential to cause harm.[47]-Esports, or competitive video gaming is another growing sector in the gambling market, particularly among young men. Nearly two thirds (62 per cent) of participation in this form of gambling is among people aged 18 – 34 years.[48]

Sports gambling

The lengthy periods of lockdown caused by the COVID-19 Pandemic[49]significantly increased the proportion of sports bettors who gamble online.

In 2018 the average typical month gambling expenditure among Australian adults who gambled on horse or dog races was higher than the average for all forms of gambling ($236 and $133 respectively).[50]

Gambling is illegal for people under the age of 18 years yet gambling marketing is particularly pervasive and aligned with major cultural activities such as sport.[51] This normalisation of gambling,

[42] Hing, N. and Breen, H. (2001) "An empirical study of sex differences in gaming machine play among club members" *International Gambling Studies* Vol 1, pp 1-8
[43] Rachel Bush, Alex M. T. Russell, Andrea Waling, Petra K. Staiger, and Nicki A. Dowling 2021, Examining risk and protective factors for the development of gambling-related harms and problems in Victorian LGBTIQ+ communities, Melbourne.
[44] Betting on races, sports or novelty outcomes like who will win a realit TV sho.
[45] Brett Hetherington and Tony Phillips 2023, *Discussion paper: Gambling harm and the online gambling environment*, Victorian Responsible Gambling Foundation, Melbourne
[46] Rockloff, M, Browne, M, Hing, N, Thorne, H, Russell, A, Greer, N, Tran, K, Brook, K & Sproston, K 2020, *Victorian population gambling and health study 2018–2019*, Victorian Responsible Gambling Foundation, Melbourne.
[47] Rockloff, M, Browne, M, Hing, N, Thorne, H, Russell, A, Greer, N, Tran, K, Brook, K & Sproston, K 2020, *Victorian population gambling and health study 2018–2019*, Victorian Responsible Gambling Foundation, Melbourne.
[48] Rockloff, M, Browne, M, Hing, N, Thorne, H, Russell, A, Greer, N, Tran, K, Brook, K & Sproston, K 2020, *Victorian population gambling and health study 2018–2019*, Victorian Responsible Gambling Foundation, Melbourne.
[49] Brett Hetherington and Tony Phillips 2023, *Discussion paper: Gambling harm and the online gambling environment*, Victorian Responsible Gambling Foundation, Melbourne
[50] Australian Institute of Health and Welfare 2021 *Gambling in Australia*
[51] Thomas, S et al (2023) *Health Promotion International* 'Protecting children and young people form contemporary marketing for gambling' Volume 38 pp1-14

particularly through advertising of online gambling, influences children and young people's gambling attitudes and consumption behaviours.

Electronic gaming machines

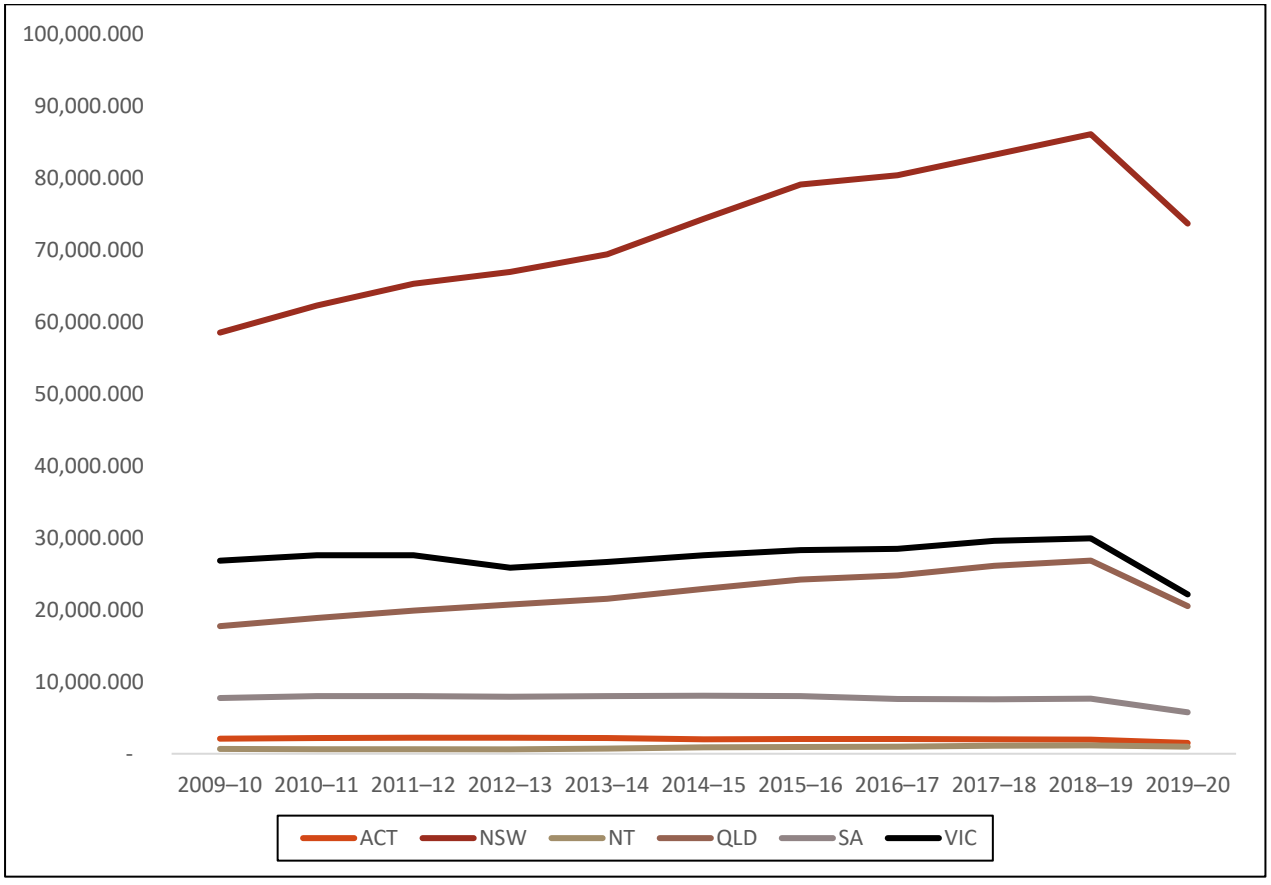
Between 2008-09 and 2018-19 there was a steady decrease in the proportion of people using land based EGMs between.[52]

In 2018 the average typical monthly expenditure on EGMs in Australia was higher than on any other form of gambling ($157 and $133 respectively).[53]

In the 2018-19 Financial Year, prior to the lockdown as a result of the COVID-19 Pandemic, expenditure on EGMs in Victoria was $29,916 million.[54] This is the highest it has been since they were introduced in 1994.[55]

Victoria has consistently had the second highest gaming machine turnover in Australia since 2009-10.[56] Refer to Figure 10.

Figure 10 – Gaming machine turnover in Australia, 2009-10 to 2019-20



Source: Australian Gambling Statistics 37th edition

[52] Rockloff, M, Browne, M, Hing, N, Thorne, H, Russell, A, Greer, N, Tran, K, Brook, K & Sproston, K 2020, *Victorian population gambling and health study 2018–2019*, Victorian Responsible Gambling Foundation, Melbourne.
[53] Australian Institute of Health and Welfare 2021 *Gambling in Australia*
[54] Australian Gambling Statistics 37th edition
[55] Australian Gambling Statistics 37th edition
[56] Australian Gambling Statistics 37th edition

In 2019-20 per capita expenditure on EGMs in Victoria represented 59 per cent of per capita expenditure on all forms of gambling.[57] In this Financial Year per capita gambling expenditure on EGMs in Victoria ($381) was higher than any other form of gambling.[58]

More than a quarter (77.5 per cent) of people using EGMs did so at a Victorian pub, club or hotel with a very small proportion using EGMs online (1.3 per cent)

Trends in participation in EGMs among specific population cohorts are:[59]

- Older people, people speaking English at home, and people living in regional Victoria were more likely to use EGMs in pubs, clubs or hotels.
- Those most likely to use EGMs were young people aged 18 to 24 years (over a third, 35.5 per cent) and people aged 75 years and older (nearly a quarter, 24.4 per cent).
- Gamblers speaking English at home were more likely to use EGMs compared with gamblers who spoke a language other than English at home (21.2 per cent and 16.5 per cent respectively)
- Gamblers living in regional Victoria were more likely to use EGMs compared with Melbourne-based gamblers (25.4 per cent and 18.8 per cent respectively).
- People of aboriginal or Torres Strait Islander descent were more likely to use EGMs than non-Indigenous gamblers (30.4 per cent and 20.3 per cent respectively).
- People on lower incomes are more likely to use EGMs than high income gamblers with almost a quarter (23.9 per cent) of all gamblers with incomes of $1 to $20,799) and a further 23.8 per cent of gamblers with incomes of $20,800-$42.599 using EGMs.

4.2 Definition of gambling-related harm

4.2.1 Framing harm from gambling

Early gambling policies reflected the contemporary research which conceptualised gambling harm through the lens of individual responsibility caused solely by individual behaviours[60] and a diagnosable mental health problem. Approaches to minimising gambling harm have in the past promoted individual responsibility, with strategies focussing on supporting 'problem gamblers' to 'gamble responsibly'. These downstream measures focus on individualised behavioural solutions rather than population wide approaches[61].

In recent years there has been increasing acknowledgment of the socio-economic, environmental or venue design factors, and the features of the gambling product itself, that contribute to this risk. The framing of harm has shifted from 'problem gambling' and the 'problem gambler' to gambling harm, with acknowledgement that this harm is experienced by all people across the continuum, including those at low, moderate and high risk of harm.[62] There has also been acknowledgement that harm is experienced not only by the gambler, but also by their families and the broader community.[63]

[57] Australian Gambling Statistics 37th Edition
[58] Australian Gambling Statistics 37th Edition
[59] Rockloff, M, Browne, M, Hing, N, Thorne, H, Russell, A, Greer, N, Tran, K, Brook, K & Sproston, K 2020, *Victorian population gambling and health study 2018–2019*, Victorian Responsible Gambling Foundation, Melbourne.
[60] Global Local: Gambling (lgiu.org)
[61] Thomas, S.L., Crawford, G., Daube, M., Pitt, H., Hallett, J., McCarthy, S., Francis, L. and Edmunds, M. (2023), Time for policies on gambling to benefit health - not the gambling industry. Health Promot J Austral, 34: 267-271. https://doi.org/10.1002/hpja.721
[62] Rockloff, M, Browne, M, Hing, N, Thorne, H, Russell, A, Greer, N, Tran, K, Brook, K & Sproston, K 2020, *Victorian population gambling and health study 2018–2019*, Victorian Responsible Gambling Foundation, Melbourne.
[63] Li, E., Browne, M., Rawat, V., Langham, E., & Rockloff, M. (2016). Breaking Bad: Comparing Gambling Harms Among Gamblers and Affected Others. Journal of Gambling Studies, 33(1), 223–248. https://doi.org/10.1007/S10899-016-9632-8

Gambling-related harm is now recognised as:

> *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 population.*[64]

4.2.2 A public health approach to gambling-related harm

Gambling is recognised as a significant, global public health concern.[65]

A public health approach to gambling harm is based on the following principles:

- Gambling, like tobacco and alcohol, are addictive products and therefore need to be regulated.
- Anyone can experience some level of harm from gambling, with greater harm being experienced by those who are vulnerable.[66] This is discussed further in Section 5.4.
- All members of society have the right to live without unnecessary and preventable risk to health and safety from gambling products and gambling industry practices, whether land-based or online.[67]
- Strategies will address health across the whole community rather than focus on the individual. This involves developing and implementing 'upstream' actions which seek to prevent harm from arising in addition to addressing harm when it is manifest.
- Strategies should focus on reducing both demand and supply, with a primary focus on prevention.[68]
- Strategies address harm experienced by the individual gambler, as well as the indirect harm experienced by the gambler's family, friends and the broader community.
- There are multiple determinants of harm including socio-cultural, political, economic, environmental and health.
- A range of stakeholders and agencies are responsible for preventing and minimising harm. This indicates a partnership and intersectional approach across a range of stakeholders and agencies.
- Strategies and actions need to be based on a strong and transparent evidence base.
- Strategies should focus on supply reduction, demand reduction and harm reduction.

Contemporary studies into the health impacts of gambling-related harms consider all levels of risk i.e. low risk, moderate-risk gamblers as well as those previously referred to as 'problem gamblers'. [69] A recent study, within the framework of a public health approach, found that of those at risk, 50 per cent, 25 per cent and 15 per cent are considered at low, moderate and high risk of gambling-related harm respectively.[70]

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[64] Browne, M, Langham, E, Rawat, V, Greer, N, Li, E, Rose, J, Rockloff, M, Donaldson, P, Thorne, H, Goodwin, B, Bryden, G & Best, T 2016, Assessing gambling-related harm in Victoria: a public health perspective, Victorian Responsible Gambling Foundation, Melbourne.
[65] Global Local: Gambling (lgiu.org)
[66] Protecting the public from being harmed or exploited by gambling and the gambling industry | ADPH
[67] Protecting the public from being harmed or exploited by gambling and the gambling industry | ADPH
[68] Statutory levy on gambling may do more harm than good | The BMJ
[69] Rockloff, M, Browne, M, Hing, N, Thorne, H, Russell, A, Greer, N, Tran, K, Brook, K & Sproston, K 2020, *Victorian population gambling and health study 2018–2019*, Victorian Responsible Gambling Foundation, Melbourne.
[70] Browne, M., Langham, E., Rawat, V., Greer, N., Li, E., Rose, J., … Best, T. (2016). Assessing gambling- related harm in Victoria: a public health perspective. Victoria Responsible Gambling Foundation, Melbourne.

4.3 Prevalence and distribution of harm[71]

4.3.1 General

The prevalence of people classified in the literature and research as 'problem gamblers'[72] in Victoria has remained largely unchanged, from 0.8 per cent in 2014 to 0.7 per cent in 2018–2019.[73] The proliferation of online gambling has increased the potential for harm in the community.[74]

More than two thirds (70 per cent) of gambling-related harm is experienced by people whose behaviour is not classified as 'problem gambling'.

It is becoming increasingly recognised that gambling-related harms have direct impacts on the person who gambles and indirect impacts on others including their families, friends and the wider community. Research found that a person directly affected by gambling-related harm can affect up to six other people around them, moderate-risk gambling up to three others and low-risk gambling up to one other.[75] These impacts include financial hardship, relationship breakdown, family and intimate partner violence. Close family members including partners and children were most often identified as the people most impacted by others' gambling.[76]

The prevalence of harm varies across the Victorian electoral regions. The Rural City of Wangaratta is located in the Eastern Victorian Region which has a below average prevalence of gamblers with one or more harms, and extra severe harms relative to all Victorian gamblers refer to Table 7).

Table 7 – Prevalence of gambling-related harms across Victorian regions

Electoral region	One or more harms	One or more extra severe harms
Northern Metro	11.2	2.3
Southern Metro	8.0	14.0
South-eastern Metro	12.4	2.3
Eastern Metro	9.5	1.6
Western Metro	10.6	2.1
Northern Victoria	9.1	1.6
Eastern Victoria	**8.7**	**1.8**
Western Victoria	7.4	1.7
All Victorian Gamblers	**9.6**	**1.8**

Source: Rockloff, M, Browne, M, Hing, N, Thorne, H, Russell, A, Greer, N, Tran, K, Brook, K & Sproston, K 2020, *Victorian population gambling and health study 2018–2019*, Victorian Responsible Gambling Foundation, Melbourne.

[71] Browne, M., Langham, E., Rawat, V., Greer, N., Li, E., Rose, J., … Best, T. (2016). Assessing gambling- related harm in Victoria: a public health perspective. Victoria Responsible Gambling Foundation, Melbourne.
[72] While the term 'problem gamblers' is no longer used, it has been used in this context to ensure the evidence is cited correctly.
[73] Browne, M., Langham, E., Rawat, V., Greer, N., Li, E., Rose, J., … Best, T. (2016). Assessing gambling- related harm in Victoria: a public health perspective. Victoria Responsible Gambling Foundation, Melbourne.
[74] Hetherington, B and Phillips, T (2023) *Gambling Harm and the Online Gambling Environment* Victorian Responsible Gambling Foundation
[75] Australian Institute of Health and Welfare 2021 *Gambling in Australia*
[76] Australian Institute of Health and Welfare 2021 *Gambling in Australia*

4.3.2 Age specific risk[77]

A key risk factor for gambling-related harm among young people is regularly observing their parents and other influential adults such as teachers gamble during childhood, witnessing gambling being part of family routines and events, and being directly involve by being given scratch tickets. A further key risk factor is witnessing gambling wins.

In later adolescence at risk young gamblers tend to extend their gambling to riskier activities such as sports and race betting and EGM gambling, in some instances to demonstrate their skills through 'winning'. This is often supported through part time employment.

Although some young people indicate they understand gambling and its potential for harm, they tend to not acknowledge their gambling s being harmful, reporting confidence in being able to self-regulate their gaming into the future.

4.3.3 Gender specific risk and prevalence

Gambling participation rates amongst men and women are almost equal (70 per cent compared with 68.2 per cent respectively.[78] However, men in Victoria spend more on gambling than women and are more likely to experience harm compared to women (1 per cent and 0.5 per cent respectively).[79]

The prevalence of women's participation in gambling is steadily increasing[80] due to the increased accessibility of online gambling and social factors such as boredom and loneliness.[81] The risk of gambling harm is therefore increasing among women.

Younger women are at greater risk of several levels of gambling harm, with just under one quarter being classified as being at the greatest risk. This compares to 3 per cent older women and ten per cent of middle aged women which are considered to be at high and moderate risk of harm respectively.[82] This is because younger women are diversifying their gambling behaviours and are more likely to gamble on multiple products - including sports betting- while older women most likely to gamble on just one product.[83] However, older women had a lower perception of harm caused by their own gambling because they perceived the social benefits associated with gaming venues such as social interaction and inclusion outweighed the costs associated with losses on EGMs.[84]

4.3.4 Electronic gaming machines

'Problem gamblers' (69.3%), moderate-risk gamblers (52.3%) and low risk gamblers (40.0%) were more likely to have played the pokies compared with non-problem gamblers (16.3%).

Other research estimates 36 per cent of expenditure on EGM gambling is sourced from people classified as 'problem gamblers' with a further 23.6 per cent coming from people classified as 'moderate risk gamblers'.[85]

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[77] Hing, N et al (2022) *NSW Youth Gambling Study 2022: Qualitative Research* NSW Government
[78] Rockloff, M, Browne, M, Hing, N, Thorne, H, Russell, A, Greer, N, Tran, K, Brook, K & Sproston, K 2020, *Victorian population gambling and health study 2018–2019*, Victorian Responsible Gambling Foundation, Melbourne.
[79] Hing, N. and Breen, H. (2001) "An empirical study of sex differences in gaming machine play among club members" *International Gambling Studies* Vol 1, pp 1-8
[80] Hing, N. and Breen, H. (2001) "An empirical study of sex differences in gaming machine play among club members" *International Gambling Studies* Vol 1, pp 1-8
[81] McCarthy, S, Thomas, S, Bellringer, M and Cassidy, R (2019) *Harm Reduction Journal* Women and gambling-related harm: a narrative literature review and implications for research, policy, and practice 16.18
[82] McCarthy, S., Thomas, S.L., Randle, M. *et al.* Women's gambling behaviour, product preferences, and perceptions of product harm: differences by age and gambling risk status. *Harm Reduct J* **15**, 22 (2018). https://doi.org/10.1186/s12954-018-0227-9
[83] McCarthy, S., Thomas, S.L., Randle, M. *et al.* Women's gambling behaviour, product preferences, and perceptions of product harm: differences by age and gambling risk status. *Harm Reduct J* **15**, 22 (2018). https://doi.org/10.1186/s12954-018-0227-9
[84] McCarthy, S., Thomas, S.L., Randle, M. *et al.* Women's gambling behaviour, product preferences, and perceptions of product harm: differences by age and gambling risk status. *Harm Reduct J* **15**, 22 (2018). https://doi.org/10.1186/s12954-018-0227-9
[85] Browne, M, Greer, N, Armstrong, T, Doran, C, Kinchin, I, Langham, E & Rockloff, M 2017, *The social cost of gambling to Victoria*, Victorian Responsible Gambling Foundation, Melbourne.

It is widely recognised that wherever accessibility to EGMs is increased, there is always a risk of an increase in gambling-related harms.[86] Due to their high prevalence, EGMs have the highest population impact, accounting for more than a third (37.7 per cent) of gambling-related harm. The Productivity Commission (2010 p5.1) estimated that people affected by gambling-related harms account for between 22 per cent and 60 per cent (averaged at 41 per cent) of total EGM spending.[87]

This is because EGMs are recognised as posing the greatest risks to existing and potential problem gamblers[88] for the following reasons:

- EGMs are individually one of the four riskiest gambling activities and among the three gambling activities that have the greatest population impact.[89]
- Inbuilt harm minimisation measures in EGMs are of most assistance in preventing gambling-related harms amongst those gambling with least risk. For these groups, these harm minimisation measures can be effective in preventing the development of riskier gambling behaviours i.e. more intense gambling. However, the evidence indicates they are ineffective amongst those at risk, especially higher risk.[90]
- Around 80 per cent of presentations to counselling agencies relate to problems associated with EGMs.[91]
- For each additional EGM introduced into an area, there will be an increase of between 0.6 and 1 'problem gamblers', with an average of 0.8 problem gamblers per EGM[92].
- Each person with gambling problems has 5 to 10 people in their lives who are affected by their gambling.[93]
- Postcodes with no EGMs are associated with 20 per cent few family incidents per 10,000 and 30 per cent few domestic violence assaults per 10,000 compared with postcodes with 75 electronic EGMs per 10,000.[94]

It is becoming increasingly recognised that gambling-related harms have direct impacts on the person who gambles and indirect impacts on others including their families, friends and the wider community. Research found that a person experiencing 'problem gambling' can affect up to six other people around them, moderate-reis gambling up to three others and low-risk gambling up to one other.[95] Close family members including partners and children were most often identified as the person impact by others' gambling.[96]

[86] Commission Decision, Croydon Hotel, paragraph 90; Commission Decision, Dromana Hotel, paragraph 59, Commission Decision, Mornington on Tanti, paragraph 94, Commission Decision, Zagame's Berwick, paragraph 53
[87] Productivity Commission (2010)
[88] Australian Government Productivity Commission (2010) *Productivity Community Inquiry Report, Gambling* p5.22
[89] Rockloff, M, Browne, M, Hing, N, Thorne, H, Russell, A, Greer, N, Tran, K, Brook, K & Sproston, K 2020, *Victorian population gambling and health study 2018–2019*, Victorian Responsible Gambling Foundation, Melbourne.
[90] Andrew Harris & Mark D. Griffiths, 2017, A Critical Review of the Harm-Minimisation Tools Available for Electronic Gambling, *Journal of Gambling Studies*, March Vol.33 Issue 1 pp.187-221
[91] Australian Government Productivity Commission (2010) *Productivity Community Inquiry Report, Gambling* p5.26
[92] Storer, J, Abbot, M and Stubbs, J (2009)'Access or adaptation? A meta-analysis of surveys of problem gambling prevalence in Australian and New Zealand with respect to concentration of electronic gaming machines' *International Gambling Studies* Volume. 9, No. 3, December 2009, p238
[93] Victorian Responsible Gambling Foundation (2013) *The Responsible Gambling Guide*
[94] Markham, F, Doran, B & Young, M 2016, '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, vol. 162, pp. 106–14.
[95] Australian Institute of Health and Welfare 2021 *Gambling in Australia*
[96] Australian Institute of Health and Welfare 2021 *Gambling in Australia*

4.4 Determinants of gambling-related harm

Protective factors have the potential to prevent or minimise gambling-related harms while risk factors have the potential to increase the risk or exacerbate existing levels of gambling-related harms.

4.4.1 General protective and risk factors

People at risk of gambling-related harm are more likely to:

- Be male (1 per cent of Victorian men compared with 0.5 per cent of women)
- Be 35 to 54 years old (1.1 per cent of compared with 0.7 per cent of all Victorians)
- Have a personal annual income in the $20,800 to $42,599[97] range (1.3 per cent compared with 0.7 per cent overall).
- Aboriginal and Torres Strait Islanders.
- Participate in for our more gambling activities (54.8 per cent compared with 14.8 per cent of all gamblers).

The prevalence of women's participation in gambling is steadily increasing[98] due to factors such as the increased accessibility of online gambling and social factors such as boredom and loneliness.[99] The risk of gambling harm is therefore increasing among women.

People classified as 'moderate risk gamblers' have similar profiles but are more likely to be younger and fall in the 18-24 year old age group.

4.4.2 Electronic gaming machines

Table 8 summarises the protective and risk factors specific to gaming venues and EGMs.

[97] $400 to $799 weekly, $800 to $1,599 fortnightly
[98] Hing, N. and Breen, H. (2001) "An empirical study of sex differences in gaming machine play among club members" *International Gambling Studies* Vol 1, pp 1-8
[99] McCarthy, S, Thomas, S, Bellringer, M and Cassidy, R (2019) *Harm Reduction Journal* Women and gambling-related harm: a narrative literature review and implications for research, policy, and practice 16.18

Table 8 – Protective and risk factors for EGMs

Protective factor	Risk factor
Proposal type	
Top up of EGMs in an existing venue. Closure of a gaming venue. Availability of non-gambling sport, leisure, social and entertainment activities. [100] [101]	New gaming venue. Increase in the size of the gaming room or space allocated to gambling. Medium to large venue (above 60 EGMs).[102, 103, 104, 105, 106, 107] Hotel (rather than a club).[108]
Venue design	
Design that requires patrons to pass through non-gambling activities. Screening of gaming room from inside and outside the venue. Facilities which encourage a break of play.	Entrances to gaming room which reduce surveillance.
Venue operations and harm minimisation	
Presence of highly trained staff.	Operating hours (trade after 2am, less than 6 hours continuous closure).
Locational features	
Availability of non-gambling activities in the surrounding area that operate at the same time as the gaming room.	Functional and visual integration with services and facilities associated with people's day to day activities. Proximity to services used by people affected by gambling-related harm.
Health and community profile	
	Proximity to groups at an elevated risk of gambling-related harm (refer to Section 4.4.2)

[100] Leino, T. et al (2017) 'Gambling behavior in alcohol-serving and non-alcohol-serving-venues: a study of electronic gaming machine players using account records' *Addiction Research & Theory* 25.:3, 201-297
[101] Hing, N. and Haw, J (2010) *The Influence of Venue Characteristics on a Player's Decision to Attend a Gambling Venue* Centre for Gambling Education and Research
[102] Hing, N. and Haw, J (2010) *The Influence of Venue Characteristics on a Player's Decision to Attend a Gambling Venue* Centre for Gambling Education and Research
[103] Rockloff, M (2010) *The impact of an audience and venue size on poker machine gambling* Central Queensland University Institute of Health and Social Science Research,
[104] McMillen, J and Pitt, S (2005) *Review of the ACT Government's Harm Minimisation Measures* Centre for Gambling Research, ANU
[105] Blaszczynski, A et al (2001) *The Assessment of the Impact of the Reconfiguration on Electronic Gaming Machines as Harm Minimisation Strategies for Problem gambling* University of Sydney Gambling Research Unit p17
[106] Rockloff, M; Greer, N and Evans, L (2012) "The Effect of Mere Presence on Electronic Gaming Machine Gambling" *Journal of Gambling Studies,* October 2012, Issue 27
[107] Leino, T. et al (2017) 'Gambling behavior in alcohol-serving and non-alcohol-serving-venues: a study of electronic gaming machine players using account records' *Addiction Research & Theory* 25.:3, 201-297 https://www.academia.edu/32303619/Leino_T._Sagoe_D._Griffiths_M.D._Mentzoni_R.A._Pallesen_S._and_Molde_H._2017_._Gambling_behavior_in_alcohol-serving_and_non-alcohol-serving_venues_A_study_of_electronic_gaming_machine_players_using_account_records._Addiction_Research_and_Theory_25_201-207
[108] Hing, N. and Haw, J. (2010) *The Influence of Venue Characteristics on a Player's Decision to Attend a Gambling Venue* Gambling Research Australia

Protective factor	Risk factor
	High rates of crime and violence (assaults, criminal offences, family violence).*
	High proportions of people receiving welfare payments.*
	High rates of homelessness.*
	High rates of risky alcohol consumption and smoking.*
	High rates of psychological distress.*

The risk factors marked with an asterisk may also be the effects of gambling-related harm.

People using EGMs are significantly more likely to experience harm than people participating in other forms of gambling (69.3 per cent compared with 20.4 per cent of all gamblers).

EGMs are therefore recognised as posing the greatest risks to gamblers[109] for the following reasons:

- EGMs are individually one of the four riskiest gambling activities and among the three gambling activities that have the greatest population impact.[110]
- Inbuilt harm minimisation measures in EGMs are of most assistance in preventing gambling-related harms amongst those gambling with least risk. For these groups, these harm minimisation measures can be effective in preventing the development of riskier gambling behaviours i.e. more intense gambling. However, the evidence indicates they are ineffective amongst those at risk, especially higher risk.[111]
- Around 80 per cent of presentations to counselling agencies relate to problems associated with EGMs.[112]
- For each additional EGM introduced into an area, there will be an increase of between 0.6 and 1 'problem gamblers', with an average of 0.8 problem gamblers per EGM[113].
- Each person with gambling problems has 5 to 10 people in their lives who are affected by their gambling.[114]
- Postcodes with no EGMs are associated with 20 per cent few family incidents per 10,000 and 30 per cent few domestic violence assaults per 10,000 compared with postcodes with 75 electronic EGMs per 10,000. [115]
- People are more likely to withdraw cash to continue using the EGMs.[116]

[109] Australian Government Productivity Commission (2010) *Productivity Community Inquiry Report, Gambling* p5.22
[110] Rockloff, M, Browne, M, Hing, N, Thorne, H, Russell, A, Greer, N, Tran, K, Brook, K & Sproston, K 2020, *Victorian population gambling and health study 2018–2019*, Victorian Responsible Gambling Foundation, Melbourne.
[111] Andrew Harris & Mark D. Griffiths, 2017, A Critical Review of the Harm-Minimisation Tools Available for Electronic Gambling, *Journal of Gambling Studies*, March Vol.33 Issue 1 pp.187-221
[112] Australian Government Productivity Commission (2010) *Productivity Community Inquiry Report, Gambling* p5.26
[113] Storer, J, Abbot, M and Stubbs, J (2009)'Access or adaptation? A meta-analysis of surveys of problem gambling prevalence in Australian and New Zealand with respect to concentration of electronic gaming machines' *International Gambling Studies* Volume. 9, No. 3, December 2009, p238
[114] Victorian Responsible Gambling Foundation (2013) *The Responsible Gambling Guide*
[115] Markham, F, Doran, B & Young, M 2016, '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, vol. 162, pp. 106–14.
[116] Browne, M., Langham, E., Rawat, V., Greer, N., Li, E., Rose, J., … Best, T. (2016). Assessing gambling- related harm in Victoria: a public health perspective. Victoria Responsible Gambling Foundation, Melbourne.

4.5 Social and economic impacts of gambling

All forms of gambling have the potential to affect the health and wellbeing of individuals and families. Gambling-related harm involves more than losing money or experiencing financial problems. It can also include:[117]

- health problems including emotional, psychological distress or physical issues
- issues with relationships with family or friends
- problems with work or study
- cultural problems
- criminal activity

Table 9 summarises the potential social and economic impacts (benefits and disbenefits) associated gambling. Impacts marked with an asterisk are relevant to using EGMs.

Table 9 - Summary of potential social and economic impacts of EGM gambling

Social	Economic
Potential benefits[118]	
Access to entertainment for those not affected by harm. Cash and in-kind community contribution (social capital).* Access to social, leisure, entertainment and recreation facilities.	Cash and in-kind community contribution (additional source of revenue for recipients).* Employment. Source of revenue for operators. Economic stimulus (investment, supply contracts and complementary expenditure). Competition (improved competition). Tourism. Expenditure for people not affected by gambling-related harms.
Potential disbenefits[119]	
Impact on people directly and indirectly affected by gambling-related harm such as relationship breakdown, mental and physical illness, crime, family violence.	Competition (transfer of revenue from EGMs, food and beverages).* Cost of service provision. Financial hardship. Unemployment.

[117] Gambling | Department of Social Services, Australian Government (dss.gov.au)
[118] Adapted from Productivity Commission (2010) and VCGLR application forms
[119] Adapted from VCEC Inquiry into Costs of Problem Gambling (2012), VCGLR forms and independent research

4.6 Vulnerability to the impacts of gambling-related harm

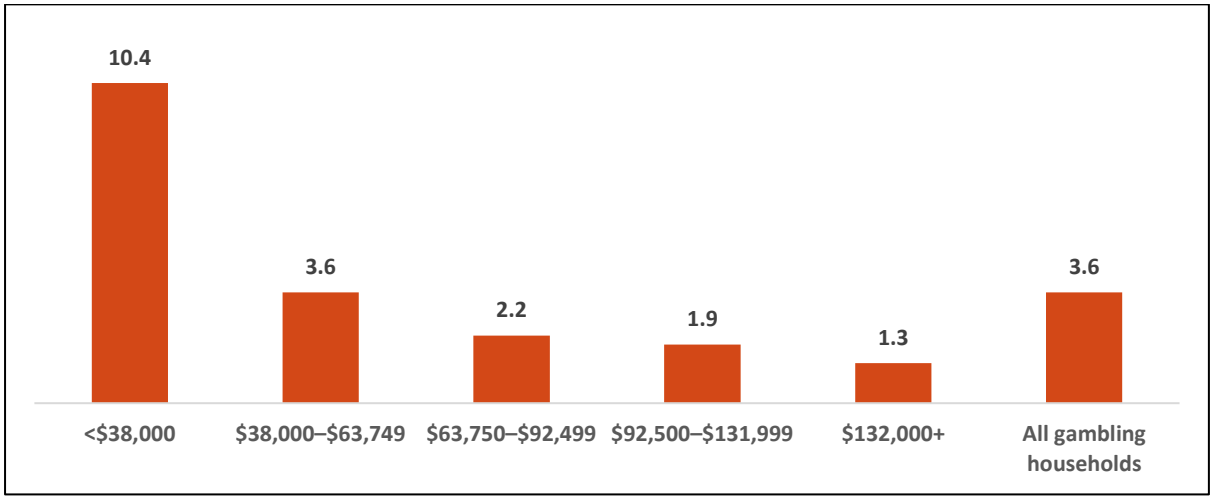
4.6.1 General determinants of vulnerability

While some people are at risk of harm from gambling, the following groups are more vulnerable to the impacts of this harm:

- High level of socio-economic disadvantage
- Low income households (earning less than $800 per week)
- Households with rental stress (%)
- Households with mortgage stress (%)
- Unemployment rate (%)
- Personal annual income $20,800 to $41,599
- Did voluntary work (%)
- Rent social housing (%)
- Aboriginal and Torres Strait Islanders (%)
- Low proficiency in English
- Below Year 11 Schooling
- Speak a language other than English at home

Research[120] has found the lower a household's income, the greater proportion of their household disposable income is spent on gambling (refer to Figure 11). Among households in the lowest income quintile, 'problem gamblers' spent on average 27 per cent of their household's disposable income on gambling. This compares with households in the highest income quintile where expenditure on gambling by 'problem gamblers' was 4 per cent of household income.

Figure 11 – Proportion of gambling households' disposable income spent on gambling, by income quintile



Source: Armstrong, A and Carroll, M 2017 *Gambling activity in Australia. Findings from wave 15 of the Household, Income and labour Dynamics in Australia (HILDA) Survey* Australian Institute of Family Studies

[120]Armstrong, A and Carroll, M 2017 *Gambling activity in Australia. Findings from wave 15 of the Household, Income and labour Dynamics in Australia (HILDA) Survey* Australian Institute of Family Studies

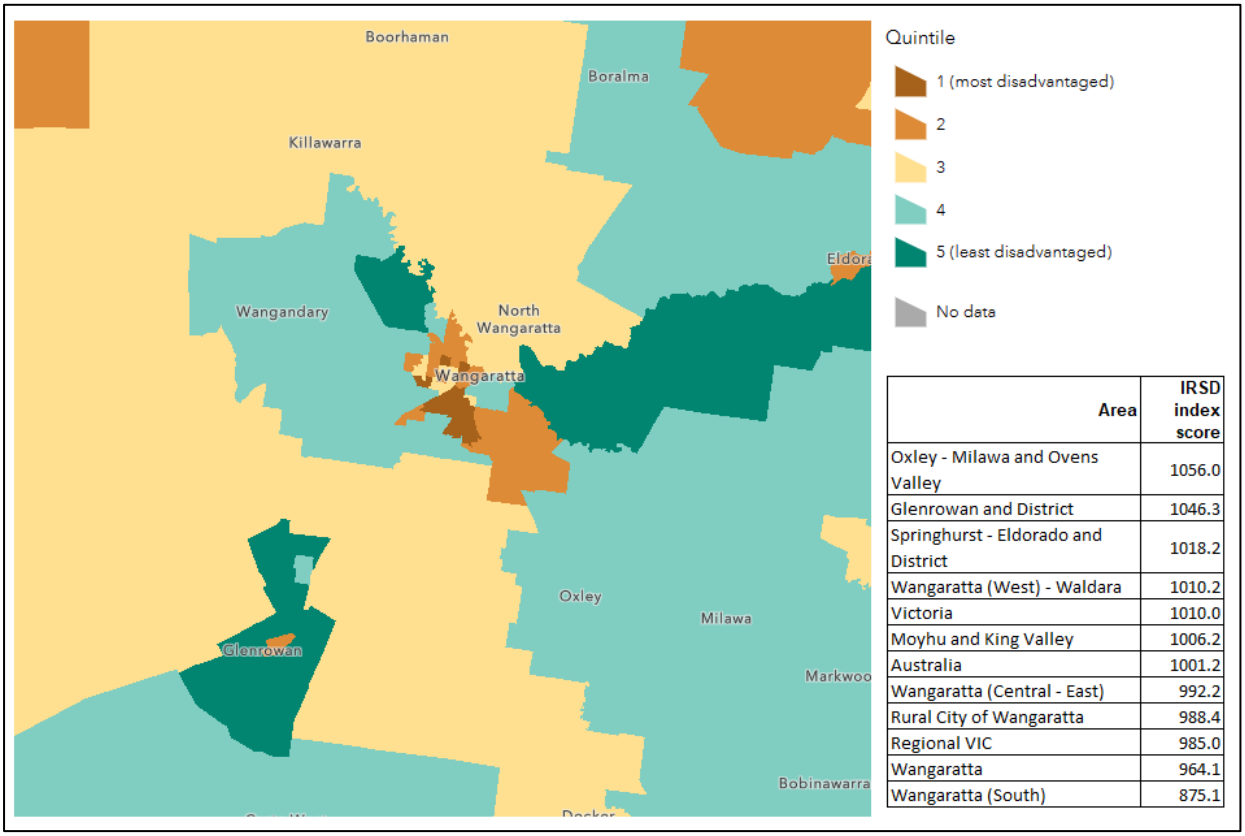
4.6.2 Vulnerability to gambling-related harm in the Rural City of Wangaratta

Socio-economic disadvantage is one of the determinants of gambling-related harm.

The municipality has a higher level of socio-economic disadvantage than Victoria (refer to Figure 12).

The most disadvantaged areas in the municipality are Wangaratta and Wangaratta (South). Refer to Figure 12.

Figure 12 – SEIFA Score of Relative Socio-economic Disadvantage, 2021



Area	IRSD index score
Oxley - Milawa and Ovens Valley	1056.0
Glenrowan and District	1046.3
Springhurst - Eldorado and District	1018.2
Wangaratta (West) - Waldara	1010.2
Victoria	1010.0
Moyhu and King Valley	1006.2
Australia	1001.2
Wangaratta (Central - East)	992.2
Rural City of Wangaratta	988.4
Regional VIC	985.0
Wangaratta	964.1
Wangaratta (South)	875.1

Source: .id consulting and ABS Census of Population and Housing 2021

Appendix 2 describes the municipality's socio-economic indicators of gambling-related harm.

Compared with regional Victoria, the City of Wangaratta is:[121]

- Older with a higher median age (45 and 43 respectively).
- Less culturally diverse with a lower proportion of Aboriginal and Torres Strait Islander people (1.9 per cent and 2.1 per cent respectively), proportion of people speaking a language other than English (5.2 per cent and 7.1 per cent respectively) and people not fluent in English (0.6 per cent and 1.1 per cent respectively).
- Less socio-economically disadvantaged with a SEIFA score of relative socio-economic disadvantage of 988.4 compared to 985, a lower unemployment rate (2.9 percent and 4.1 per cent respectively).
- Less healthy with a higher proportion of people with a long term health condition (39.2 per cent and 37.2 per cent respectively) and people who need help due to a disability (7.4 per cent and 6.9 per cent respectively).

[121] .id consulting

5 Towards the Wangaratta Gambling Policy and Action Plan

This section provides a review of several social policies to provide insight into the scope of these social policies, Council's policy positions, and the scope of the strategies and actions which reflect local government's roles in protecting the community from gambling-related harm.

It also describes how the most recent policies are framed to ensure they align with current research and the regulatory and decision-making framework within which the *Wangaratta Gambling Policy and Action Plan* will be implemented.

The section is introduced with feedback from key stakeholders on the role they feel Council should play in protecting the community from gambling-related harm (refer to Appendix 3).

5.1 Stakeholder engagement and community consultation

The majority (n=10) of stakeholders felt Council should not support any EGM applications, with one feeling Council should consider the application on its own merits.

The stakeholders felt strong that Council should not support the following in any circumstances:

- Advertising of gambling in Council owned facilities.
- Allowing access to online gambling sites on Council internet.

Stakeholders felt Council should support the following under certain circumstances:

- New EGM applications.
- Council holding events at venues with EGMs.
- Council accepting financial contributions from the gambling industry.
- Community group or club raffles.
- Clubs using Council facilities accepting sponsorship and financial contributions from organisations with EGMs

There was strong support for Council to be involved in the following:

- Ending clubs' financial dependence on the gambling industry.
- Facilitating and supporting the provision of gambling-free activities that enhance community connections.

There was also some support for Council to be involved in:

- Supporting services providing help to those experiencing harm.
- Providing community education about the harms related to gambling.
- Providing grants to clubs supported by the gambling industry.

5.2 Benchmarking

The following discussion is based on a review of several relevant social policies prepared by Victorian councils.

5.2.1 Purpose of social policies

The purposes of social policies are to:

- Provide a 'whole-of-organisation' approach to addressing gambling-related harm in their community and upholding the community's health and wellbeing.
- Transparently articulate Council's roles and responsibilities, and position on gambling.
- Demonstrate councils' commitments to addressing gambling harm.

While some policies include 'demonstrating leadership' in specific areas such as managing gambling on council owned and managed land, others indicate their intention to demonstrate leadership in all actions included in the policy, particularly in relation to mitigating the negative impacts of gambling and EGMs on local communities.

5.2.2 Scope

The scope of the policies reviewed varies from focussing on EGMs to covering gambling in general. The rationale underpinning policies focussing on EGMs is that this is the form of gambling over which Council has greatest control under the *Gambling Regulation Act 2003* and *Planning and Environment Act 1987*. Other reasons are that, based on scientific research, EGMs are the form of gambling associated with the greatest harm to individuals, their families and the broader community.

The rationale underpinning policies covering all forms of gambling is that councils have a statutory responsibility to protect and enhance the community's health and wellbeing under two additional statutory instruments, namely the *Local Government Act 2020* and the *Public Health and Wellbeing Act 2008.*

In general the scope covered all councils' roles, including those relating specifically to land use planning and the assessment of applications for planning permits.

5.2.3 Council's policy positions

Appendix 4 provides details of the different policy positions underpinning the social policies reviewed as part of the benchmarking process.

In general the policy positions include the following statements and commitments:

- Acknowledgement gambling is a legal form of entertainment.
- Acknowledgement gambling is associated with some benefits.
- Statement of concern with harms caused by gambling to the individual, their families and the community.
- Statement identifying council's statutory responsibility for and commitment to preventing and minimising harm from gambling within the framework of a public health approach. Some policies describe their various roles which are broadly advocacy, collaboration and partnerships, advocacy and planning and regulation.

Some councils include a position on how they intend to manage gambling on land it owns or manages, and their intent to remain independent of the gambling industry.

5.3 Principles for a strong and defensible policy and action plan

The following principles may assist in formulating a strong and defensible policy and action plan:

1. Ensure the strategies and actions fall within the scope of Council's statutory roles and responsibilities.
2. Align the strategies and actions with the public health approach.
3. Ensure the actions align with Council's resource capabilities.
4. Ensure the strategies and actions are supported by a strong evidence base.
5. Protect those most at risk of gambling-related harm.
6. Apply a gender lens to the development, implementation and monitoring of the policy and action plan by:
    - Ensuring language is gender neutral and inclusive.
    - Engaging with diverse groups during the development and review of the policy and action plan.
    - Applying a strong evidence base to understand the specific behaviours, determinants and impacts of gambling
    - Ensuring policies and strategies apply a gender lens, particularly when it comes to capacity building and increasing access to services.
7. Maximise opportunities for the community, gambling industry and stakeholders to inform the decision-making process.

5.4 Framing key components of the policy

5.4.1 Framing Council's policy position

The framing of Council's policy position on gambling is challenging as it needs to address inherent tensions between its statutory roles and policies in the planning scheme. One of the objectives of the *Gambling Regulation Act 2003* is to minimise (as opposed to prevent) harm.

The VGCCC's new harm minimisation statement acknowledges the need act upon the residual risk of harm associated with any gambling and prevent harm by acting immediately and decisively whenever there is evidence of harm.[122]

It has released a harm minimisation position statement, which makes the following observations:

- A possibility of harm remains whenever someone is gambling.
- Disregarding the possibility of harm is equivalent to disregarding harm.
- Preventing harm means acting immediately and decisively whenever there are signs of harm or possible harm.

This suggests the principle underpinning the *Gambling Regulation Act 2003* is that the community is expected to accept some level of harm but also that efforts should be made to prevent harm where possible.

The principles underpinning the local government decision-making and statutory framework is that local government is mandated to uphold and secure optimal public health and wellbeing, with net

[122] Our position on harm minimisation | Victorian Gambling and Casino Control Commission (vgccc.vic.gov.au)

community benefit being one of the purposes of integrated decision-making.[123] This is supported[124] by a shift away from making decisions that just seek to minimise harm from gambling towards those that prevent harm from occurring in the first place.

A further tension arises in the planning scheme between the principle to minimise the opportunity for convenience gambling underpinning Clause 52.28 Gaming and the policy imperative to locate gaming venues in activity centres. This policy tension can be addressed in the schedule to Clause 52.28 Gaming which provides Council with the opportunity to identify appropriate locations and appropriate venues for EGMs, both of which facilitate discretionary decision-making.

For Council's policy position to underpin a strong defensible policy and action plan that is defensible before the Tribunal and Gaming Commission, it needs to acknowledge these tensions while at the same time being clear its ultimate responsibility and objective is to protect and uphold the community's wellbeing. This can be achieved by:

- Expressing concern with the harmful impacts of gambling on the community
- Acknowledging gambling is a legal activity that has some recognised social and economic benefits.
- Expressing Council's intention to protect those most vulnerable to the harmful impacts of gambling.
- Seeking to both minimise potential harm and maximise any potential benefits.

The policy position also needs to be balanced and transparent to support a robust and consistent decision-making process. It also has to be flexible enough to support discretionary decision-making and represent the views of all sectors of its community, including the gambling industry.

5.4.2 Framing the strategies and actions

Appendix 4 provides a summary of the strategies and actions included in other local governments' gambling policies and action plans.

Two different approaches are taken in the strategies and actions plans, one being the enabling or incentive approach and the other being the prohibitive or disincentive approach.

The enabling approach is typically given greater weight by the Victorian Civil and Administrative Tribunal (the Tribunal) and the Victorian Gambling and Casino Control Commission (the Commission). This is because it aligns with gambling being a legal and legitimate form of entertainment and recreation under the *Gambling Regulation Act 2003*. It also aligns with the principles underpinning the objectives in the *Planning and Environment Act 1987* which are to encourage positive actions by responsible authorities and planning authorities by facilitating development which balances the interests of all Victorians and achieves the fair development of land.

Most policies therefore adopt the enabling or incentive approach while some incorporate a mixture of both approaches in order to strengthen their capacity to protect those most at risk of gambling harm.

Examples of statements and strategies for both models are detailed in Table 10:

[123] Clause 71.02-3 Wangaratta Planning Scheme
[124] Presentation by Professor Samantha Thomas and Dr Jonathan Hallet to the Local Government Working Group on Gambling, April 2023

Table 10 – Approaches to framing the strategies and action plans

Enabling and incentive approach	Prohibitive or disincentive approach	Balanced approach
Policy position and intent		
Support public health and wellbeing (Maribyrnong) Protect and grow the prosperity of the City (Maribyrnong) Support entities wishing to divest themselves of EGMs and reduce reliance on the revenue received from EGMs.	Limit the prominence of gaming as a form of entertainment (City of Melbourne) Achieve a reduction in EGMs and other gambling-related issues (Knox) Make the municipality free of the harm associated with EGMs (Darebin) Not permit gambling advertising or activities (with some exceptions) on council owned or managed land and facilities. Not provide or reduce financial or other support for entities who receive financial or in-kind support from venues (Darebin). Not promote community grants or initiatives offered by gambling venues (Darebin). Not accept financial contributions from gambling venues.	Balance right to undertake legal revenue-generating activity with the overarching need to promote community health and wellbeing. Recognised gambling harm can be experienced by individuals, their loved ones and the wider community. (Geelong) Gambling is considered within the context of public health and consumer protection (Geelong) Protect those most at risk of harm by reducing or limiting density and number of EGMs (Bass Coast and Darebin)
Language and tone		
facilitate, support, promote, encourage/discourage.	prohibit, reduce, limit, remove, oppose, object	Oppose or object where there is evidence the social and economic impact will be detrimental.
Focus		
Maximising benefits	Minimising harms	Protect those most at risk of harm

5.5 Collaboration with stakeholders

The preparation and implementation of the *Wangaratta Gambling Policy and Action Plan* will require collaboration with a range of stakeholders from peak bodies, government, industry, community and service providers. These include the following (refer to Table 11):

Table 11 - Stakeholders

Stakeholder	Details	Involvement
Council	Planning, Enforcement, Community Services, Economic Development	Input into draft policy and action plan. Referral of applications for gaming licences and/or planning permits.
Peak bodies	Victorian Local Governance Association (VLGA), which auspices the Local Government Working Group on Gambling (LGWGOG) Municipal Association of Victoria (MAV) Victorian Responsible Gambling Foundation (VRGF)	Participation on working groups. Feedback on draft policy and action plan.
Government	Adjoining municipalities (Rural City of Benalla, and Shires of Mansfield, Alpine, Indigo and Moira) Victorian Gambling and Casino Control Commission Eastern Regional Councils	Collaborate on joint research activities and advocacy submissions. referral of applications for gaming licences and/or planning permits.
Industry	Australian Leisure and Hospitality (ALH) which operates the Manhattan Hotel Community Clubs Victoria (CCV)	Feedback on draft policy and action plan. Opportunities to reduce reliance on revenue from gambling. Opportunities to increase non-gambling activities.
Community	People who live, work, study and visit the Rural City of Wangaratta	Notification of applications for gaming licences and/or planning permits. Feedback on draft policy and action plan.
Community organisations	Sporting clubs Social and leisure groups such as U3A, Probus	Opportunities to increase non-gambling activities. Organisation of social outings at non-gambling venues.
Service providers	Gateway Health Centre Against Violence Victoria Police	Collaborate on joint research activities and advocacy submissions.

Stakeholder	Details	Involvement
	Neighbourhood Houses Victorian Aboriginal Childcare Agency The Centre/Sport North East Northeast Health Wangaratta Upper Murray Family Care Anglicare Victoria (loaves and fishes) LINE Wangaratta	Feedback on draft policy and action plan. Partnerships in information and awareness campaigns.

6 Conclusion and next steps

6.1 Conclusion

The research has found existing and emerging gambling behaviours, including online gambling and the use of EGMs, have the potential to result in gambling-related harms, particularly among groups at an elevated risk of gambling-related harms.

Council has statutory responsibilities to protect the community from harm caused by gambling. Its key influence on gambling within the municipality is on managing the location and operation of EGMs through its planning and regulatory roles. Council also has the capacity to protect the community from gambling related harms through other roles including advocating to the government to reduce the risks associated with gambling, collaborating with stakeholders to increase access to support services and building the community's capacity to engage in healthy lifestyle choices.

A strong, evidence based gambling policy and action plan, which is underpinned by a balanced policy position and comprehensive suite of objectives, strategies and actions can guide Council in fulfilling these statutory roles. This policy position can also guide Council's relationship with the gambling industry, and how it manages gambling activities and advertising on land it owns and/or manages.

6.2 Next steps

It is recommended Council commence drafting the new *Gambling Policy and Action Plan*, in collaboration with the stakeholders.

Appendix 1 – Bibliography

Alliance For Gambling Reform – Position Paper *A mandatory Registered Cashless Gambling Card System to Address gambling harm and criminal gaming activity* January 2023

Andrew Harris & Mark D. Griffiths, 2017, A Critical Review of the Harm-Minimisation Tools Available for Electronic Gambling, *Journal of Gambling Studies*, March Vol.33 Issue 1 pp.187-221

Armstrong, A and Carroll, M 2017 *Gambling activity in Australia. Findings from wave 15 of the Household, Income and labour Dynamics in Australia (HILDA) Survey* Australian Institute of Family Studies

Australian Gambling Statistics 37th edition

Australian Government Productivity Commission (2010) *Productivity Community Inquiry Report, Gambling*

Australian Institute of Health and Welfare 2021 *Gambling in Australia*

Blaszczynski, A et al (2001) *The Assessment of the Impact of the Reconfiguration on Electronic Gaming Machines as Harm Minimisation Strategies for Problem gambling* University of Sydney Gambling Research Unit

Brett Hetherington and Tony Phillips 2023, *Discussion paper: Gambling harm and the online gambling environment*, Victorian Responsible Gambling Foundation, Melbourne

Browne, M, Greer, N, Armstrong, T, Doran, C, Kinchin, I, Langham, E & Rockloff, M 2017, *The social cost of gambling to Victoria*, Victorian Responsible Gambling Foundation, Melbourne.

Browne, M., Langham, E., Rawat, V., Greer, N., Li, E., Rose, J., … Best, T. (2016). Assessing gambling-related harm in Victoria: a public health perspective. Victoria Responsible Gambling Foundation, Melbourne.

Hetherington, B and Phillips, T (2023) *Gambling Harm and the Online Gambling Environment* Victorian Responsible Gambling Foundation

Hing, N et al (2022) *NSW Youth Gambling Study 2022: Qualitative Research* NSW Government

Hing, N. and Breen, H. (2001) "An empirical study of sex differences in gaming machine play among club members" *International Gambling Studies* Vol 1, pp 1-8

Hing, N. and Haw, J (2010) *The Influence of Venue Characteristics on a Player's Decision to Attend a Gambling Venue* Centre for Gambling Education and Research

Hing, N., O'Mullan, C., Nuske, E., Breen, H., Mainey, L., Taylor, A., … Rawat, V. (2020). *The relationship between gambling and intimate partner violence against women* (Research report, 21/2020). Sydney: ANROWS.

Jenkinson, R et al (2020) *Gambling in Australia during COVID-19* Australian Gambling Research Centre

Leino, T. et al (2017) 'Gambling behavior in alcohol-serving and non-alcohol-serving-venues: a study of electronic gaming machine players using account records' *Addiction Research & Theory* 25.:3, 201-297

Li, E., Browne, M., Rawat, V., Langham, E., & Rockloff, M. (2016). Breaking Bad: Comparing Gambling Harms Among Gamblers and Affected Others. Journal of Gambling Studies, 33(1), 223–248. https://doi.org/10.1007/S10899-016-9632-8

Markham, F, Doran, B & Young, M (2016), '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, vol. 162, pp. 106–14.

McCarthy, S, Thomas, S, Bellringer, M and Cassidy, R (2019) *Harm Reduction Journal* Women and gambling-related harm: a narrative literature review and implications for research, policy, and practice 16.18

McCarthy, S, Thomas, S, Bellringer, M and Cassidy, R (2019) *Harm Reduction Journal* Women and gambling-related harm: a narrative literature review and implications for research, policy, and practice 16.18

McMillen, J and Pitt, S (2005) *Review of the ACT Government's Harm Minimisation Measures* Centre for Gambling Research, ANU

Productivity Commission Report Into Gambling (2010)

Rachel Bush, Alex M. T. Russell, Andrea Waling, Petra K. Staiger, and Nicki A. Dowling 2021, Examining risk and protective factors for the development of gambling-related harms and problems in Victorian LGBTIQ+ communities, Melbourne.

Rockloff, M (2010) *The impact of an audience and venue size on poker machine gambling* Central Queensland University Institute of Health and Social Science Research,

Rockloff, M, Browne, M, Hing, N, Thorne, H, Russell, A, Greer, N, Tran, K, Brook, K & Sproston, K 2020, *Victorian population gambling and health study 2018–2019*, Victorian Responsible Gambling Foundation, Melbourne.

Storer, J, Abbot, M and Stubbs, J (2009)'Access or adaptation? A meta-analysis of surveys of problem gambling prevalence in Australian and New Zealand with respect to concentration of electronic gaming machines' *International Gambling Studies* Volume. 9, No. 3, December 2009, p238

Thomas, S et al (2023) *Health Promotion International* 'Protecting children and young people form contemporary marketing for gambling' Volume 38 pp1-14

Thomas, S, Pitt, H, Randle, M, McCarthy, S, Daube, M, Bestman, A & de Moel, C 2020, Australian young women's gambling behaviours: A socio-cultural investigation of gambling attitudes, beliefs, and consumption intentions, Victorian Responsible Gambling Foundation, Melbourne.

Thomas, S.L., Crawford, G., Daube, M., Pitt, H., Hallett, J., McCarthy, S., Francis, L. and Edmunds, M. (2023), Time for policies on gambling to benefit health - not the gambling industry. Health Promot J Austral, 34: 267-271. https://doi.org/10.1002/hpja.721

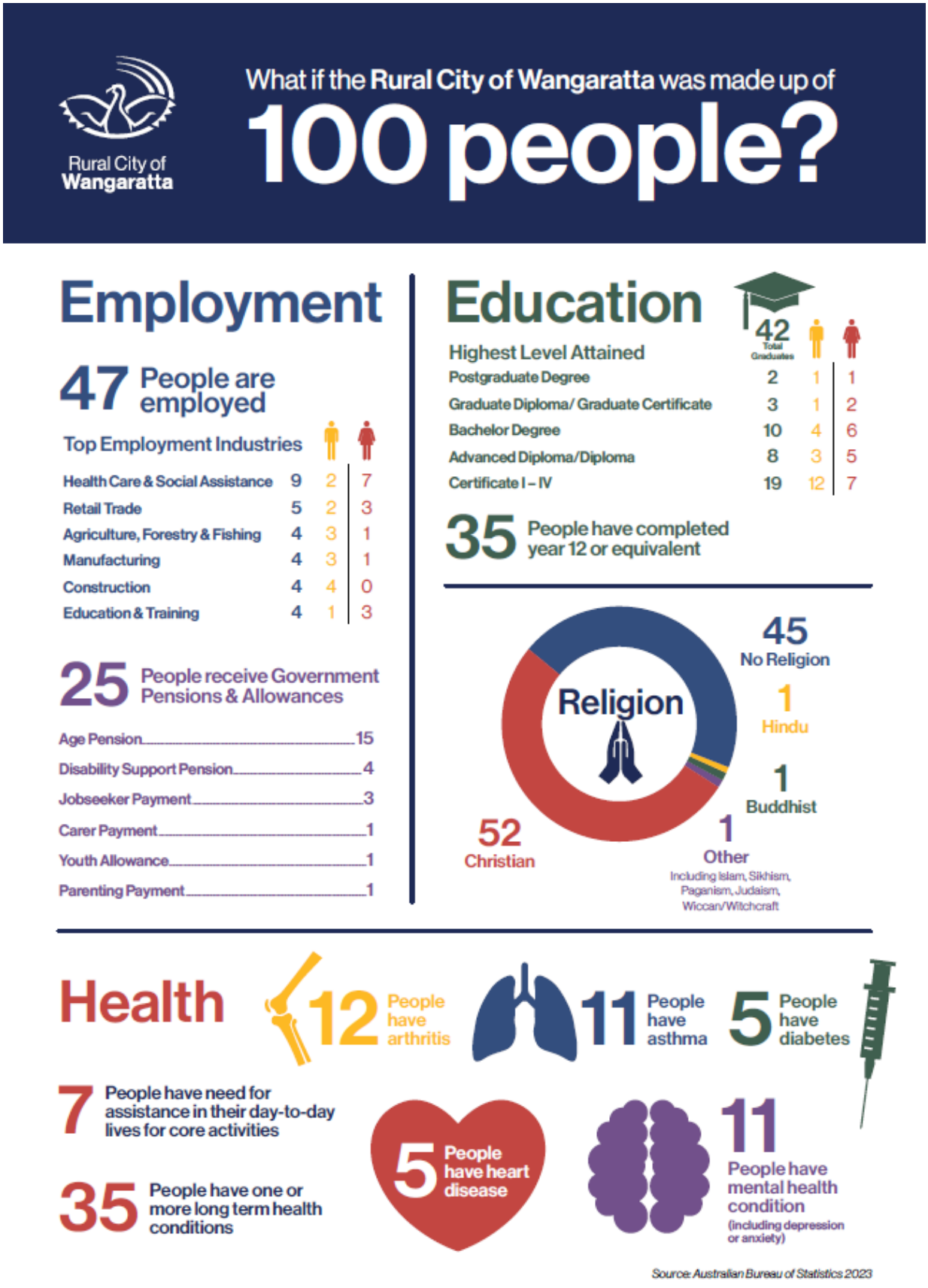
VicHealth Coronavirus Victorian Wellbeing Impact Study: Follow-up survey (2020), Victorian Health Promotion Foundation, Melbourne https://doi.org/10.37309/2020.PO1011

Victorian Responsible Gambling Foundation (2013) *The Responsible Gambling Guide*

Appendix 2 - Socio-economic and health profile[125]



[125] https://profile.id.com.au/wangaratta
https://www.abs.gov.au/census/find-census-data/quickstats/2021/LGA26700
https://www.abs.gov.au/census/find-census-data/quickstats/2021/IQSLGA26700
https://www.abs.gov.au/census/find-census-data/community-profiles/2021/LGA26700
https://data.gov.au/data/dataset/dss-payments-by-2020-local-government-area
Victorian Population Health Survey 2020 | health.vic.gov.au


Rural City of Wangaratta
What if the Rural City of Wangaratta was made up of
100 people?
Employment
47 People are employed
Top Employment Industries
Health Care & Social Assistance 9 2 7
Retail Trade 5 2 3
Agriculture, Forestry & Fishing 4 3 1
Manufacturing 4 3 1
Construction 4 4 0
Education & Training 4 1 3
25 People receive Government Pensions & Allowances
Age Pension 15
Disability Support Pension 4
Jobseeker Payment 3
Carer Payment 1
Youth Allowance 1
Parenting Payment 1
Education
42 Total Graduates
Highest Level Attained
Postgraduate Degree 2 1 1
Graduate Diploma/ Graduate Certificate 3 1 2
Bachelor Degree 10 4 6
Advanced Diploma/Diploma 8 3 5
Certificate I – IV 19 12 7
35 People have completed year 12 or equivalent
Religion
45 No Religion
1 Hindu
1 Buddhist
52 Christian
1 Other
Including Islam, Sikhism, Paganism, Judaism, Wiccan/Witchcraft
Health
12 People have arthritis
11 People have asthma
5 People have diabetes
7 People have need for assistance in their day-to-day lives for core activities
35 People have one or more long term health conditions
5 People have heart disease
11 People have mental health condition (including depression or anxiety)
Source: Australian Bureau of Statistics 2023

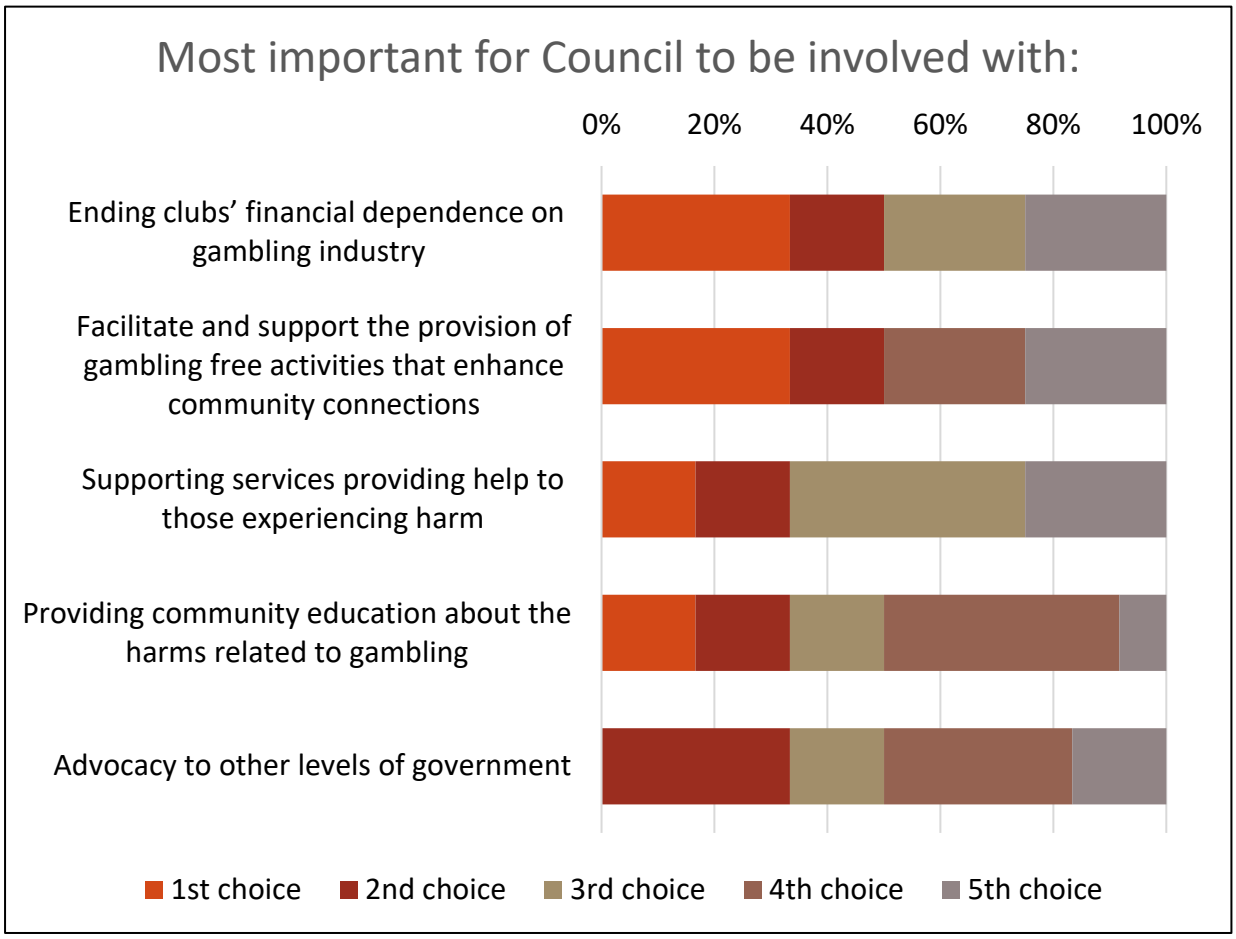
Crime and safety

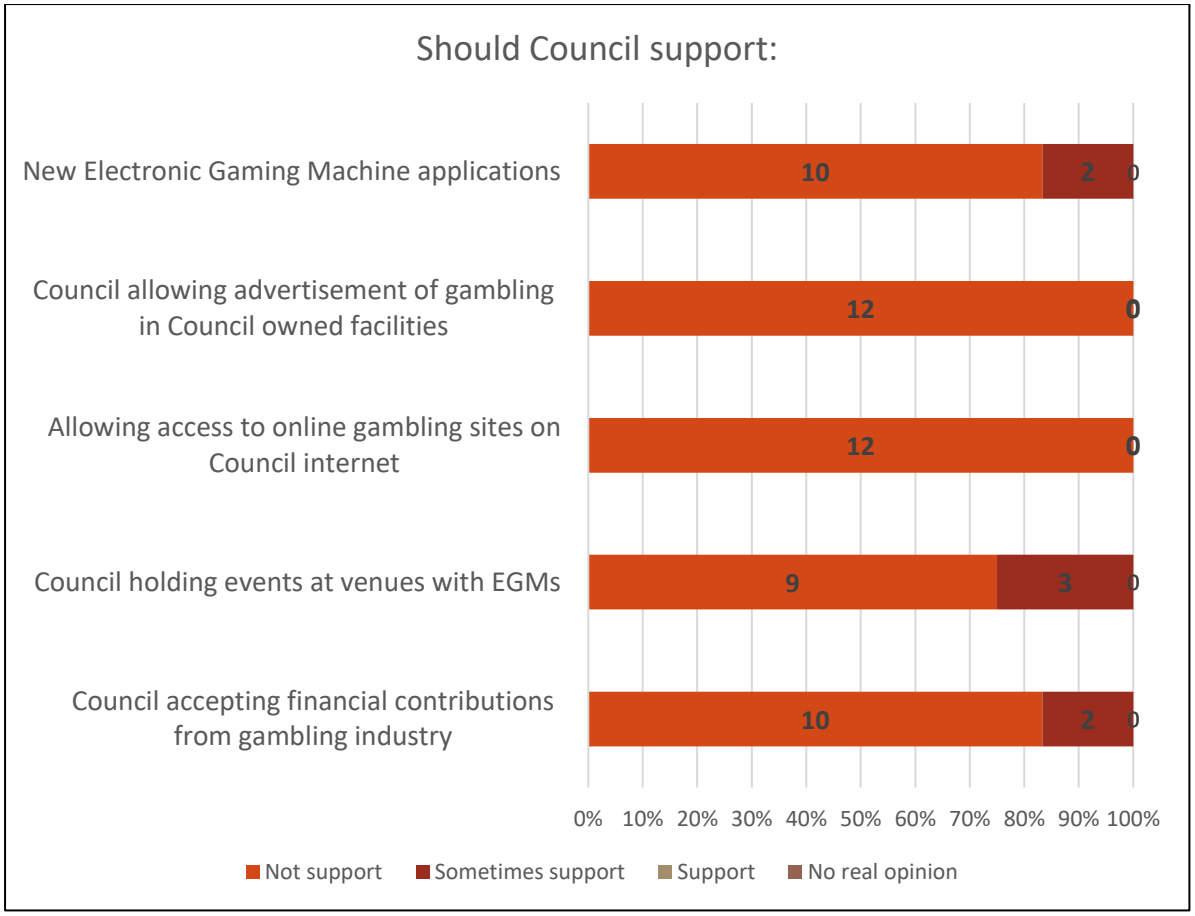
	2019		2023			
	Family Incidents	Rate per 100,000 population	Family Incidents	Rate per 100,000 population	% change family incidents 2019-2023	% change rate family incidents per 100,000 2019-2023
Wangaratta	441	1,499.8	619	2,054.1	40.4	37.0
Alpine	136	1,055.6	153	1,155.5	12.5	9.5
Benalla	305	2,145.0	421	2,891.3	38.0	34.8
Latrobe	2,650	3,485.6	2,629	3,360.9	-0.8	-3.6
Wodonga	817	1,943.9	1,023	2,310.3	25.2	18.8
Eastern Region	20,913	1,222.2	24,877	1,432.3	19.0	17.2
Victoria	81,236	1,243.9	93,091	1,377.7	14.6	10.8

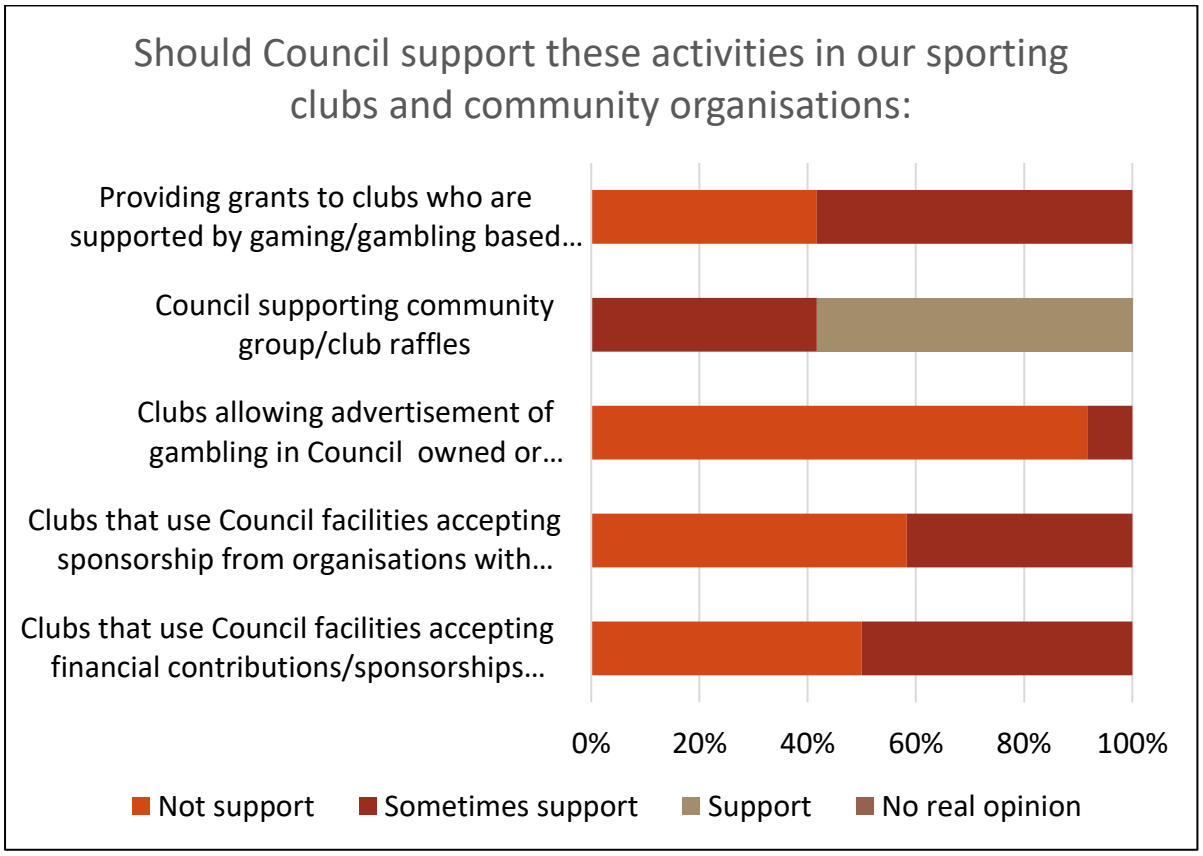
	2019		2023			
	Incidents Recorded	Rate per 100,000 population	Incidents Recorded	Rate per 100,000 pop	% change recorded criminal incidents 2019-2023	% change rate recorded criminal incidents per 100,000 2019-2023
Wangaratta	1,638	5,570.9	1,798	5,966.5	9.8	7.1
Alpine	399	3,096.9	348	2,628.1	-12.8	-15.1
Benalla	877	6,167.8	1,013	6,957.0	15.5	12.8
Latrobe	9,942	13,077.1	8,072	10,319.1	-18.8	-21.1
Wodonga	2,420	5,758.1	2,703	6,104.3	11.7	6.0
Eastern Region	83,454	4,877.1	79,767	4,592.6	-4.4	-5.8
Victoria	385633	5904.8	361140	5344.6	-6.4	-9.5

Appendix 3 - Stakeholder engagement process and outcomes

Partners in the community wellbeing and health spaces were asked to give input to the possible directions and actions Council could take, based on the actions other Councils had in their Gambling Policies. 12 Community partners responded including Gateway Health, Centre Against Violence, Victoria Police, Neighbourhood Houses, Victorian Aboriginal Childcare Agency, The Centre/Sport North East, Northeast Health Wangaratta, Upper Murray Family Care, Anglicare Victoria




Should Council support:
New Electronic Gaming Machine applications
Council allowing advertisement of gambling in Council owned facilities
Allowing access to online gambling sites on Council internet
Council holding events at venues with EGMs
Council accepting financial contributions from gambling industry
10
2
0
12
0
12
0
9
3
0
10
2
0
0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%
Not support
Sometimes support
Support
No real opinion


Should Council support these activities in our sporting clubs and community organisations:
Providing grants to clubs who are supported by gaming/gambling based…
Council supporting community group/club raffles
Clubs allowing advertisement of gambling in Council owned or…
Clubs that use Council facilities accepting sponsorship from organisations with…
Clubs that use Council facilities accepting financial contributions/sponsorships…
0%
20%
40%
60%
80%
100%
Not support
Sometimes support
Support
No real opinion

Appendix 4 – Gambling policies and action plans benchmarking

Concept	Bendigo	Brimbank	Darebin	Banyule	Wyndham	Wellington	Geelong
EGM planning permits	Oppose any planning and licensing application for additional EGMs and the transfer of EGMs within Greater Bendigo where there is reliable evidence that the application will have negative social and economic impacts and minimal community benefit.	Oppose any licensing application for new EGMs, or the transfer of EGMs within the municipality or in neighbouring areas, where evidence indicates the net economic and social impact of the application will be detrimental to the wellbeing of the Brimbank community.	Council will oppose any planning and licensing application for additional EGMs and the transfer of EGMs in the municipality where there is solid evidence that the application will have negative social and economic impacts and minimal community benefit.	All EGM applications will be considered against their ability to demonstrate comparative community benefit. Any increase in EGMs would be of particular concern and will be opposed where a negative impact can be reasonably anticipated.	To ensure Council's local planning policy and process meet best practice in the assessment of EGM applications. This includes Council resourcing representation at VCGLR and VCAT hearings as required.	Any application to Wellington Shire Council for a Planning Permit to install or use EGM's at a new venue or to increase EGM numbers in an existing venue will require the applicant to complete a robust impact assessment of the social and economic benefits and risks of the proposal.	Assess all applications for EGMs against a Social and Economic Impact Assessment (SEIA) guided by the Greater Geelong Gaming Policy Framework and taking into consideration community expectations and/or concerns regarding problem gambling. An associated report and recommendations for response to the VCGLR will be provided to Council and considered at a gazetted Council meeting
Advocacy	Advocating to other levels of government to reduce exposure and opportunity to gamble	Advocate to Federal and State Governments for a safer gambling environment and stronger regulatory reforms to	Advocacy: Council will continue to be recognised as a state wide leader in driving changes to reform those systems and structures that cause gambling-related	Advocate to the State Government on reforms in the gambling landscape. Partner with the local	To partner with community, organisations and alliances to support joint advocacy efforts to reduce gambling harm in Wyndham	Wellington Shire Council will advocate for changes to the Community Benefit Statement requirements that all club venues contribute to Wellington Shire	Partner with local government networks, community organisations and key partners to utilise their expertise in broader advocacy issues, to achieve change and to reform

Concept	Bendigo	Brimbank	Darebin	Banyule	Wyndham	Wellington	Geelong
		prevent and reduce harm. Support advocacy work targeted towards preventing and minimising gambling harm and collaborate with, and contribute to, other local government organisations, local government peak bodies and gambling networks to advocate for reform and develop state-wide advocacy strategies.	harm to the Darebin community.	government networks, and community organisations such as the Alliance for Gambling Reform to utilise their expertise in broader advocacy issues.	and surrounding communities. To advocate for a reduction in the number of EGMs in Wyndham	Council Community Assistance Grant Scheme Wellington Shire Council will advocate to the State government for a reduction in Municipal Cap (currently 318 EGMs). Council will participate with other Councils in state wide and regional forums to exchange information and resources, advocate for gambling reform and collaborate to achieve regional reductions in gaming machines.	the systems and structures that cause gambling-related harm to the Geelong community In the context of reducing and managing the current number of EGMs in Geelong, advocate to the state government for a review of the current EGM cap in Geelong
Ending clubs' financial dependence on gambling industry	Working with organisations, clubs or community groups to minimise their financial dependence on the proceeds of gambling	Work with community groups and sporting clubs to reduce reliance on funding or support received from the gambling industry.	Council will support any Darebin club that wishes to divest themselves of EGMs to develop a transition plan in order that they may continue to access Council facilities and resources and provide a community	Support community based organisations in Banyule that generate some of their income from gambling activity to reduce their reliance on	To promote ongoing dialogue with gambling providers and work with them to reduce their reliance on gambling income.		Support local community-based organisations that generate some of their income from gambling activities, to reduce their reliance on gambling income streams

Concept	Bendigo	Brimbank	Darebin	Banyule	Wyndham	Wellington	Geelong
	Work with community groups and organisations to end financial dependence on gambling sponsorships and revenue.		benefit to their members	gambling income streams.			Support any community or sporting club, group or organisation to divest themselves of EGMs or end financial dependence on gambling sponsorship or revenue. This would be achieved through an agreed transition business plan
Supporting services providing help to those experiencing harm	Supporting organisations that provide services to members of the community who experience harm from gambling Support the allocation or reallocation of community contributions related to gambling to gambler's help or relevant services aimed at reducing harm associated with gambling.			Council will promote the availability of locally accessible support services for gamblers experiencing harm, together with inclusive community support services for citizens adversely affected by gambling. Inform the community on programs and services available to		Wellington Shire Council will support activities of Gamblers Help and other agencies to prevent and reduce gaming related problems	Support and encourage the clubs with EGMs to allocate their gambling-related community contributions to relevant services targeted towards minimising gambling-related harm

Concept	Bendigo	Brimbank	Darebin	Banyule	Wyndham	Wellington	Geelong
				prevent harm from gambling.			
Inform community	Providing community education about the harms related to gambling. Work with the Greater Bendigo community to raise awareness on gambling harm and the negative impacts of gambling and encourage participation in non-gambling related activities. Inform the community of Council's role and actions to address or minimise gambling related harm.	Increase understanding of and take action to prevent and reduce gambling related harm. Inform and educate the community on gambling harm and whereto seek support.		Banyule City Council will also work with local partners and community groups to raise awareness about harm from gambling and promote harm reduction.	To inform community leaders and community groups of electronic gaming activity in the municipality, and its impacts To support and enable community and partner participation in planning decisions concerning gambling activities.		
Community programs	Continue to promote a variety of non-gambling events, activities and programs that encourage residents to lead	Minimise the impact of electronic gambling and promote alternatives that have positive	Council will continue to invest in community infrastructure, community programs and community networks		To and social facilitate and support the provision of gambling free activities that enhance		Invest in community infrastructure, community programs and activities as alternatives to all forms of gambling

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	active and healthy lives.	economic, social and health outcomes. Build and maintain relationships with key strategic partners to develop and implement harm reduction measures. Encourage, resource and promote a range of accessible social, cultural and recreational opportunities as alternatives to gambling	to provide alternatives to gambling.		community connections inclusion.		Resource activities that enhance capacity building including the promotion and support of the many alternate and positive forms of recreation in our community and ensure community awareness raising is provided annually through the annual gambling harm awareness week and relevant community education programs
Council not accepting financial contributions from gambling industry & not holding events at venues with EGMs	Not accept any new financial or in-kind contributions from commercial gambling or EGM operators.	Ensure that Council events, activities or programs are conducted in venues where no gambling-related activity is present.	Organisational Alignment: Council will take a whole of organisation approach to minimising harm, acknowledging that all our activities can contribute to minimising harm.		To ensure Council policies and strategies consistently support the reduction of gambling-related harm Council staff will not hold events, activities, and		Not hold Council or City meetings, community events, activities, programs and social outings in venues that have EGMs.

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			Council staff will not run Council and community events, activities, programs and social outings in venues that have EGMs. Council will maintain independence from the gambling industry. Council will not accept financial contributions from gambling venues and will not promote community grants or initiatives offered by local poker machine venues		social outings in venues that have EGMs.		
Prohibit accessing online gambling sites on Council internet		Prohibit access to online gambling at all Council provided, supported or sponsored internet access points.		Ban the use of Council Wi-Fi for online gambling.	No access to online gambling on Council staff internet access points		Install and maintain internet filtering to prevent access to gambling sites on all City public wi-fi.
Evidence & Research	Continue to monitor gambling-related research, evidence, data, legislative or policy changes, and gambling trends, including harm	Participate in and support independent research to increase knowledge and understanding of the prevalence	Evidence Research Data: Council will develop a strong, robust and defensible evidence base that will enhance Council's capacity to		To support research into the impacts of gambling and the development of effective harm	Wellington Shire Council will work in partnership with the community, businesses and local organisations to research options available to reduce	Partner with research institutions to develop a strong, robust and defensible evidence base that will enhance the City's capacity to effectively influence

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	prevention and minimisation.	and impact of gambling in Brimbank Monitor emerging trends and ongoing issues in relation to EGMs and other forms of electronic gambling, in particular their impact on CALD and vulnerable communities in Brimbank.	effectively influence the location, management and operation of EGMs in the municipality and contribute to the broader evidence base.		minimisation strategies.	the ratio of EGMs per 1000 adults in Wellington Shire to be similar or lower than the state average	the location, management and operation of EGMs within the municipality, whilst also contributing to the broader evidence base
Prohibit advertisement of gambling in Council owned facilities	Not permit advertising and/or the promotion of gambling of any form at Council owned or managed facilities.		Through its Leasing and Licensing Policy, Council will not permit gambling promotion or advertising in Council-owned facilities. This pertains to sports betting, online gambling and EGMs.	Ban any form of advertising for gambling on Council owned and operated facilities.	No gambling activity, promotion or advertising on Council-owned facilities.		Not permit gambling promotion or advertising on / in City-owned facilities. This pertains to all forms of gambling.
Grants & community consultations	Create opportunities to incorporate gambling questions on existing surveys and during		Any sporting club, community group, organisation or association that receives sponsorship or grants (in-kind or cash) from poker		No funding, grants or sponsorship being made available for activities that		Ensure the community grants program prioritise organisations, clubs and groups who undertake initiatives with a focus on

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	community consultation in order to further understand gambling harm within Greater Bendigo.		machine revenue will have Council grants, in-kind support and funding reduced by the amount and level of funding and/or in kind support received from EGM sources. Council will not fund community groups who meet in venues that have EGMs through any of its community funding programs. Council will not provide community grants, funding, sponsorship, Council facilities, publicity or promotion for community groups/organisations that promote gambling.		promote gambling		gambling prevention or harm minimisation, or who support alternative recreational activities to gambling Incorporate gambling questions in relevant community surveys and during community consultation in order to better understand gambling harm within Greater Geelong and further support policy and program development.