

Canterbury

District Health Board

Te Poari Hauora o Waitaha

Submission on Racing Industry Bill

To: Transport and Infrastructure Committee
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Submitter: Canterbury District Health Board

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Proposal: The Racing Industry Bill represents the second phase of the Government's response to the Review of the New Zealand Racing Industry (the Messara report). The response began with the Racing Reform Act 2019, which brought in a transitional period for the reform of the industry and took various measures to increase the financial sustainability of the industry.

SUBMISSION ON RACING INDUSTRY BILL

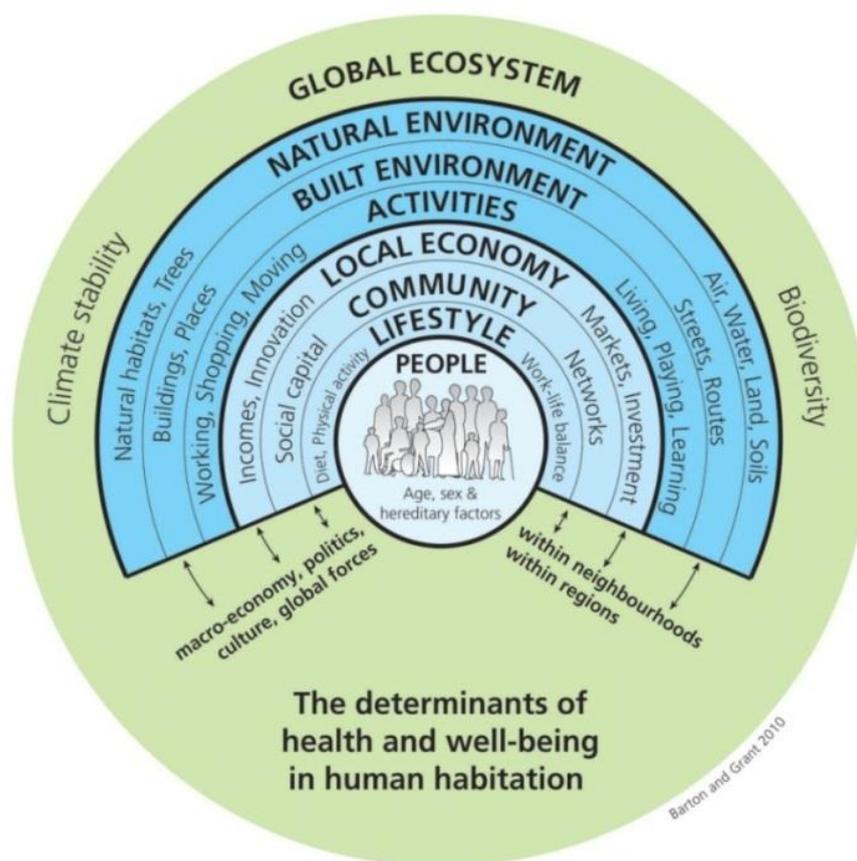
Details of submitter

1. Canterbury District Health Board [Canterbury DHB].
2. The submitter is responsible for promoting the reduction of adverse environmental effects on the health of people and communities and to improve, promote and protect their health pursuant to the New Zealand Public Health and Disability Act 2000 and the Health Act 1956. These statutory obligations are the responsibility of the Ministry of Health and, in the Canterbury District, are carried out under contract by Community and Public Health under Crown funding agreements on behalf of the Canterbury DHB.
3. The Ministry of Health requires the submitter to reduce potential health risks by such means as submissions to ensure the public health significance of potential adverse effects are adequately considered during policy development.

Details of submission

4. Canterbury DHB welcome the opportunity to comment on the Racing Industry Bill. The future health of our populations is not just reliant on hospitals, but on a responsive environment where all sectors work collaboratively.
5. While health care services are an important determinant of health, health is also influenced by a wide range of factors beyond the health sector. Health care services manage disease and trauma and are an important determinant of health outcomes. However health creation and wellbeing (overall quality of life) is influenced by a wide range of factors beyond the health sector.
6. These influences can be described as the conditions in which people are born, grow, live, work and age, and are impacted by environmental, social and behavioural factors. They are often referred to as the 'social determinants of health' (Public Health Advisory Committee, 2004). The diagram (Barton, & Grant, 2006) below shows how the various influences on health are complex and interlinked.
7. The most effective way to maximise people's wellbeing is to take these factors into account as early as possible during decision making and strategy development. Initiatives to improve health outcomes and overall quality of life must involve

organisations and groups beyond the health sector, such as local government if they are to have a reasonable impact (McGinni, Williams-Russo, & Knickman, 2002).



8. Harmful gambling is a significant public health concern (Baxter, Hilbrecht, & Wheaton, 2019; David, et al., 2017; Dyal, et al., 2012; Gainsbury, et al., 2014; Nikkinen, 2019). Globally and in New Zealand the gambling industry is experiencing unprecedented growth only possible because of government collusion and financial self-interest (Markham, & Young, 2015; Tansley, 2018). Gambling causes harm extending beyond individuals and (Dyal, et al., 2012; Tu, Gray, & Walton, 2014; Young, 2013) and results in class-based exploitation (Markham & Young, 2015). The Canterbury DHB is strongly opposed to government intervention that liberalises aspects of the gambling industry. The Canterbury DHB instead recommends that gambling legislation should be centred on harm minimisation and protection of citizens. The Racing Industry Bill does the contrary and is not in the interest of the public but of the industry.

General Comments:

Problem definition that led to the drafting of the Bill:

9. The Canterbury DHB is opposed to various aspects of the Racing Industry Bill [the Bill] as they are not compatible with a harm minimisation/Health in All Policies approach needed to promote the wellbeing of Aotearoa/New Zealand.
10. The Bill identifies the decline of the racing industry and risk of irreparable damage as a problem needing to be solved. The Bill highlights the need for legislative intervention to benefit the industry through enablement of economic development of the racing industry (Racing Industry Bill, Explanatory note). The Bill repeatedly acknowledges that its principal aim is to benefit the racing industry by creating opportunities for new betting products and increasing financial sustainability (Racing Industry Bill, 2019, Explanatory note; Part1,c3(iv); Part2,s34; Part2,c47(i)).
11. The Canterbury DHB deems this problem definition is limiting, arguing instead that local research suggests that the gaming industry on the whole is growing (Problem Gambling Library, 2018; Te Tari Taiwhenua, 2017; Tu, Gray, & Walton, 2014). Official statistics show that New Zealanders lost \$2.383 billion gambling in the financial year 2017/18 (Department of Internal Affairs, 2019a). This includes \$350 million lost to NZ Racing Board (TAB) gambling, a figure which has increased every year since at least as far back as 2010/11 (Department of Internal Affairs, 2019a, 2019b). In Australia, sports betting is the fastest growing form of gambling (Tansley, 2018). Stats NZ (2001) data highlights that the 1999 New Zealand Gaming Survey highlighted 86% of New Zealanders had gambled in the previous year, 41% of New Zealanders gambled at least once per week, and 48% of those who gambled had participated in betting on horse or dog races.
12. Harmful gambling is a significant public health concern (David, et al., 2017; Nikkinen, 2019). Deregulation and increasing betting opportunities specifically related to sports betting, as this Bill proposes (Racing Industry Bill, 2019, Explanatory note; Part 4,Subpart 1, c70-75), is increasingly leading to the normalisation of gambling in Australia (Tansley, 2018; Thomas, et al., 2012). Increasing better opportunities adversely affects public health and increases the risk of exposure of at risk groups, including children (Tansley, 2018; Thomas, et al., 2012). Researchers note that while children may not be targeted, they are none the less exposed through widely available products (Tansley, 2018).

13. The Canterbury DHB recommends that minimising harm from gambling must be the primary focus of all gambling-related legislation. In this Bill, however, harm minimisation are compromised in their design and contrary to other aims of the bill such as profitability. The Canterbury DHB is concerned that the referenced “sense of social responsibility” and regard to the interests of the community is lacking intent and focus in this Bill.

Regarding the Racing Integrity System and Racing Integrity Board:

14. The Canterbury DHB finds that the proposed Racing Integrity System (Racing Industry Bill, 2019, Part3) is deeply flawed in its design. The Bill seeks to increase economic development and sustainability of the industry by promoting self-governance (Racing Industry Bill, 2019, Explanatory note; Part 1) through the proposed TAB NZ who nominate the Racing Integrity Board [Board] (Racing Industry Bill, 2019, Explanatory note; Part 2), intended to be independent of the racing codes and government. The Board would be charged with compliance and adjudication.

15. The inadequacy of industry self-regulation is well established in research of comparable industries in terms of public health, such as alcohol and tobacco (Markham, & Young, 2015; Rintoul, Deblaquiere, & Thomas, 2017). New Zealand research has previously criticised a lack of independent accountability weakening the potential of public health initiatives (Adams & Rossen, 2012). Effective self-regulation by the Racing Industry would inevitably lead to loss of profit and is thus not in the industry’s interest (Rickwood, et al. 2010; Rintoul, Deblaquiere, & Thomas, 2017), as effective regulation would curb exploitative behaviour.

16. The Canterbury DHB is concerned that the Bill proposes that the racing codes continue to retain the power to make rules in relation to betting and conduct. The proposed Board is limited by the values of the industry whose primary interests are commercial. The Bill thus fails to promote nominations from other stakeholders whose primary focus is public health and wellbeing such as the health and Non-Government Organisation [NGO] sector, as well as from Pasifika and Māori groups whose people are at greatest risk of being disadvantaged by inadequate regulation (Dyall, et al., 2012; Tu, Gray, & Walton, 2014).

17. The Canterbury DHB opposes the proposed skill set of appointed Board nominees. Identified skills are exclusively industry based, focusing on experience in the racing industry, governance, investigation practices, disciplinary practices, adjudication, industry monitoring, performance measurement (Racing Industry Bill, 2019, Part2). The Canterbury DHB recommends instead that the skills of stakeholders include prevention, healthy policy, harm minimisation and rehabilitation expertise who are experienced with at risk communities, public/mental health, addiction/counselling services and health management.
18. The Bill recognises the need for broad consultation during the development of a problem gambling strategy, and is recognised in the Gambling Act that calls for consultation with representatives of the providers of problem gambling services and other groups believed to be affected (Gambling Act, 2003, Part 4, S317-318). However, consultation alone is inadequate as it carries no obligation to act upon provided information. Instead, given the harm minimisation obligation, the Canterbury DHB recommends that the Board have stakeholder representatives whose primary interest is community wellbeing as this will promote a harm minimisation approach of the Board as the “Explanatory note” suggests the Bill intends.
19. The government’s financial interest in the proceeds of gambling creates a significant conflict of interest when legislating with the view of protecting the health of the public (Nikkinen, 2019; Rickwood, et al. 2010). The Canterbury DHB believes that the mechanisms in this Bill fail to meet government’s obligations to protect public health.
20. The Canterbury DHB is concerned that the proposed Racing Integrity Board is expected to perform conflicting tasks such as ensuring compliance, protecting the public, promoting industry growth and maximising profitability (Racing Industry Bill, 2019, Part2). Inspectors are appointed by the industry-nominated (and industry-dependent) Board (c43), and thus will inevitably have a conflict of interest favouring industry. The requirement of the Board to consult with industry in making annual plans (c39&40) and formulating a statement of intent (c39&40) and business plan (c39&40) also compromises integrity and leads to the question of, ‘Who is accountable to whom?’.

Regarding funding of harm minimisation:

21. The Canterbury DHB agrees that the industry should fund the Racing Integrity Board [Board] as the Bill suggests (Part2, c37). However, the Canterbury DHB is concerned that the Bill suggests that funding is to be an amount agreed to between TAB and the Board (Part2, c37). As the Board is dependent on industry funding, the Board is disadvantaged in these negotiations and it is likely that funding will not be adequate to ensure public health and reduce gambling-related harm.
22. The Canterbury DHB recommends that the funding and appointment of the Board members are independent of industry and that legislation ensures other stakeholders, including Māori, Pasifika, health and NGO sector representatives are represented alongside industry experts in order to create balance of interests.
23. Given the amount New Zealanders lose to gambling, the resourcing of harm minimisation strategies and research is severely limited. The problem gambling related research budget is less than \$2 million annually (Baxter, Hilbrecht, & Wheaton, 2019).
24. Harm minimisation measures should be properly funded and enforced. Moreover, the understanding of harm minimisation needs to focus on commercial and other determinants of gambling harm, not merely those at an individual level (Wardle, Reith, Langham, & Rogers, 2019). There is evidence from other commercial sectors that interventions such as marketing restrictions could reduce population-level harm, although such approaches are threatened by the industry subverting such policies (Goyder, Blank, Baxter, & Schalkwyk, 2020); in this case, it seems unlikely the Board or industry would voluntarily adopt such reforms.
25. The proposed Bill is creating a situation where industry is in the most powerful stakeholder position to influence resourcing of harm minimisation. Consequently inadequate funding is likely to have adverse impacts of the health and wellbeing of New Zealanders that is anticipated to disproportionately affect already disadvantaged groups and increase inequity.

Local considerations and related harm

26. The Bill ignores broader health issues and resource demand related to gambling and racing in particular. Researchers highlight that gambling, major sports events and promotion of alcohol consumption are intractably linked in New Zealand (Dyall,

2007; Gee, Jackson, & Sam, 2013). In Canterbury alcohol related harm directly related to racing events puts pressure on hospital and police resources (Bayer, 2015, 2016; Wright, 2016). Recognition of the harm has required a local alcohol ban in the area of the event that needs to be enforced (Bayer, 2015; Wright, 2016). Sports, including racing actively promotes alcohol consumption leading medical professionals to call for legislative intervention (O'Brien & Chikritzhs, 2017). In previous events the coverage of alcohol related misconduct has been screened around the world, portraying Canterbury, New Zealand in an unfavourable light (Bayer, 2016).

Regarding the proposed creation of new betting products:

27. The Canterbury DHB recommends that the creation of new betting products proposed in the Bill be abandoned. The Bill's intent is to create new racing and sports betting products with the explicit goal to increase revenue benefitting the industry's financial sustainability (Racing Industry Bill, 2019, Explanatory note; Part 3; Part 4). The Canterbury DHB considers that new betting products will increase harm from gambling is incompatible with harm minimisation. The Bill empowers industry and expects financial returns by creating new betting products while expecting that industry will ensure harm minimisation.

28. Already over a quarter of people who bet on sports or racing events at least monthly experience some harm (Thimasarn-Anwar, Squire, Trowland, & Martin, 2017). It is well documented that significant proportions of gambling revenue come from people experiencing gambling problems (Abbott & Volberg, 2000; Australian Productivity Commission, 2010).

29. Some researchers argue that industry sustainability is dependent on harmful levels of gambling (Armstrong, Thomas, & Abbott, 2018). This consequently renders the dual aim of harm minimisation within the context of maximal profitability an impossible mandate. Rickwood, et al. (2010) highlight that continuous forms of gambling which include racing and sports betting have a stronger association with problem gambling than non-continuous forms of gambling.

30. Research also highlights that the creation of new betting products does not guarantee additional revenue but instead is likely to shift gambling within the

industry (Nikkinen, 2019). Given the overall growth in the gambling industry this is likely what happened in Aotearoa/New Zealand.

Equity and harm promoted by the Bill:

31. The western racing industry is promoted and dominated by the economic elite including businessmen, landholders and politicians promoting gambling as a community asset creating wealth (Dyall, et al., 2012; Markham, & Young, 2015; Mountier, 2013; Novak, & Allsop, 2009; Young, 2013; Millar, et al., 2016).
32. The financial value of the industry to both government and advantaged groups ignores the disproportionate harm gambling causes to disadvantaged groups (Dyall, et al., 2012; Tu, Gray, & Walton, 2014; Young, 2013) and results in class based exploitation (Markham & Young, 2015).
33. The Bill is built on the Australian example influenced by the Messara Report, whose author is an Australian Racing Industry expert. This is concerning as Australia's racing industry is increasingly criticised for aggressive marketing strategies by targeting at risk groups and normalising gambling for children (Tansley, 2018; Thomas, et al., 2012).
34. Research highlights that poorer areas experience 4.5 times more harm than wealthy areas in Aotearoa/New Zealand (Dyall, 2007; Tu, Gray, & Walton, 2014). Identified reasons include concentration of outlets in those areas and financial stress that promotes gambling as a potential means out of poverty (Dyall, 2007; Tu, Gray, & Walton, 2014). Māori and Pasifika are among those most disadvantaged and at risk. Māori are estimated to be up to three times and Pasifika 3.5 times (1.7% of Pasifika population) more likely to be problem gamblers (Dyall, et al., 2012; Stats NZ, n.d.; Tu, Gray, & Walton, 2014).
35. Furthermore it is acknowledged that the harm caused by gambling extends beyond the individual but affects whole families and communities, thus affecting many more individuals than prevalence data suggests (Baxter, Hilbrecht, & Wheaton, 2019; Browne, et al., 2017; Millar, et al., 2016; Rickwood, et al. 2010; Thomas, et al., 2012; Tu, Gray, & Walton, 2014). In New Zealand, one in fourteen adults report 'second-hand' gambling harm in the past 12 months (Thimasarn-Anwar, Squire, Trowland, & Martin, 2017). The adverse effects on children is also highlighted in research (Dyall, 2007).

36. The literature identifies at least six groups of adverse effects of gambling including negative impacts on physical health, emotional or psychological distress, financial issues, reduced work/educational performance, relationship difficulties and crime (Browne, et al., 2017).
37. Given the noted limitations of the Racing Integrity System and the failure to identify risk associated with new betting products or means to protect those most at risk, the Canterbury DHB considers that this Bill is likely to increase already existing inequity.
38. The Canterbury DHB is concerned that the creation of further betting products will increase availability and demand as the Bill intends without being able to ensure that those at risk are protected.
39. A critical analysis of this Bill must conclude that the Bill proactively promotes gambling liberalisation benefitting the government and industry as primary stakeholders profiting at the expense of already disadvantaged groups (Markham, & Young, 2015).

Summary of Recommendations:

40. The Canterbury DHB questions the need for legislative intervention intended to save the racing industry as evidence shows that gambling on the whole is gaining profitability in New Zealand despite direct and indirect public health risks associated with the racing industry.
41. The Canterbury DHB recommends that the creation of new betting products proposed in the Bill be abandoned. The Canterbury DHB recommendation is based on evidence that suggests that the potential gains will have negative effects on equity. Researchers agree that creating broader access to gambling products promotes wealth creation of the elite at the expense of already at risk communities.
42. The Canterbury DHB recommends that the proposed Racing Integrity System be reviewed and public health be prioritised. This should include:
- a) selection and appointment of Board members be approved by stakeholders other than just the industry;

- b) skill set of the Board should include Māori, Pasifika, public health and harm minimisation experience and priority instead of business and racing expertise; and
- c) funding of the Board should be determined by a party independent of industry and reflect a balance between money lost to gambling by the public and harm minimisation. Funding should ensure surveillance, enforcement, research and harm minimisation benefitting the most disadvantaged groups.

Conclusion

43. The CDHB does not wish to be heard in support of this submission.

44. If others make a similar submission, the submitter will not consider presenting a joint case with them at the hearing.

45. Thank you for the opportunity to submit on Racing Industry Bill.

Person making the submission



Evon Currie

Date: 11/02/2020

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