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**From:** Gambling Impact Society (NSW) [<mailto:info@gisnsw.org.au>]  
**Sent:** Tuesday, 29 April 2014 5:46 PM  
**To:** Alexander Stedman  
**Subject:** Fw: Questions on the proposal for a National Action Plan on Gambling Harm

Dear Alex

In response to the additional question as to components of a National Action Plan for Gambling harm I have collated what I see as relevant research information to assist the committee.

This question deserves more time and consultation than I have available at present and indeed I would like to see a broader group included as I believe there are a number of stakeholders who could benefit from having input into the development of such a plan. Most importantly those who have been involved in developing similar National Actions plans on related health issues drug, alcohol, mental health and Tobacco. These risky activities have formed the basis of National Health Priorities since the early 1980's and it would appear beneficial to take some heed from those models along with guidance in from the World Health Organisation on preventative health.

The *Diagnostic and Statistical Manual of Mental Disorders* (DSM) published by the American Psychiatric Association provides a common language and standard criteria for the classification of mental disorders. Its latest revision (DSM-5) published in May 2013 includes "**gambling disorder**" as the sole condition in a **new category on behavioral addictions**. This is a clear confirmation of gambling disorders as a health issue and as such we believe it should be included with Australian priorities for Mental Health and incorporated into the National Mental Health Action Plan (see attached).

Discussions with the previous Director of Drug, Alcohol and Mental Health at NSW Health indicated a readiness, willingness and agreed congruency in taking problem gambling into their jurisdiction. However the lack of political will for this to occur appears to have been a considerable barrier despite recommendations of the NSW IPART inquiry 2005. It would be timely if the NSW government could demonstrate some leadership on this issue and take steps to develop a clear framework for gambling to be dealt with as part of the operations of the NSW Ministry Of Health whilst also calling for a National Public Health Framework with Health as the lead organisation.

In Australia we have developed a range of National Objectives for a variety of preventable health issues such as Tobacco addiction, Drug addiction, Alcohol addiction and Obesity. Gambling addiction is noticeably absent and this we believe contributes to the marginalisation of those affected, leading to stigmatisation and barriers to support. As an example the current absence of Gambling Addiction from the list of psychological issues open to patient treatment under the National Better Health Outcomes for Mental Health has direct negative impacts on those struggling with this health disorder. These are the inequities which those affected including families and children are having to deal with on a daily basis. There is no justification for gambling not to be addressed as a health disorder and a body of evidence to suggest that it should.

A clear National Health mandate would address these issues, provide guidance for State and Territories who need to partner in the implementation of a National Action Plan which based on a public health model would address primary, secondary and tertiary level of harm preventions, reduction, treatment and rehabilitation.

I hope that the attached research (including my own article with Phillip Townsend on a A Public Health Approach to Gambling) will aid the committee in its considerations on this matter. I and other members of the GIS would be happy to have continued consultation with regards developing this proposal in the future.

Should you require any further information so please note I will be on leave from 3-18th may.

Kind regards

Kate

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