



# Gambling Related Harm APPG

## Gambling Related Harm APPG Minutes

**Date:** Thursday 15th October 2020

**Time:** 9am

**Location:** Virtual

**Chair:** Carolyn Harris MP

**Minutes taken by:** James Olney, Interel UK

### Members Present

- Carolyn Harris MP
- Ronnie Cowan MP
- The Rt Hon. Lord Foster of Bath
- The Rt Hon. Sir Ian Duncan Smith MP (Joined at 9:10am)
- The Rt Hon. Stephen Timms MP (Joined at 9:15am)

### External Guests

- Prof Samantha Thomas – Professor, Public Health, Deakin University
- Dr Henrietta Bowden-Jones – Neuroscience Researcher working as Consultant Psychiatrist in Addictions
- Dr Philip Newall – Postdoctoral Researcher, Experimental Gambling Research Laboratory, CQ University
- James Miller – President, bacta
- Trevor Sutton - bacta
- Dr Hannah Pitt – Deakin University
- Paul Terroni - Novomatic
- Gabino Sturges - bacta
- Tiffany Trenner-Lyle – Camelot
- Katherine Morgan – Interel Consulting UK
- Holly Ramsey – Interel Consulting UK
- James Olney – Interel Consulting UK
- Jo Lloyd – Office of Carolyn Harris MP
- Iain Fraser - Office of Ronnie Cowan MP
- Office of Fiona Bruce MP
- Sophia Worringer – Office of the Rt Hon. Sir Ian Duncan Smith MP (Joined at 9:10am)

### Minutes of the Meeting – 9am – 10:15am

**CAROLYN HARRIS MP** opened the meeting and welcomed attendees.

**PROFESSOR SAM THOMAS** introduced herself and explained that she will talk about the normalisation of gambling for young people and some prevention strategies. In any discussion around children and gambling, she believes it's important to recognise the importance of strong regulatory environments and the responsibility of government to protect children from harm. This is important in the context because gambling is not an ordinary commodity, but can cause significant harm to people and their communities – strong regulatory structures are therefore essential to protect children from the harm that these products may cause. In the UK there is currently a deficient regulatory and policy environment in relation to gambling and a reliance on soft options: individual responsibility mechanisms, self-regulation, responsible gambling campaigns and similar.

**PROFESSOR SAM THOMAS** explained that from what researchers now know from public health studies about these types of strategies is that they have a limited impact on preventing and reducing harm – especially when delivered in



## Gambling Related Harm APPG

partnership with industry. In relation to tobacco control, researchers found that these methods promoted industry interests and actually hurt tobacco control efforts. While the regulatory structures and policy responses in relation to gambling are weak an unacceptable level of gambling related harm will continue to occur.

**PROFESSOR SAM THOMAS** said that there are a range of factors that contribute to the normalisation of gambling and children – that it's more accessible and available than ever before and there are a range of strategies that contribute to the acceptance of gambling among young people – such as marketing and the alignment of gambling with activities such as sport.

**PROFESSOR SAM THOMAS** also explained that up until ten years ago much of the evidence base on gambling and socialisation particularly related the impact of peers on developing gambling habits. Those groups were very influential in the development of young people gambling attitudes and behaviours but they studies occurred largely before the excessive marketing of new technology platforms and the provision of high intensity gambling products, and the alignment between gambling and sport. That research was largely focused on individual addiction paradigms rather than prevention models from public health - so the focus was on problem gambling rather than the normalisation of gambling for young people. Researchers now know that families may not have the greatest influence on young people's gambling attitudes and behaviours.

**PROFESSOR SAM THOMAS** referenced **DR HANNAH PITT** – present on the call - who's work describes the highly influential role of gambling marketing via its ability to act as positive source of information about gambling products and behaviours and the commensurate influence it has on young people's perceptions that gambling is a socially accepted and normal activity – particularly when in relation to sport. Children's exposure to this positive information about gambling means that they tend to develop gambling competences via marketing even when family members and peers don't engage in or endorse gambling.

**PROFESSOR SAM THOMAS** then spoke about prevention. She said that though some suggest that we should have responsible gambling messages researchers believe that in any public health response the first part of the roadmap in protecting people must be a commitment to comprehensive approach – which starts with a focus on regulation. It is not possible to educate the way out of gambling harm and initiatives that operate in isolation - for example public information campaigns - when run without any complementary activity and especially when untested and industry funded are unlikely to be effective or have any sustained impacts over time.

**PROFESSOR SAM THOMAS** believes that if education approaches are to be effective they should be sustained, need to be evidence based and they must sit within a broader approach that includes curbs on the availability and accessibility of gambling products – as well as tight controls on promotions.

**PROFESSOR SAM THOMAS** said that in relation to tobacco control, researchers showed that smoking prevention initiatives for young people were most effective when there were a range of strategies employed over time alongside them - including strategies which focused on countering social factors that influence tobacco use, a commitment to appropriate regulation and a strengthening of population wide and environmental smoking prevention approaches.

**PROFESSOR SAM THOMAS** personally believes it is important – and is reflected in her work – that when it comes to education with young people it shouldn't start from the basis that gambling is a normal recreational activity that can be safe and entertaining if individuals make the correct choices about their participation. Such an approach is as ultimately it may reinforce and normalise the behaviour that it aims to discourage. Instead it is important to think about the outcomes that were seeking from education approaches. They shouldn't aim to provide information so that kids have an enjoyable experience with gambling when there adults as it ultimately normalises the activity and that framing may also contribute to kids positive perceptions about their ability to control gambling or their perceived mastery over the outcomes of gambling behaviours in later life.

**PROFESSOR SAM THOMAS** also explained that from the lessons learnt and observations in other areas such as alcohol control it is important that education campaigns are developed independently of industry. Referencing a study by Landman and Collins in relation to programmes funded by the tobacco industry, she noted that they concluded the tobacco industry funded education programmes were a public relations tool and emerged as a response to public scrutiny of the tobacco industry. As a result, these programmes did little to prevent youth smoking and may even have been counterproductive as they didn't implement evidence based strategies in relation to the denormalization of

smoking and the reduction of the social acceptability of smoking. Those authors concluded that you should reject any educational programmes created by the tobacco industry.

**PROFESSOR SAM THOMAS** said that researchers have concluded that rather than focusing on responsible behaviours education programmes for kids should be based on critical examinations of the content of marketing and the expectations versus the realities of gambling products. This is because these two factors are the key drivers of young people's gambling attitudes and behaviours.

**PROFESSOR SAM THOMAS** summed up, describing gambling as potentially a very large and unaddressed public health challenge in relation to children that requires public health prevention strategies to prevent the normalisation of gambling for children. The focus should be on developing a range of interventions that shift the focus from individual behaviour towards the social, cultural, environmental and industry factors that may influence the normalisation of gambling in young people.

**CAROLYN HARRIS MP** thanked **PROFESSOR SAM THOMAS** for her evidence and invited **DR HENRIETTA BOWDEN-JONES** to speak.

**DR HENRIETTA BOWDEN-JONES** introduced herself and explained that she would be presenting fresh data derived from her work at the NHS-funded young people's service at the National Problem Gambling Clinic. She has the last two years of data and will be talking about 82 referrals of children and young people under the age of 25.

- 72% of people who came forward were self-referrals, with 18% was from GPs – a different profile of parental involvement compared to the gaming service at the clinic.
- The youngest patient was 16 and 94% were boys.
- There was 1 16 year old, 2 17 year olds, 2 18 year olds and 4 19 year olds - after which numbers proportionately expand so that the average age of those seen was 22.
- 80% were white British, 7% white other and the majority were employed. Only 10% were students.
- The average age of onset of problem gambling for this group was 17 years of age.
- This means, looking at the numbers, that the average age at the onset of the issue was roughly 5 years prior.
- The average daily spending for these young people was £194 pounds. The average monthly spent was £2808. The average number of days of gambling in a month was 13 - this is heavy gambling in a population of young people who clearly cannot afford it.
- Only 25% of these young people had no debt – the rest had variable levels of a significant nature.
- 39% had debts of £5000 and below, 6% had debts of £5,000 - £10,000, 6% had debts of £10,000 - £15,000, 6% £15,000 - £20,000 and the remainder between £20,000 - £100,000 – with a few incidences of over £100,000 in debt.
- These young people under the age of 25 have been able to spend substantial amounts of money the majority of which was clearly not theirs.

**DR HENRIETTA BOWDEN-JONES** then discussed a number of case studies - a 19 year old who had been online gambling for six years had losses in excess of £60,000 – some of which he stole from his father's business. His route in had been via online gaming – such as spending on skins or similar. She queried realistically would could be done to help someone like him, or like another 18 year old who also stole to fund online sports gambling. She noted that it was a common theme among her patients that many started betting on fruit machines in pubs – leading her to wonder about the nature of the gaming environment, including Category D machines, that induces gamblers to associate a pleasurable experience with the machines that then leads to online engagement. Whilst many of her patients ended up doing the worst damage online, many had started in land-based environments.

**DR HENRIETTA BOWDEN-JONES** concluded by saying that a lot of gambling behaviour links back to gambling on sport – and building on **PROFESSOR SAM THOMAS's** points, she also believes that there are major issues with the normalisation of gambling via sport that is resulting in permanent damage to these young people's lives.

**CAROLYN HARRIS MP** thanked **DR HENRIETTA BOWDEN-JONES** for her contribution and said she was astounded by the numbers. She invited **DR PHILLIP NEWALL** to give evidence.



## Gambling Related Harm APPG

**DR PHILLIP NEWALL** said that the best data he was aware of in a UK context is the Gambling Commission's Annual Survey on Young People and Gambling. The data there tells him two stories. The first is that most youth gambling is either engaged in completely legally or is got an element of parental permission - so relatively few children are actually gambling illegally. The online figure for 11 to 16 year olds gambling is 3% - but 2/3 of those are gambling with their parents' permission. The numbers are also very similar for 11-15 year old using National Lottery at 3% - but again, 2/3 have their parents handing over the money.

**DR PHILLIP NEWALL** noted that the rates of young people gambling tend to be higher when you get to types of gambling that continue to be legal in this country. For fruit machines it's about 7% for 11 year olds – he believes a lot of those will be gambling legally on Category D fruit machines. By far the highest figure in the survey is for loot-boxes - which are perfectly legal for persons of any age to use in the UK. An astounding 39% of 11-16 year olds are using them.

**DR PHILLIP NEWALL** sees legal access to gambling and parental permission as key things in relation to rates of child gambling. However, a lot of the research focusses on illegal child gambling - whilst a real concern for people who do it, the UK continues to have a larger proportion of children who are gambling legally. When asked about why they do not gamble - 56% of the children asked said that their main reason is because it is illegal.

**CAROLYN HARRIS MP** thanked **DR PHILLIP NEWALL** for his contribution and asked **DR HENRIETTA BOWDEN-JONES** – in relation to the data she had presented – if she had any idea of what age these children started gambling at and how they started?

**DR HENRIETTA BOWDEN-JONES** said that in combining the average age of patients (22) and average period since onset (5 years), you get a rough idea of the age they started at and an idea of how long it has taken to become a problem – at roughly 17 years old. However, she caveated that her work was a very small component of the general treatment services nationally and she wouldn't suggest that extrapolating to the whole country's presentation. She also noted that as **DR PHILLIP NEWALL** was saying, there are different types of gambling engaged in by young people and possible that she only had a thin slice to present here – albeit a severe slice that needs addressing.

**CAROLYN HARRIS MP** noted that she and the APPG agree that there should be a focus on bringing loot boxes within the Gambling Act's provisions – she queried if one way to neutralise the danger to young people might simply be by making it illegal for them to access them. She then asked of legal gambling products open to children – in particular the National Lottery and Category D machines - which is the biggest danger to children.

**DR PHILLIP NEWALL** added that when it comes to loot boxes it's too early to see what the effects will be. He noted that his research has looked at a number of gambling products that have been legally available in the UK for some time for children – including the National Lottery, National Lottery scratch cards, Category D fruit machines, traditional Amusement With Prizes-type machines (which ostensibly seem less like gambling), coin push machines (familiar seaside resort fixtures) and crane grab machines where kids are trying to get a soft toy - which he believes is the furthest conceptually away from gambling because the prize is a toy rather than money.

**DR PHILLIP NEWALL** said that his research surveyed adult gamblers age 18 to 40 and asked them how much they were made remembered using all of these gambling forms as a child. They found that all these five forms of legal child gambling were associated with adult gambling habits – not just on levels of gambling but also on levels of problem gambling. The strongest associations were with the National Lottery – which he noted the recent hopeful progress on – but also Category D fruit machines - which were used by around 50% of the sample legally as children, and had the strongest association with adult problem gambling (when compared to the expectedly high levels of engagement with coin push machines and crane grab machines).

**CAROLYN HARRIS MP** asked **PROFESSOR SAM THOMAS** if she thought Category D fruit machines for children under 18 were a problem.

**PROFESSOR SAM THOMAS** said that she hadn't looked directly at Category D fruit machines and that it's important to be careful on studies where asking adults to recall what they did as children given the long period of time. It was also important to not be actively looking for associations between things. She noted that a range of complex different factors contribute to gambling habits in later life but from a normalisation and public health perspective what's



## Gambling Related Harm APPG

important is asking how do these environmental and cultural factors and industry tactics normalise gambling so that when children reach the legal age they naturally transition into gambling as something that's an acceptable activity.

**PROFESSOR SAM THOMAS** said that research has found that the things that create positive associations for children is when we have gambling associated with family friendly environments – which can create a perception for children that these are valued activities and aligns them as culturally and socially accepted venues. It would also be a concern if those venues and places were places where people go for fun activities for celebrations with children. However, she was not in a position to give a direct answer on the impact of Category D machines.

**CAROYLN HARRIS MP** invited **SIR IAN DUNCAN SMITH MP** to ask a question.

**SIR IAN DUNCAN SMITH MP** thanked the academics and said that the data was shocking to listen to. He believes that the APPG should consider how best to use it to get the impact across to colleagues. He asked, and invited correction, if it was even necessary when looking at gambling in family areas to prove that these machines could lead to addiction? Would it not be sufficient to class them as anti-social and note that the potential risk of harm – whether directly proven or not – was simply too high?

**PROFESSOR SAM THOMAS** agreed with **SIR IAN DUNCAN SMITH MP** and noted that was why it was important to focus on the normalisation process and to look at if there are spaces with gambling products within them that can influence children. She noted again the powerful role of the association of sport and gambling in creating a positive perception of gambling products for children – from a precautionary public health perspective it is important to focus less on the link to problem gambling but instead to the process of normalisation. She gave the example of “pokie” venues in Australia – which host gambling machines and are often co-located with family areas. Whilst children can't go in them, they can hear the machines and the money dropping whilst nearby for birthdays and family activities – because all of this is under the same roof it creates a perception that this is socially and culturally accepted and embedded into everyday life.

**PROFESSOR SAM THOMAS** said that it was controlling normalisation had been proven to be critical in the successful control of tobacco and alcohol harm.

**DR HENRIETTA BOWDEN-JONES** agreed with **PROFESSOR SAM THOMAS** and drew the Group's attention to the role of social media – and in particular Twitter. She said that last year 41,000 children followed gambling-related Twitter accounts – and noted that this was both not right and likely able to be blocked by the network. Whilst sport plays a role here, there is also the important impact of having a Twitter feed constantly giving children gambling-orientated content that may potentially lead vulnerable people into experimenting further.

**LORD FOSTER** thanked all of the speakers and asked them to send through their notes on their remarks. He noted that the exact comparison made between the problem of normalisation in gambling with tobacco is very problematic for policymakers and lawmakers. Whilst he understood the argument, there is no question that anyone engaging with tobacco products is harmed by them – though the degree of harm will vary (noting that he himself is a former smoker). However, the same is not true of gambling – the figures show that while some people are very seriously harmed - leading to an average of 1 suicide a day – it is also clear that there are millions of people within the UK alone who gamble and as far as researchers can tell suffer no adverse effects. Whilst they might spend their money that way they are choosing to do so. This makes it harder to equivocate the normalisation of gambling with the normalisation of tobacco given the harm differential – though he personally remains in favour of tightened regulation.

**LORD FOSTER** also asked **PROFESSOR SAM THOMAS** about the recent evidence she mentioned that suggests that the family impact - normalisation within families - is now less significant than previously thought and that marketing and data links to sporting activities are more significant.

**DR HENRIETTA BOWDEN-JONES** noted that at this stage researchers don't really know how much harm is being incurred by problem gambling both because we haven't got a fit for purpose recent prevalence survey but also because though -via limited information from some banks such as NatWest we can see that there are many people in terms of percentages who are spending far more in terms of percentage of salary that they can afford, the scale of the issue remains hidden because of a lack of data. Proper data sharing from need banks would be needed for a better



## Gambling Related Harm APPG

idea of what percentage of their customers are spending what percentage of their income and only roughly then that will have a better understanding of the scale of silent financial harm caused by gambling.

**DR PHILLIP NEWALL** agreed that there are huge limitations in the quality of a lot of the data currently available. He noted that he was involved in a project that's using an innovative approach to measuring gambling harm to ask whether – touching on **LORD FOSTER's** point – if there is there any safe level of gambling expenditure. The research looks at objective measures of gambling expenditure from a bank and then objective measures of harm inferred from the banks transaction records, so unlike a prevalence survey it's got much larger sample sizes and it's using objective measures of gambling expenditure and also objective measures of gambling harm. The early (non-peer reviewed) findings suggest that financial harm increases even at low levels of gambling expenditure – with a marked increase at the highest levels. The people who gamble the most seem to be are genuinely unique in terms of the scale of harm they experience. But importantly in relation to the comparison with alcohol and tobacco and on a safe level of use – it suggests most types of harm do tend to increase even at very low levels of gambling expenditure.

**RONNIE COWAN MP** asked **PROFESSOR SAM THOMAS** about what age children can be effectively educated on the dangers of gambling?

**PROFESSOR SAM THOMAS** tackled **LORD FOSTER's** question first – noting that though tobacco and gambling are clearly different products, the process of normalisation is the same, and while families clearly play a role it's potentially not as significant as before following the growth of advertising and technology and it's pervasive impact on young people. Parents talking to their kids about the dangers of gambling advertising is simply not able to compete with very seductive messages that come from industry.

**LORD FOSTER** noted that **DR PHILLIP NEWALL's** answer was helpful and he looked forward to seeing the data – but that the critical issue is that there can't be these equivalents between tobacco and alcohol with gambling unless it's possible to demonstrate that the 23 million people who are gambling at the moment who are not judged to be affected by gambling related harm in some form are in fact being harmed.

**PROFESSOR SAM THOMAS** said there have been studies in Australia which looked at that and have proposed whether or not there a safe levels of gambling harm – she will provide them to **LORD FOSTER**. However, it is also important to be clear that this should be approached from the perspective that no level of harm is acceptable – hence a public health approach focuses on prevention and not minimisation.

In relation to **RONNIE COWAN MP's** question, **PROFESSOR SAM THOMAS** said that the key is to look at when children understand the persuasive intent of marketing - at around 12 years of age – though young people under that may have a recollection or recall of gambling brands. Taking this approach means talking to children and educating them in a critical way to understand marketing tactics and products - 14 is a great age to start at because that's the age where young people can consider and reflect on policy responses which is an important part in empowering young people to see that there are actual practical solutions that could be implemented to protect them in their communities. 14 was the age used in her Wales study. She also noted that experience of tobacco control has shown that school based education is not significantly effective unless it's surrounded by all of those other relevant components and that the latest systematic reviews show that education initiatives need about 3 years to be effective.

**CAROLYN HARRIS MP** thanked all three of the academics for their evidence and invited them to send through their thoughts on the role of advertising – and in particular to “whistle to whistle ban” – to her by email.

**CAROLYN HARRIS MP** invited **JAMES MILLER** to speak on behalf of **bacta**.

**JAMES MILLER** introduced himself as the current president of **bacta** - the trade association for the amusement industry comprising circa 500 members organised into four separate divisions which cover different sectors of the industry. He was joined by Trevor Sutton - Chair of Division One (covering seaside arcades). Both operators of amusements themselves - with 50 years combined experience. As officers of the Association they are elected by members and give their time on a voluntary basis.

**JAMES MILLER** explained that **bacta** members operate Family Entertainment Centres at the seaside and are often second or third generation family businesses that provide a wide range of entertainment around the country. Members

are not motivated by share price or directors bonuses but instead focus on sustainability and the continuation of their business for the next generation – as such, social responsibility is in their DNA. Bacta members continually reinvest in their business and their local economies – and with around 20 million people a year visiting seaside's arcades they make a vital important economic and cultural contribution to often deprived areas of the country. Seaside arcades offer a variety of entertainment options - including bowling, whack-a-mole, teddy bear grabbers, Category D fruit machines and prize bingo - all of which are games of chance.

**JAMES MILLER** said that bacta members share the APPG's concerns and don't want to contribute to gambling-related harm. They exist only to provide fun and entertainment – however the 2005 Gambling Act classified low stake prize games found across bacta venues as Category D machines – which also saw them removed from unsupervised environments such as cafes, takeaways, fish shop fish and chip shops and taxi offices. The legislation has always kept stakes and prizes on Cat D machines low to ensure they remain machines providing fun and entertainment and that they are only operated in licenced premises. Prizes on cash pay-out Category D fruit machines have remained the same for 20 three years at a maximum of 10p per play and a £5 prize

**JAMES MILLER** noted that their experience as operators is that Category D fruit machines are normally played by the older generations for nostalgia - tuppenny nudges and Oxo games are also attractive to this group. Adults who play on Category D machines often have children with them to supervise and are keen to keep them nearby. However, these children are not attracted by Category D machines and would much rather play driving games, penny falls or other games with their family members.

**JAMES MILLER** noted that the latest prevalence study shows that the number of children who said they had played on a Category D fruit machine in the last week had reduced from 50% in the mid-90s when the National Lottery started to 3% now – it's lowest ever rate. Those figures are conducive with bacta's experiences as operators of Category D as a product in decline.

**JAMES MILLER** said that bacta has listened to all the evidence recently released and about the concerns on Category D machines and children and gambling and they both understand and have the same view with regards the precautionary principle. Bacta listened to and took onboard the comments and concerns and we acted accordingly in 2019 to make it a condition of membership for operators to prevent young children under the age of 16 from playing on category D cash payout for machines unless accompanied by an adult. In addition as part of bacta's continued commitment to members have also agreed to amend this to no under-18s in the future as and when the minimum age for the National Lottery draw is raised to 18. He noted that this measure has been widely welcomed by Gambling Commission, the Department for Digital, Culture, Media and Sport and a range of senior politicians and the public. He then displayed an example of this signage for members of the Group to examine, and noted that they did this at a time of increased focus on gambling and to reiterate to the public that we take such matters seriously.

Reflecting on his presentation, **CAROLYN HARRIS MP** noted she was concerned by **JAMES MILLER's** reference to cash pay-out machines only.

**CAROLYN HARRIS MP** asked if bacta – ahead of any legislation and any changes to the National Lottery – will remove any kind of slot machine from under 18s. She noted that the UK is the only country in the world that allows any kind of gambling for anyone under 18 – and that the APPG are aware that of expected changes to the National Lottery soon. She would prefer for bacta to be seen as a responsible organisation putting the interests of children first and that they could do so by saying they will voluntarily remove any kind of slot machine from an environment where we have anyone under 18.

**JAMES MILLER's** noted the existing initiative restricting under-16s form Category D that he mentioned, and noted that there would be issues with only restricting certain types of Category D machine to over-18s.

**CAROLYN HARRIS MP** reiterated her request that bacta come forward and remove anything that looks, sounds, smells like a slot machine. On the basis of the evidence from morning it seems overwhelming to her that anything that resembles a slot machine with a reel is doing damage. She asked again for **JAMES MILLER** to go back to members and ask them to consider restricting them to over-18s.



## Gambling Related Harm APPG

**JAMES MILLER** said that bacta will engage with anybody and will consult with all members and follow the evidence. He noted that the range of evidence today that suggested that sports and marketing may be far more critical in causing harm and that the family influence is less than previously though. He noted that playing on Category D machines as **RONNIE COWAN MP** said is no real difference to watching Tipping Point on the television with family.

**RONNIE COWAN MP** objected to that interpretation of his point – he was expressing concern that people sitting there doing that at home was akin to being exposed to gambling and was not acceptable.

**RONNIE COWAN MP** said it's the softer side of gambling that concerns him – as compared to the harder stuff where you can see the damage that is happening. He noted that Category D includes some machines that should be restricted – would it be necessary to break down Category D into sub-categories to allow industry to remove the problematic parts – which would effectively take the decision away from industry. He noted that the APPG is asking bacta to be responsible – and that if they recognise that issues exist to do something about it.

**JAMES MILLER** said that he believes bacta have done something about it – they're the only organisation that's implemented a voluntary age restriction by going to 16 and have agreed to go to 18 on these products in the future.

**RONNIE COWAN MP** agreed that whilst bacta may be the only organisation to have done so, compared to the irresponsible practises of other sectoral organisations that was not a significant hurdle. **CAROLYN HARRIS MP** agreed and mentioned that the rules surrounding the National Lottery.

**JAMES MILLER** suggested that the National Lottery could life their age to 18 and follow bacta's example.

**CAROLYN HARRIS MP** noted that the change would likely be legislated for shortly. What the Group was suggesting to bacta was that they should be ahead of the curve and avoid a situation where the Government are made to say that this practise is illegal and to force the sector into a change.

**JAMES MILLER** Said they've listened carefully to the debate on children and gambling and want to do everything they can to augment bacta's existing safeguarding measures. Evidence suggests that the risk of any gambling related harm from seaside arcades is small but they want to go as far as they can to reduce that even further. Bacta believes that the current under-16 rule starts to do just that and they have agreed to go to an under-18 restriction in the future. He noted that seaside arcades don't offer free bets, advertise on TV, sponsor premier league football – but offer family fun as part of the traditional British holiday - the analogue business in the digital age.

**CAROLYN HARRIS MP** said any machine that takes money and gives out tokens or money and has the operation of a reel and is a slot machine is a precursor to gambling online, and slots – and the UK is the only country globally that allows this.

**LORD FOSTER** said that he has been a huge supporter of bacta for many years but the evidence is increasingly going in one direction. He echoed **RONNIE COWAN MP's** suggestion of different sub categories within Category D machines and as one of those subgroups, but he is convinced that new legislation will not be favourable for bacta. He urged them to look a the evidence – which was overwhelming today.

**LORD FOSTER** also commended bacta for the good things it's done in the past and that the Group's members wished to remain supporters. It would be a shame if bacta could not go further on this occasion based on the evidence. Though he's aware it would have to go to members but urged bacta to go away and consider the change.

**CAROLYN HARRIS MP** agreed with **LORD FOSTER** but noted that the change would have to apply to cash and ticket pay-out Category D machines. She invited bacta to come back to her on the issue.

**LORD FOSTER** thanked the academics for their contributions and urged them to send through their evidence – he also invited **JAMES MILLER** to get in touch directly to discuss the issue with himself and interested Lords colleagues.

**CAROLYN HARRIS MP** thanked attendees and closed the meeting at 10am.