

Review of Gaming Machines and Social Responsibility Measures - Submission

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Q8. Any other relevant issues, supported by evidence that you would like to raise as part of this review but that has not been covered by questions 1-7?

I appreciate this opportunity to provide a submission to the Government review of gambling machines and social responsibility measures. I am an international academic with expertise in gambling problems and addiction, having commenced my career in Australia and worked in the UK for the past three years. My research includes work that extends across topic areas in the gambling field, including effective treatments [1], comorbidity [2, 3], public health impacts [4, 5] and health sector responses [6]. This was funded by research bodies situated across international jurisdictions including Australia, Canada and the UK.

I welcome this review and the close examination of hazardous features of gambling environments in the UK (including gambling machines and advertising), as well as the external scrutiny of evidence that can support measures for reducing harms from gambling. Notwithstanding, I believe the capacity of this review to achieve its aims and provide meaningful evaluations of initiatives to reduce harm will be limited by major distortions in the evidence, which result from direct roles of the gambling industry in shaping research, and the lack of safeguards against corporate vested interests. These concerns are grounded in extensive research about motivations and tactics of tobacco and alcohol industries for manipulating evidence, and observations of likely parallels with practices adopted by the gambling industry in the UK.

This submission will summarise evidence indicating incentives and tactics used by harmful consumption industries to control research, with the ultimate goal of influencing policy. It will describe practices of the tobacco industry, which are best understood, and analogous tactics adopted by alcohol producers and retailers. It will then summarise literature highlighting concerns about similar practices within the gambling industry, and reasons to expect that the UK system for producing research (which provides industry with direct roles in evidence production) is highly vulnerable to distortions by commercial interests. The main objectives of this submission are to:

- (a) Provide a framework for interpreting submissions that are received during this review, which will be heavily biased towards studies supporting industry favourable positions (given almost all gambling research in the UK is commissioned via industry); and
- (b) Highlight the urgent need for new and independent mechanisms for funding research that are protected from vested interests, and can produce evidence about a

full range of policy measures that may be optimal for addressing harms from gambling.

In regards to the Terms of Reference, this submission will address Q8 (*Any other relevant issues, supported by evidence that you would like to raise*). However, the material has broad relevance and also relates to Q3 (*What other factors should Government be considering to ensure the correct balance in gaming machine regulation*) and (Q6. *Is there anything further that should be considered to improve social responsibility measures across the industry*).

Harmful consumptions and conflicts of interest

There are major concerns in the public health field about practices of industries of harmful consumption [7, 8], which include tobacco, alcohol, ultra-processed foods and gambling, among others. Underlying these concerns are conflicts that exist between goals of public health promotion and protection, and the economic objectives of companies that profit from consumption [7, 8]. These conflicts are arguably greatest when commodities possess addictive potential, given that individuals experiencing harm or addiction will typically engage in greatest levels of consumption and expenditure. Adams and Livingstone [9], for example, suggest around 10-15% of most adult populations that are problem drinkers, but account for between 60-80% of expenditure on alcohol (due to consumption in greater quantities than non-problem drinkers). UK data suggests smaller numbers of people exhibiting moderate to severe problems with gambling (around 1-3%), but still account for between 10-40% of gambling revenue, depending on type of activity (excluding lottery) [10]. Accordingly, it seems that while most consumers do not experience significant problems or addiction, those who do contribute disproportionate amounts towards industry revenue. This financial 'surplus' from problematic consumers [9] sets gambling, alcohol and tobacco apart from ordinary commodities, and provides strong incentives for industries to protect revenue by avoiding initiatives that may reduce numbers consuming at high levels.

The case of tobacco

The consequences of conflicts between economic and public health agendas were illustrated clearly by secret documents from the tobacco industry, which were released following litigation against major companies in the 1990s [11]. Analyses of these documents indicate prevailing views within industry of threats to revenue from public health reforms, and concerted attempts to avoid actions that were threatening to financial interests. Industry responses to perceived threats were many, and included legislative interventions (e.g., legal challenges and lobbying, financial contributions to political groups) and manipulation of the media [12]. Many tactics had a public relations focus, and were intended to present smoking as a matter of individual choice and responsibility, while also framing regulation in terms the erosion of freedoms by a 'nanny state'. This is notwithstanding the negative impacts of smoke on other people, and legitimate responsibilities of governments for protecting citizens from hazardous environments [13].

Industry tactics included third-party techniques, which involve commissioning of individuals or organisations to act on behalf of industry, while claiming independence and masking involvement of tobacco corporations. By way of examples, there was extensive investment

by the tobacco industry in developing networks of paid scientific consultants [14], as well as contract research organisations and think tanks that were commissioned to support industry positions [15]. These were additional to third-party front organisations that were funded by industry for public relations purposes [11]. The Council for Tobacco Research and Center for Indoor Air Research, for example, were formed by companies to promote the views that hazards of active smoking and environmental smoke, respectively, had not yet been proven [16].

A major function of many such front organisations was to fund research that seemed independent, but allowed industry to maintain control over evidence production. In particular, industry representatives and attorneys were heavily involved in setting agendas for research, and prioritised topics that served public relations objectives [16]. They also influenced projects and researchers that received funding. For example, scientific advisory boards were established to support claims of independence, but were selected on the basis of scepticism about tobacco science and economic or personal relationships with industry [12]. Approval processes were also manipulated to maintain control of research (e.g., through pre-screening of funding applications by industry representatives, whereby projects that were threatening were excluded from consideration at early stages) [17]. Subsequent to commissioning, there were requirements for industry representatives to view publications, and suppress or delay the release of findings that were unfavourable [16].

Industry documents indicate that funding of seemingly independent research was a public relations device that supported claims of corporate responsibility [16]. However, in the context of mounting evidence of health risks from smoking, the main goal was to manufacture a sense of controversy and doubt about scientific evidence. This was through (a) generation of studies yielding conflicting results, which were used to dispute evidence that smoking products were harmful (for example, evidence reviews linked to industry funding were around 90 times less likely to conclude that passive smoking was harmful, when compared to independent evaluations) [18]. This was also through (b) selective commissioning of research on alternative causes of disease (apart from tobacco), including genetic factors, stress, and diet [11]. The latter were used to generate further doubt by highlighting factors that may confound associations with smoking and health. Furthermore, these studies informed public relations strategies for deflecting attention away from roles of smoking in cancer aetiology, by emphasising different targets for intervention that would impact less on smoking and thus revenue [19].

A major component of industry tactics involved campaigns to influence public opinion and policy debates, through widespread dissemination of selective evidence and engagement with policy makers [12]. Results from industry research were published across multiple formats including sponsored symposia proceedings and reports, and letters to the editor in academic journals [16]. Reports were rarely subject to traditional peer review through scientific journals (which provide a basic level of quality control), and were associated with lower scientific quality when compared to independent literature [16]. Notwithstanding, such publications were cited heavily in media campaigns and submissions to government [20]. During consultations in 2011-12 about standardised packaging of tobacco products, for example, the UK government received large numbers of submissions linked to industry, which involved heavy citation of industry-funded reports [21]. Analyses indicated that these

publications were not subject to traditional peer review in most instances, and supported assertions that standardised packaging would have no benefits for public health (which contrasts with conclusions from independent evidence) [22]. Where peer reviewed articles were cited, these did not address the role of packaging in smoking, and rather, emphasised alternative drivers of behaviour and thus targets for intervention [21].

Following in their footsteps

As a result of release of internal documents from the tobacco industry, these subversive practices are now recognised and there is consensus that conflicts between the economic goals of tobacco corporations and those of public health are irreconcilable [7]. Accordingly, there are policies agreed by many developed countries, which are based on the Framework Convention on Tobacco Control [23], that formally excludes the tobacco industry from almost all interactions with policy makers and researchers. In the absence of internal documents from other industries of harmful consumption (which are produced by lawsuits against companies), there is currently less recognition of corporate practices and responses to health policies [24]. However, there is growing evidence from other sources (e.g., public documents, stakeholder interviews) [25], which provides strong indications that such industries are adopting similar strategies for creating doubt and avoiding reform in the face of threats to financial interests.

In relation to the alcohol industry, for example, there is mounting evidence of misrepresentation of independent research, and selective commissioning of studies to influence policy debates [26, 27]. In the UK, this was illustrated during government consultations about Minimum Unit Pricing (MUP); a price-based strategy for addressing alcohol problems which is supported by independent evidence, but opposed by some industry bodies [28]. Analyses of submissions to consultations with Scottish Government in 2008 indicated many attempts by industry groups to misrepresent the strength of evidence for MUP, while promoting weak studies in favour of preferred policies (e.g., education / public information) [29]. One alcohol producer commissioned the think tank Demos to conduct studies on social aspects of binge drinking, and particularly on influences of parenting. The latter coincided with the UK Government's alcohol strategy in 2010, and informed campaigns to promote the view that addressing parenting was a direct and superior alternative to MUP [26]. The use of think tanks for research purposes has been observed in practices of tobacco companies [15], and allows industries to draw on the perceived independence of such organisations, while ensuring that projects remain aligned with preferences of the funder. These organisations are also dependent on external revenue for continued existence, and this involves further pressure to report findings that satisfy the funder and maximise prospects of future income [26].

There is also evidence of major investment by the alcohol industry in third-party front organisations, which have been labelled as 'social aspects / public relations organisations' (SAPROs) [30, 31]. These are generally characterised by funding from industry sources and trustee boards including industry representation. Some SAPROs focus on research commissioning, and also maintain scientific boards that claim independence [31]. However, such boards often comprise members with historical relationships with industry, and can have independence compromised in many ways (e.g., through receipt of honoraria and

travel funds, and personal relationships with industry that are developed during sponsored events) [31]. In the alcohol field, these SAPROs have been observed to divert attention away from population-level interventions (e.g., limiting the price or availability of alcohol) [32], and towards strategies that emphasise individual responsibility or problem drinking (which are among the least cost-effective strategies for addressing alcohol problems) [33]. The International Centre for Alcohol Policies, for example, is an international SAPRO that has worked to counter policy advice of the WHO (e.g., by producing reviews that mirror WHO reports, but omit evidence and reach opposite conclusions) [34]. In the UK, relevant organisations include the Portman Group, which was established by alcohol producers and has a long history of controversy (including attempts to pay academics to write anonymous critiques of WHO reviews) [31].

Drinkaware is a UK SAPRO which began as a website for the Portman Group, and was established as a separate charity in 2006. Drinkaware is an ostensible platform for public information and education about alcohol, and its website is promoted by alcohol marketing and the NHS. However, the organisation remains funded by alcohol producers and retailers, and has been a vehicle for industry representation in research and policy debates. For example, Drinkaware also commissioned focussed research on effects of parental alcohol consumption on children, and was active in lobbying the Scottish Government about MUP [32]. It also submitted evidence to the 2009-10 Health Select Committee (HSC) in favour of industry preferred initiatives (e.g., education), despite claiming non-involvement in policy. As a result, Drinkaware was subject to criticism by the HSC, which expressed concerns about industry influences and purposes of the organisation [32]. Although a subsequent review concluded no undue industry influences [35], this examination was overseen by a panel including members with links to industry, and concerns about practices of this SAPRO thus remain [32, 36, 37].

In the absence of legally required disclosures of internal documents, there is much about the extent and nature of corporate influences on alcohol research that remains unclear. However, the lessons learned about tactics of the tobacco industry, and high levels of involvement of industry in alcohol research, has provided grounds for strong concern about attempts to subvert science and the evidence for public health policies [25, 31]. As such, the WHO has adopted a position that alcohol industry bodies should have no role in formulation of alcohol policies, which must be actively protected from distortion by commercial interests [38]. There are growing arguments that similar precautionary principles should be adopted to protect research from corporations producing ultra-processed foods, given that policy measures addressing obesity require reductions in consumption of highly processed foods, which are associated with high profit margins for companies [39]. Such proposals are supported by reviews which indicate that industry funding for nutrition research is also associated with the nature of conclusions (whereby articles linked to industry in any manner are four to eight times more likely to reach conclusions that are favourable to sponsors, when compared to articles funded by other sources) [40].

New dogs, old tricks: The production of gambling research

Gambling products share many common features with tobacco and alcohol (for example, they are all legalised commodities that are marketed using similar techniques), and they are

often described collectively in terms of addictive consumptions [9]. Given the relatively recent expansions in gambling technologies and industries, however, the literature on gambling is far behind other addictions, in terms of both quality and management of vested interests. Notwithstanding, there is already concern that gambling research has been distorted by commercial industries, and reflects a strong bias towards studies on individual causes and solutions to personal dysfunction and problems, and away from research on gambling products and environments that are implicated in harms [24, 41].

Concerns about industry involvement in gambling research are supported by initial evidence from stakeholders in Europe, Australia, North America and Asia [42]. This study was funded by the European Research Council, and involved $n = 109$ interviews with gambling researchers, policy makers and industry representatives. These indicated broad attempts by industry to promote relatively 'safe' topics for investigation (e.g., regarding problem / responsible gambling), and discredit findings or researchers that were viewed as threatening. There were novel findings emphasising the distinctive capacity of this industry to control evidence by providing selective access to gambling venues and data. Among other things, there were also indications of strong researcher biases within systems involving voluntary contributions from industry to research (e.g., with funds viewed as 'gifts', which were thus received with a sense of gratitude and indebtedness). Voluntary funding meant that industry was perceived as maintaining ownership over research, which was thus appraised mainly in terms of commercial value to corporations, rather than importance for public health and policy.

In the UK, the gambling industry has a direct role in commissioning almost all relevant research. The Responsible Gambling Strategy Board (RGSB) is advisor to the Gambling Commission (and thus UK Government), and identifies priorities for research programmes. However, the RGSB awards responsibilities for delivery of research to Gamble Aware (previously known as the Responsible Gambling Trust; RGT), which is a separate organisation that also maintains scope for commissioning its own research. Decisions about funding bids are made by a research committee, which comprises members with eminent reputations, but no domain expertise in gambling research. In the context of tender invitations for major projects, the committee is advised by a panel of international gambling experts, which include some who are beneficiaries of RGT commissioning and other industry funds. While framed as an independent charity, Gamble Aware receives funds for research (and all other operations) directly from industry. It also includes substantial representation from gambling and alcohol industries at trustee level. As such, the organisation can be classified unambiguously as a gambling industry SAPRO, which shares common features with organisations that have provided vehicles for tobacco and alcohol corporations to influence evidence and thus policy.

The formal role of an industry SAPRO in research provides a stark contrast with standards upheld in fields of tobacco and alcohol, and highlights a lack of protection against impacts of corporate interests on gambling research. The UK system is also unusual when compared to mechanisms for funding gambling research in other jurisdictions. In New Zealand and parts of Australia (e.g., New South Wales), for example, there are mandatory levies on gambling companies which are directly administered by government departments. In the State of Victoria, an independent statutory authority fulfils commissioning functions, and is led by a

board that is free from industry representatives. In Canada, the provincial governments are monopoly operators of legalised gambling, and there are varied mechanisms for commissioning research. However, the main research bodies in Canada (which are funded by governments), including (a) the Alberta Gambling Research Institute, and (b) the Gambling Research Exchange Ontario (formally the Ontario Problem Gambling Research Centre), list no industry or government representatives among their directors. The U.S. National Centre for Responsible Gambling (NCRG) provides another example of an organisation that is funded by industry and involves a board with industry representation, and has thus been criticised for acting as a vehicle (although perhaps an unwitting one) for industry agendas [43, 44]. However, the NCRG differs from Gamble Aware in several ways, and does not have a formal role in operations on behalf of government.

The management of vested interests in gambling research lags far behind other addictions, and there are concerns about independence of most systems for producing evidence (and particularly in countries where governments are also gambling operators, and thus where lines with industry are blurred). For example, there are still opportunities for industry involvement when funding schemes are administered by government, which also has its own vested interests in gambling research (by virtue of taking revenue from gambling taxation, while having simultaneous responsibilities for protecting public health) that are rarely managed [45]. Notwithstanding, there are several reasons to expect that the UK system for producing research enables particularly high levels of industry influence, and major impacts on research and policy. For example:

- Funding for all operations of Gamble Aware is provided on a voluntary basis by gambling companies, and there are prospects (whether real or perceived) that this could be reduced or withdrawn if the organisation were to act in a way that was counter to commercial interests.
- Gamble Aware is the substantive commissioner of gambling research in the UK, with only the ESRC having any meaningful tradition of funding relevant studies (although in small numbers). In the alcohol field, industry sponsored research (e.g., conducted by think tanks) has been described in terms of a secondary or parallel literature [26] that is used to contest mainstream evidence. In contrast, industry sponsored studies are the primary source of information about gambling in the UK, and dominate narratives about the nature of problems and optimal solutions.
- Through Gamble Aware, the industry is responsible for almost the entirety of funding for gambling counselling and intervention services. According to Adams [8], such industry funding provides a powerful means of silencing criticism from service providers, who are important witnesses to gambling related-harms, but may be concerned about public statements that will jeopardise their funding. In the context of broader control over evidence, the ability of industry to also silence criticism indicates high levels of 'corporate capture' [46], and the heavy domination of the information environment.
- By virtue of a formal role in commissioning, the gambling industry has privileged access to policy makers. This contrasts with situations facing tobacco and alcohol companies, which must generally use media or public relations campaigns to promote favourable evidence. In the case of tobacco, the loss of access to policy makers (given distrust of industry following release of internal documents) has

provided a major barrier to exerting influence on decision-making [47]. In contrast, the UK system requires that primary consideration is given to industry sponsored evidence about gambling, which provides major opportunities to define the nature and scope of policy debates.

I am aware of no rigorous and independent evaluation of gambling research in the UK, which mainly comprises studies commissioned by the RGT / Gamble Aware. Although such a detailed evaluation was out of scope of this submission, I conducted a preliminary examination of funded studies (excluding reviews and discussion papers) that were listed on the Gamble Aware website [48, 49]; as a precursor to a more exhaustive analysis of aims, methods, results and conclusions. A striking feature of this research was the small amount of evidence produced, with only $k = 30$ studies listed that indicated collection or analysis of primary or secondary data. It was also striking that 80% of studies (24/30) were conducted by contract research organisations or think tanks, with very little involvement from research intensive academic institutions.

The small body of evidence about an important issue for public health provides strong indication that reliance on voluntary contributions from industry to enable research, which is commissioned by an industry SAPRO, is unlikely to produce meaningful advances in understanding of harms and ways of addressing these. Similar observations have been made in the alcohol field, where it is also argued that small investments by industry in research are self-serving, and will not lead to major breakthroughs in science or reductions in the burden of alcohol-related illness [31]. The heavy reliance of the RGT / Gamble Aware on contract research organisations and think tanks suggests further parallels with practices of tobacco and alcohol industries, and provides grounds for concern about efforts to control research and the evidence base for policy. Such concerns are supported by circumstantial evidence about commissioning that suggests major imbalances in funding priorities. In 2015/16, for example, there were invitations to tender for studies on gambling-related harm, which focussed on (a) estimating costs of harm, (b) defining and measuring harm, and (c) young people and harm. Tender documents indicate that these areas were associated with maximum budgets of £40,000 [50], £80,000 [51], and £200,000 [52], respectively (with the latter split across projects). This contrasts with £750,000 awarded for a project with a strong 'individual-level' focus which is using customer data from online gamblers to identify individuals with major problems [53].

Conclusions and recommendations

The current review of gambling machines and social responsibility measures is predicated on an assumption that there is unbiased evidence about features of gambling machines that are implicated in harms, and policy measures that may be optimal for addressing these. However, in the absence of a system for producing research that is protected from corporate interests, such expectations are unrealistic. Rather, this review is more likely to contend with large numbers of submissions that are linked to industry and use sponsored studies to either: (a) highlight the inability of weak evidence to support need for changes to existing policy; or (b) use weak studies to argue for industry favourable positions that include self-regulation of machines, or perhaps actual expansions in availability. I hope the

current submission provides a basis for increased recognition of industry agendas and distortions in evidence that will underlie such submissions.

In the context of weak evidence, it seems unlikely there will be sufficient empirical bases for making changes to hazardous features of gambling machines (e.g., large maximum stake sizes, rapid rates of play) that are urgently needed (without a major shift towards policy making on the basis of a precautionary principle). However, I believe an important outcome of this review must be recognition of deficiencies in the current mechanisms for producing gambling research, and the need for new systems that are protected from commercial interests. Such systems should be developed in consultation with public health and addiction experts in tobacco and alcohol fields, which have greater traditions of management of vested interests, but should comprise at least three major characteristics.

- (1) The first is provision of substantial ring-fenced funding for gambling research, which is derived from consolidated funds of government or hypothecated taxation. Although it is argued that consolidated funds provide the only ethically unambiguous source of money for research on addictive commodities [41], it has been noted that hypothecated funds have been administered with integrity to support important developments in fields of tobacco and alcohol [54, 55]. As such, it seems reasonable to suggest that a mandatory levy on the gambling industry should be implemented immediately.
- (2) The second feature includes a structure for commissioning research that is entirely free from industry influences. Cassidy [42] has argued that funding for gambling research should be administered by research councils in the UK, while alternative mechanisms may involve creation of an independent non-statutory organisation that is free from linkages with industry (current or historical), and could administer funds for research as well as prevention and treatment. The latter mechanism should involve guarantees for some level of independence from Government, which has strong historical links with the gambling industry in the UK.
- (3) A third component must involve provision of guaranteed access to gambling venues and data for purposes of independent study. Difficulties accessing venues and data is often cited as a key reason that gambling researchers should work in partnership with industry [56, 57], but is also an important way in which industry exerts control over research [42]. As such, this issue should be viewed as an obstacle to evidence production, rather than a necessary reason for working with industry despite risks of negative consequences. This obstacle could be overcome through policies requiring access to gambling venues and data as a mandatory condition of licensing [42].

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