



8 October 2021

Our ref: BB21-217

Gambling Harm Team
Mental Health and Addictions
Ministry of Health
PO Box 5013
WELLINGTON

via email: gamblingharm@health.govt.nz

Tēnā koe

Draft Strategy to Prevent and Minimise Gambling Harm

Thank you for giving The Royal New Zealand College of General Practitioners the opportunity to comment on the Draft Strategy to Prevent and Minimise Gambling Harm.

The Royal New Zealand College of General Practitioners is the largest medical college in New Zealand. Our membership of 5,500 general practitioners comprises almost 40 percent of New Zealand's specialist medical workforce. Our kaupapa is to set and maintain education and quality standards for general practice, and to support our members to provide competent and equitable patient care.

Submission

We note that The Gambling Act 2003 sets out requirements for an 'integrated problem gambling strategy focused on public health'. The Ministry of Health is responsible for developing and refreshing the strategy at three yearly intervals, and for implementing it. The Act specifies that a needs assessment is required, and consultation must occur as part of this process.

Support for the New Zealand Medical Association submission.

The College supports the submission made by the New Zealand Medical Association (NZMA) in response to the Draft Strategy to Prevent and Minimise Gambling Harm, which is attached.

In their submission the NZMA emphasise the disproportionate burden of gambling harm experienced by Māori and Pacific peoples and the role of the distribution of non-casino gaming machines (NCGMs). Greater concentrations of NCGMs, the most harmful form of gambling, are found in lower socioeconomic status and high deprivation areas. The College echoes the NZMA's call for more effective measures to restrict the availability of gambling venues/machines.

Health improvement practitioners and addressing gambling harm

In addition to supporting the NZMA submission, and on a positive note, the College would like to mention the contribution of Health Improvement Practitioners (HIPs) and health coaches to supporting patients seen in general practice, who are experiencing gambling harm.

These new roles are being established under the Access and Choice Initiative.¹ The ability to do a warm handover to an onsite health practitioner assists greatly in establishing the trust necessary for mental health and addiction issues to be explored and addressed. Currently the Access and Choice services are only in operation in a minority of practices. The College looks forward to further roll out of this initiative.

Conclusion

The College participated in two of the forums held in September. We thank you for providing these opportunities.

We look forward to learning the outcome of this consultation. Please don't hesitate to contact the College if you have any questions, or seek additional information at policy@rnzcgp.org.nz

Nāku noa, nā



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¹ <https://www.health.govt.nz/our-work/mental-health-and-addiction/primary-and-community-wellbeing/expanding-primary-mental-health-and-addiction-support> Accessed 7/10/21