

In This Issue

2010 International Gambling Conference.....	2
A Unique Way to Raise Public Awareness about Problem Gambling.....	3
The Problem Gambling Competencies Survey.....	4
Neove Christoforou – Compliance and Community Outcomes Manager	6
Pokie Spend Drops 10 per cent	7
Gambling Regulation – Who does what?	8
Gambling and Children – What help is available for them?	9
Kia Ngatahi Te Waihoe – Let Us Paddle In Unison.....	10
Ministry of Health	11
Calendar of Events	16

This newsletter is bought to you by the Problem Gambling National Coordination Service; a Ministry of Health Contract being delivered by The Salvation Army in partnership with The University of Auckland's Centre for Gambling Studies.

The views and opinions expressed in this newsletter do not necessarily represent those of the above parties.

From the Desk

Lisa Campbell-Dumlu & Michelle O'Loughlin
Problem Gambling National Coordination Service

Tena Koutou Katoa, Warmest Greetings!

I am very pleased to introduce to you all - Michelle O'Loughlin:

Hello from your new National Co-ordinator! I started on the 2nd June 2009 and have been working alongside Lisa Campbell-Dumlu, whose experience and knowledge of the Problem Gambling National Co-ordination Service and hands on approach has been very beneficial in caretaking this position. Lisa will help me get up to speed to ensure we deliver the service you require.

I have come from a background in project management and previous to that, a role with elite athletes, both of which involved relationship and event management. I am looking forward to bringing the skills I have developed and my maturity, experience and enthusiasm to this new position. I look forward to meeting with you over the next few months and building strong relationships to ensure the best possible outcomes for all.

Since the last newsletter in February 2009, the National Coordination Service has successfully hosted the Problem Gambling National Provider Forum on 1st to 3rd April 2009 and the National Pacific Fono on 10th to 11th June 2009.

The next National Maori Hui has been postponed from June to later in the year and will be combined with the October Hui (6 - 8 October 2009) into one larger event mandated by the Maori Caucus meeting at the National Provider Forum in April. The Hui will be hosted by Te Rangihaeata Oranga in Napier. We have recently hosted a Maori working party meeting to plan for the October Hui.

The Asian Forum has also been postponed to 22nd and 23rd July and the National General Provider Forum has been postponed for the time being due to many conflicting events and commitments during July 2009.

We would like to draw your attention to the upcoming consultation programme that the Ministry anticipates it will be hosting in July 2009 to discuss its 2010-2016 Six Year Integrated Strategy for Preventing & Minimising Gambling Harm. We encourage providers to facilitate support and attendance at these regional meetings to ensure that all interested parties have an opportunity to participate in further discussion regarding the strategy and have any queries or questions responded to. There will be the opportunity to make written submissions and details around the process and timing, together with the venue dates and times for the consultation meetings will be confirmed and advised to all providers once the Ministry has received Cabinet approval to proceed.

Continued...

From the Desk...

We would also like to apologise for the delay in getting the Forum presentations and Summary of Proceedings for all events out to you. We have now developed a Problem Gambling National Coordination Service web-page on The Salvation Army website for you to download information from - <http://www.salvationarmy.org.nz/here-to-help/addictions/national-coordination-service/>.

We would like to thank all those people and organisations that have sent in articles for this newsletter edition and supported and helped this service to organise all of these events.

Again, this quarterly newsletter is your newsletter. So we welcome your contribution, suggestions and ideas. It's an opportunity to profile the work of your service or debate weighty issues relevant to the sector. Go ahead and send your thoughts. Or pick up the phone and call us.

Ma te Atua me te Wahi ngaro tatou e tiaki e manaaki

May God and the origins from which all things come from, bless and keep us.

Conference...

2010 International Gambling Conference

The Gambling and Addictions Research Centre (GARC) at AUT University, The Problem Gambling Foundation and Hapai Te Hauora Tapui, Maori Public Health have joined forces to organise the 2010 International Gambling Conference.

The Conference theme is Gambling in the 21st Century: The Implications of Technology for Policy, Practice and Research.

In many parts of the world the gambling industries remain potent - expanding into new markets, changing and evolving in diverse ways. New and emerging technologies are major drivers of this growth. The Conference will examine these technologies and their implications for the future shape of gambling and the groups of people who might be targeted or impacted. The Conference will also consider the enhancing measures needed to prevent and reduce harms associated with gambling. Such measures include government policy and regulation, industry practice, public education, culturally appropriate education, community engagement and advocacy, indigenous responses, prevention, early and brief interventions, treatment and rehabilitation.

While we particularly welcome presentations with a technology focus, the programme will include papers, workshops and posters addressing other aspects of innovative practice and research that advances fundamental knowledge and informs gambling policy and professional practice.

The Venue for the conference is: Crowne Plaza Hotel, Auckland, New Zealand. The date is 24-26 February 2010.

A Call for Abstracts will be out soon and will be available on the GARC Conference website which is accessible through the Conferences page at www.aut-grc.ac.nz.

For further details contact Maria Bellringer on maria.bellringer@aut.co.nz; Cynthia Orme on Cynthia.orme@pgfnz.org.nz; Zoe Aroha Martin on zoe.martin@hapai.co.nz



AUT UNIVERSITY GAMBLING AND ADDICTIONS RESEARCH CENTRE



A Unique Way to Raise Public Awareness about Problem Gambling

Glenda Northey,
Problem Gambling Foundation of New Zealand

On the 1st of April 2009, Alastair Galpin was suspended 18 metres above the ground in a cage at Rainbow's End by Auckland Cranes. He remained there for 21 days and spent his time busily conducting radio interviews with stations in New Zealand and around the globe. His efforts raised awareness about problem gambling while he counted down to 100 - **100 Radio Interviews Suspended in a Cage**; a new Record Holders' Republic Title.

Warding off motion sickness and 50 knot winds Alastair used his unique style of social activism to talk to DJs in over a dozen countries, while living in a 2 meter by 2 meter Portacom disabled loo. Working from the PGFNZ factsheets which cover more than 20 key areas of problem gambling including older adults, youth, women, crime, ethnicity and family violence, Alastair generated a great deal of media interest in our cause.

To date, the PGF and Alastair have had a three-year collaboration, which has seen pokie machines dropped from a helicopter and the setting of a brief world record with then chief executive John Stansfield: 57 radio interviews in 24 hours. However, this record was short-lived as it was usurped by American rock band Fall Out Boy.

We are now eagerly awaiting Alastair's next 'extreme' idea.

For further information, please contact Glenda Northey on Phone (09) 369-0619, Email: glenda.northey@pgfnz.org.nz



The following radio stations played extracts of these interviews over the 21 days that he was airborne.

NZ Stations:

TV1, TV3, Alpha 96.1 FM, Volcano Radio, Peak FM, Classic Hits Ashburton, InfoNews.co, Scoop.co, Big FM, Up FM, Life FM, The Flea FM, Radio Puketapu, Kiwi 929 FM, Plains FM, Radio Active, Soundwave FM, 1XX FM, Radio 1, Beach FM, George FM, K FM, Waiheke Radio, Radio Woodville, 106.7 FM, Sunday Star-Times, Classic Hits Southland, Classic Hits Wanganui, Classic Hits Gisborne & Masterton, Classic Hits Northland, SJAC 106.7, Classic Hits West Coast, Kool FM, The Rock, Classic Hits Dunedin, Human FM, Ngati Hine FM

International stations:

World TV, Radio Sport 927, Radio Verulam - UK, Topicala.com, USAToday.com, CJOB - Canada, CJAD - Canada, Light FM - Aus, BBC Scotland, Two Lochs Radio - UK, OFM - South Africa, Isles FM - UK, The Bridge FM - UK, VRT - Belgium, WA FM - Aus, GME - Aus, Cuillin FM - UK, Great Southern FM - Aus, CKBW - Canada, 2BR - UK, Aston FM - UK, Saint FM - UK, Falkland Islands Radio Service, Somer Valley FM, RTR FM - Aus, Jack FM - UK, Fm 107.9 - UK, K57 Radio - Guam, Heart 103 UK, Reading 107 - UK, 3TR - UK, Express FM - UK, Unity 101 - UK, Vibes Radio - Belize, CAAMA - Aus, Three D Radio - Aus, Radio Port Douglas - Aus, Asian Star 101.6 FM - UK, Zinc 100.7 FM - Aus, Forest 92.3 - UK, West FM - Aus, Radio 4LG - Aus, Radio 4AM - Aus, Triple M - Aus, 4BC - Aus, 4TO - Aus, Radio Teesdale - UK, Revival Time Radio - Aus, 98.5 FM - Aus, Swindon 105.5 - UK, Spire FM - UK, Palm 105.5 - UK, Radio Reverb - UK, 99.7 FM - Aus, 94.7 FM The Pulse - Aus, Hot 91 FM - Aus, Beau FM - Aus, 4FM - Ireland, Today FM - Ireland, Near FM - Ireland, Midwest Radio - UK, FX 101.9 - Canada, Star FM - Aus, 2UE - Aus, 891 ABC Adelaide - Aus, Kiss FM - Aus, Newstalk 106-108 - Ireland, Q104 - USA, Radio St Austell Bay - UK, Colourful Radio - UK, i102104 FM - Ireland, 103.1 Power FM - Aus

The Problem Gambling Competencies Survey



Abacus Counselling Training and Supervision Ltd

At the recent National Forum, Abacus provided an update on the survey that was currently underway, and the feedback that had been received from problem gambling (PG) treatment practitioners and PG organisations. An additional four questions were asked of those PG practitioners attending, and these centred on: training requests, perceptions on tobacco intervention as part of PG treatment, alcohol problem prevalence amongst PG clients, and intention to remain in the PG treatment field.

There was a strong level of response to the survey from organisations funded for PG treatment: 15 of the 17 that were surveyed provided feedback. Of these 15 organisations, 57 individual practitioners responded, with two-thirds reporting that treatment comprised most of their work.

Although the surveys differed between the organisations and the practitioners, the first five questions were the same.

1. Minimum PG and AOD competencies?

The first question asked whether both PG and alcohol and other drug (AOD) practitioners should have some minimum joint competencies that may overlap each treatment practice. From the four response options (No – they are distinctly different fields; Perhaps – but only because PG clients may have AOD problems too; Possibly – I'd need more information; and, Yes – they have some similarities that would support this), most respondents 'agreed':

- PG organisations: 73% strongly agreed, and none disagreed.
- PG practitioners: 61% agreed, and only 10% disagreed.

The second question asked that, when AOD issues arose with PG clients, should the PG practitioners have skills to address these? All organisations and the majority (82%) of practitioners agreed:

- PG organisations: 60% said yes, definitely; 33% said yes, if basic skills; and, one (7%) indicated that many already have these.
- PG practitioners: 49% said yes, definitely; 33% said yes, if basic skills.

2. DAPAANZ as the PG professional body?

Feedback was sought as to whether or not DAPAANZ, the professional body for many AOD workers, could also provide the same service for the PG field. PG organisations were generally supportive while practitioner responses were more mixed and indicated more information was required:

- PG organisations: 60% yes; 13% probably; and 13% no. One-fifth (20%) indicated that they needed more information and were unsure if it could accommodate their service work.
- PG practitioners: 41% did support this idea (30% yes; 11% probably), while 23% said no. However, a further 37% were not sure and sought further information.

A following question addressed the need for DAPAANZ to seek to register under the Health Practitioners Competency Assurance Act and perceptions of any advantages and disadvantages that may arise from doing this. Responses from PG organisations were mixed: 43% said yes; 7% said probably; 14% said no and 36% indicated that they were unsure and would need more information.

3. Competency levels

Many professional organisations, including AOD, have different levels of practitioner competency to allow membership at different skill/qualification stages, such as support, associate and registered practitioner level. While there was strong organisational support for a multi-level PG model, practitioners were more uncertain:

- PG organisations: 80% said yes; 7% said no; and, 13% wanted more information first.
- PG practitioners: 47% said yes; 23% said no; and, 30% required more information.

4. Organisation questions

PG organisations were asked to rate the degree of relevance of a range of AOD competencies for PG practitioners. Responses can be summarised as follows:

Alignment of PG with AOD:

- There was very little concern that PG practitioners would gravitate from PG to the AOD field;
- Two-thirds were not concerned that there would be raised expectations for them to also address client AOD issues without additional resources;
- Only one in five PG organisations were concerned that there would be a movement towards a medical model of treatment; and,
- One-third had no concerns of any kind.

AOD practitioners having to have competencies to intervene in PG:

- A majority of services believed this would increase referrals to PG services from AOD – a third believed some or all of these clients would be retained by AOD.

Concerns around compulsory minimum practitioner requirements:

- The large majority (80%) did not think these would deter practitioners from the field and/or raise the wages being offered;
- A majority (60%) believed that the professional standards and alignment with AOD would attract practitioners to the field; and,
- The remaining 20% largely agreed with the benefits of alignment and increased standards.

Current staff:

- The large majority (80%) had no concerns as to the abilities of their staff in meeting increased professional standards and competency requirements; and,
- Most (67%) had confidence that transition allowances would be available to enable their staff to meet such competency requirements and/or funding would not disadvantage them by requiring these standards to be met.

Overall:

- The majority (69%) believed that the establishment of minimum competencies was necessary and timely, with only 25% withholding their view, until more information was available.

5. Practitioner questions

Practitioners were invited to assign a competency value to some 27 possible topics that could be required of PG practitioners (very relevant/quite relevant/some relevance/no relevance).

- All topics were identified as having importance (i.e. 70% or more indicated that they were 'quite relevant' or 'very relevant').
- The standout topics (i.e. those selected by 70% or more as being 'very relevant') were:
 - Relating and communicating (87%);
 - Professional responsibility (87%);
 - Unique features of working with gambling problems (81%);
 - Relapse prevention strategies (77%);
 - Assessment and intervention planning (76%);
 - Intervention management (74%); and,
 - Professional and personal development (73%).
- Further suggestions were made by 24 PG practitioners, most of which provided one or two additional topics.

The National Forum Survey

Sixty-six delegates at the forum provided feedback on four questions that added to the competency information.

Training of interest

A substantial list of training categories (37) was identified, with the most popular of these being Motivational Interviewing, CBT, CLIC, Socratic questioning, DBT, and treatment for affected others.

Tobacco intervention

Delegates were asked how important it was to address smoking as part of the PG treatment that they provided. One in four (27%) considered it very important and that it might otherwise influence a PG relapse. A further comparable proportion (29%) thought it possibly important and that it may influence gambling in an unknown way. Approximately one-third (31%) thought it was quite important for health reasons (not to do with PG), and only 13% thought it not important and that it would interfere with their PG treatment. For most that would intervene with regard to their clients' use of tobacco, 64% would aim to motivate clients to stop, 26% to cut down, and 10% to do either.

Stopping is the approach of Tobacco Cessation, with the view that no level of smoking is safe.

AOD prevalence with PG clients

In the experience of the delegates:

- 69% believed that close to 60% of their clients would be misusing alcohol or other drugs;
- 26% believed that 30% of their clients would be misusing alcohol or other drugs; and,
- 2% choose alternatives.

This compares with over 70% identified by Petry and colleagues (2005).

Retention

Delegates were asked to indicate their intentions of staying in the PG field. The large majority (78%) indicated that they intended staying in the field, with 17% considering leaving, and 5% intended to definitely leave.

Conclusions

These surveys will assist in informing the development of PG competencies and in their alignment with those of the AOD field, and the strategic direction indicated in the Ministry of Health's publications. Abacus wishes to thank all of the organisations and practitioners who participated in the surveys, and provided important information toward the development of their competencies for the future.

For further information, please contact Abacus on Phone (09) 360-6957, Email: acts@acts.co.nz

Compliance and Regulation...

Neove Christoforou – Compliance and Community Outcomes Manager

Neove Christoforou

Department of Internal Affairs – Te Tari Taiwhenua

Neove Christoforou is the Compliance and Community Outcomes Manager for the Department of Internal Affairs' Gambling Compliance Unit. Neove and her team, which consists of six gambling inspectors, often visit class 4 venue operators and societies to evaluate their compliance with the Gambling Act 2003.

"Our regulatory objectives are to ensure the integrity of gambling. This includes seeking to increase the return to the community from non-casino gambling operations. We also want to prevent and minimise harm and crime associated with gambling. We're working with providers to help them adopt a 'best practice approach' and meet the requirements under the current legislation," said Neove.

On their 'rounds', Neove and her team undertake mystery shopper inspections, look at venue access conditions, ensure that staff have received the appropriate training (e.g. for problem gambling awareness), and check that the right information is available for the public (e.g. self-exclusion procedures) - just to name a few tasks!

Neove says that most people are pretty welcoming and appreciate the visits as they can talk about any issues they have face-to-face and work through them together. As well as meeting with providers, she keeps in touch with local councils, community groups for whom gambling raises funds and organisations that provide gambling services and research into the social effects of gambling. One recent community event Neove attended was the Central Districts Field Days event in Feilding, where the Wellington Compliance team operated a stall and gave out information such as funding fact sheets.

The role of Compliance and Community Outcomes Manager is reasonably new. It was created one year ago, after Gambling Compliance Director Mike Hill recognised the need for the position. He identified Neove as the ideal candidate, as she had prior experience in the Department and has a real passion for compliance and community work.

"This position was the perfect fusion of the two! I'm a real 'people-person' and I love getting out there and helping people. The gambling sector is an interesting, complex area to work in and the Department is great business to be a part of. The job stretches me and makes me think but I really thrive on a good challenge!

I am very approachable and encourage people to contact me if they need any help, advice or information," said Neove.

Neove hails from Cyprus and she is very active in the Greek community in Wellington. She is completing her Masters in Public Management at Victoria University and has previously worked for Porirua City Council, social housing and Treasury.

For further information, please contact Neove Christoforou on Phone (04) 495-7200, Email: neove.christoforou@dia.govt.nz



"I realise the value in having the support of the local communities. I'm trying to engage and facilitate community involvement in decisions about the provision of gambling. A lot of great ideas have come out of casual conversations! The Department isn't just hiding behind a building - it has a real presence. Our involvement with the communities, on ground level, is making a huge difference,"

Pokie Spend Drops 10 per cent

Department of Internal Affairs – Te Tari Taiwhenua

Gaming machine expenditure in pubs and clubs in the first three months of this year was almost 10 per cent lower than the previous quarter, according to figures released by the Department of Internal Affairs. Spending dropped from \$230.7m at 31 December 2008 to \$208.7m at 31 March 2009. Twelve months ago the first quarter spend of 2008 showed a similar drop of 11 per cent but rose in the following two quarters.

Expenditure in the year to 31 March 2009 at \$902.7 million was 4.5 per cent lower than the \$945 million recorded for the year to 31 March 2008.

The spending is captured through the electronic monitoring of non-casino gaming machines (EMS) which became fully operational in March 2007. The Department can track and monitor operations, ensuring the integrity of games and the accurate accounting of money

Non-casino GM spending by Society Type January to March 2009

Society Type	Total GMP Quarter	% of Total
Non-Club	\$180,417,054.30	86.5%
Sports Clubs	\$4,230,252.72	2.0%
Chartered Clubs	\$15,872,629.52	7.6%
RSAs	\$8,149,284.81	3.9%
Total Club	\$28,252,167.05	13.5%
Total All	\$208,669,221.35	100.0%

Non-casino GM spending in quarter ended

31 March 2009	\$208.7 m
31 December 2008	\$230.7 m
30 September 2008	\$232.3 m
30 June 2008	\$231 m
31 March 2008	\$218.5 m
31 December 2007	\$245.3 m
30 September 2007	\$243.5 m
30 June 2007	\$237.7 m

Internal Affairs Director of Gambling Compliance, Mike Hill said the number of gaming machines, was slightly down on the December 08 quarter, but has remained at around 20,000 since the introduction of EMS. There were also fewer licensed societies and venues compared with the December quarter.

Licensed gambling operations in pubs and clubs

Date	Licence holders	Venues	Gaming machines
31 March 2009	394	1527	19,739
31 Dec 2008	399	1537	19,879
30 Sept 2008	405	1551	20,025
30 June 2008	415	1552	19,856
31 March 2008	421	1569	20,018
31 Dec 2007	428	1585	20,182
30 Sept 2007	435	1593	20,163
30 June 2007	439	1598	20,120
31 March 2007	444	1607	20,302

Further information, including numbers of venues, machines and expenditure by territorial authority and changes in the quarter, is available from the Department's Gaming Statistics web page at: www.dia.govt.nz

Gambling Regulation – Who does what?

Neve Christoforou, Department of Internal Affairs – Te Tari Taiwhenua

Gambling in New Zealand is regulated by the Gambling Act 2003, which replaced the Gaming and Lotteries Act 1977 and the Casino Control Act 1990.

The Department of Internal Affairs works to ensure that gambling is safe, fair, legal and honest, through effective regulation and enforcement.

The Department's Gambling Compliance Group is responsible for all forms of gambling law enforcement and licensing gambling outside casinos (except in relation to the Racing Act 2003).

The Department:

- Provides advice to the Government on gambling policy
- Licenses class 3 and 4 gambling (mainly large-scale lotteries and gaming machines)
- Assesses the suitability of certain persons working or seeking to work for gambling providers
- Sets game rules and equipment standards for all licensed gambling
- Sets minimum operating standards and regulates compliance in casinos
- Monitors and ensures compliance with the Gambling Act, regulations, licence conditions, game rules and standards
- Provides public information and education.

Further information can be found on the Department of Internal Affairs website: www.dia.govt.nz

Gambling Commission

The Gambling Commission is responsible for licensing casinos and hearing appeals against decisions made by the Department of Internal Affairs in relation to both casino and class 4 gambling.

The Gambling Commission:

- Specifies, varies and revokes casino licence conditions
- Considers applications for the renewal of casino venue licenses when they expire (the first expires in 2019)
- Approves agreements and changes to agreements between casino operators and casino venue licence holders
- Considers and determines appeals against regulatory and licensing decisions made by the Department of Internal Affairs
- Considers and deals with complaints about the way the Department of Internal Affairs has handled complaints in relation to class 4 gambling.

Note: The Gambling Commission has the powers of a Commission of Inquiry. In relation to class 4 gambling, its rulings on appeals arising from Department of Internal Affairs decisions are final. In relation to casino gambling, its rulings on licence conditions or to cancel or suspend a casino licence can be appealed to the High Court and ultimately the Court of Appeal.

Further information can be found on the Gambling Commission's website: www.gamblingcom.govt.nz

New Zealand Lotteries Commission

The New Zealand Lotteries Commission conducts Lotto, Instant Kiwi and a range of other gambling activities, to raise funds for distribution to the community by the Lottery Grants Board.

The New Zealand Lotteries Commission:

- Promotes, organises and conducts New Zealand lotteries
- Develops game rules for Lotto, Instant Kiwi etc
- Maximises profits whilst ensuring that the risks of problem gambling and underage gambling are minimised.

Further information can be found on the Lottery Commission's website: www.nzlotteries.co.nz

Ministry of Health

The Ministry of Health is responsible for the funding and co-ordination of problem gambling services.

The Ministry has developed a six-year integrated problem gambling strategy focused on public health called, 'Preventing and Minimising Gambling Harm'. This document outlines:

- Measures to promote public health by preventing and minimising the harm from gambling
- Services to treat and assist problem gamblers and their families and whānau
- Independent scientific research associated with gambling
- How the strategy will be evaluated.

Services are funded through a vote health allocation and the Crown recovers the cost of developing and implementing the strategy through a levy on gambling operators.

The problem gambling strategy can be found on the Ministry of Health website: www.moh.govt.nz

Gambling and Children – What help is available for them?

Vicki Hirini, The Salvation Army Oasis Centre, Wellington

On a gusty Sunday morning I set up a table at the Te Ra o te Raukura Health Expo tent. Te Ra o te Raukura is a 'fair' at the Waiwhetu Marae complex in Lower Hutt. Food stalls, kapa haka, taonga and music were presented at their sports park for whanau, friends and locals. Our tent snapped scarily in the wind, but our Oasis flag stayed tightly roped to our table so everyone knew where and who we were.

We had a good number of people past our table, and some were brave enough to fill in a brief, and be seen talking to the 'gambling lady'. Music and performance on the stage nearby attracted a good crowd to our end of the park. The atmosphere was pleasant and very whanau friendly. I think that's why we got the unusual response we did from some of the children present. I have never had children as young come up to me before to talk about their parents' problems!

When the first young boy, about 9 or 10 years old, came up he was very shy, but determined to talk about gambling. Basically I let him talk about his worries. I asked if there was a teacher or someone in his whanau he could trust to talk to about things? It was a very hard conversation, he kept his head down most of the time and mumbled brief sentences from behind his hand. I don't know if he heard me tell him about some phone numbers he could ring if he wanted to know anything else at another time. Eventually he wandered off with a bag of information, and I was left feeling very unsure of how it had all gone for him.

The next pair that appeared were brothers. They wanted to make sure that nothing they said would get back to their parents. After they had been reassured, they too told of their worries. Again I gave them a bagful of information and encouraged them to look to their families or schools for someone they could trust, to go to, when they were most worried.

The next youngster was a very tough girl, maybe about 11 years. She wasn't worried about her parents. If they lost their money she didn't care. She just looked after herself, she wasn't going to show any fear or concern about her situation! Not for her the bag of information or a chat about the options of what to do in scary situations around problem gambling. But she did give me a lot of information, and I was also able to acquire some from our conversation and I finally got her to take some resources.

I was struck by the different ways these young children had coped with their problems. One obviously felt shamed, 2 were fearful and 1 was staunch and tough on the exterior. But they were all affected by problem gambling and I felt very unsure that anything I had done was able to help them. I hoped that talking with them would show the children they were dealing with a real problem and that other 'professional' people recognised their problems.

As I was mulling over these and other thoughts, my first young client reappeared. He sidled up to me and in a very small voice asked if his Nanny could get some help, because Uncle came home and got angry at her when he didn't have any money. I tried to get him to bring his Nanny over, 'maybe Nanny could come over herself' I asked? But again he disappeared into the crowd.

As I packed up our table at the end of the day, I couldn't stop thinking about the insidious damage being wreaked in the homes of these and other children and the lack of specific services available to support them – what a tragedy!

For further information, please contact Vicki Hirini on Phone (04) 389-6566, Email: Vicki_hirini@nzf.salvationarmy.org

Kia Ngatahi Te Waihoe.....Let Us Paddle In Unison

**Kia ngatahi te waihoe
Tahuri te kei o tō waka whawhati Ngaru
Haere ki tua, papapounamu te moana
E topa, e rere ki uta**

**Let us paddle in unison
Turn the front of the canoe
Into the waves and push through them
Because past the waves the ocean is flat
And we will speed off into the distance**



Established in 2002, Te Rau Matatini brings together a range of national programmes that contribute to Māori mental health and addiction workforce development, as well as primary public health workforce priorities. At the core of this organisation is a drive and determination to sustain, strengthen and grow the mental health and addiction workforce by delivering quality focused programmes that ultimately empower a range of health workforces to respond to community needs.

Te Rau Matatini offer a range of initiatives which include Henry Rongomau Bennett programme, Bursaries-Scholarships, Leadership and Management programmes, Organisational Development- HR, emergency department online learning courses, Occupational Therapy and Professional Development Recognition tailored for Māori Nurses working in NGO's, opportunities for Māori mental health community workers and many other exciting initiatives.

Hoe Whā is only one of the Hoe (paddle) that continues to accelerate and steer the Topatopahia te rere O te Waka Programmes. The other three 'Hoe' on offer are, Hoe Tahi scholarships for the development of the addiction workforce; Hoe Rua work based placements for new recruits entering the addiction workforce, Hoe Toru secondments, strengthening existing relationships for those already in the addiction workforce.

Te Rau Matatini is extremely excited about the maiden voyage of their newest Hoe. Hoe Whā is our most recently acquired workforce development initiative through the Topatopahia te rere O te Waka programmes. The aim of the Hoe Whā is to support relevant research which aligns with the Ministry of Health's integrated problem gambling strategy. This will help inform future priorities for both the sector and the Ministry of Health.

We all know that growing the problem gambling and addiction workforce, as well as supporting the various sectors to work in unison is fundamental to the success of reducing the effects of gambling harm.

This year Te Rau Matatini is delighted to inform that 12 scholarships were awarded to the following recipients through the Hoe Whā Programme.

Undergraduate

Rena Silipa
Aukositino Senio
Margaret Ryniker
Lewis Neera
Jan Howells

Postgraduate

Ruth Ann Herd
Rene Andre
Peter Ashton
Sarah-Eve Harrow
Quin Tang
Zoe Martin
Matthew McMillan

The research of these bursars will be informative and current, finger on the pulse research, which can only benefit and strengthen the entire addiction sector.

Are you interested in undertaking Masters Thesis or PHD from a gambling perspective or are intending to study in 2010? We want to hear from you.

For more information please contact the Effective Interventions Team:

Tracey Potiki

Seru Tiqatabua

Phone: 04 473 9591 or 0800 MATATINI (628284)

Website: www.matatini.co.nz

A Ministry of Health Update

National Problem Gambling Team – Provider Update – June 2009

The quarter has been another busy period for us all. The ability to stay focussed on our core activities is continually challenged with the distractions and demands of the political and economic environment in which we have to navigate. I am not under-estimating the challenges that this unpredictable and changing environment also has on all problem gambling service providers. Again there are many projects being worked on by the national problem gambling team and I value this opportunity to update you all on these projects via this newsletter.

New Appointment to the Problem Gambling National Co-ordination Service

Firstly, I would like to extend a welcome to Michelle O’Loughlin, who has been appointed by The Salvation Army to the role of Problem Gambling National Co-ordinator. Michelle commenced in the role on Tuesday 2 June. Michelle’s most recent work history has been in the building and construction project management field and involvement in the elite performance coaching for the New Zealand Gymnastics team. A key aspect of these roles has been in establishing, developing and maintaining strong relationships with stakeholders and community groups. This will be an important aspect of the new role she takes on with the national co-ordination service and I am sure that you will all welcome and support Michelle as she gets to know you all.

Update on the Ministry’s Integrated Strategy

The Ministry has circulated its draft problem gambling consultation documents to other government departments for their initial comments. This is the first step that is required in a lengthy consultation process, following the Ministry’s internal sign-off processes.

Once comment from across government is addressed, the draft document, containing a new six-year strategic plan, needs assessment, three-year service plan and problem gambling levy calculation will be put up to Cabinet for approval to consult publicly. The Ministry is working to a tight timeframe for sign-off for the consultation document and the associated consultation process. It is currently anticipated that public consultation will start early July 2009, with the relevant material posted to the Ministry’s website.

Details on the Ministry’s process and how to make a submission will be posted to the Ministry’s website in June and the Ministry will ensure that providers are kept informed of the process.

National Problem Gambling Provider Forum 1 – 3 April 2009

A highlight of the quarter was the National Provider Forum hosted at The Salvation Army East City Corp. I had the privilege of addressing this Forum and it was very gratifying to see all providers represented at this important event.

It was a very successful event and has received positive feedback from the sector. The mix of key-note speakers, motivational speakers, workshops and presentations was well balanced and structured into three very full and satisfying days for all participants. Copies of all presentations and other related material are in the process of being disseminated via the problem gambling national co-ordination service section of The Salvation Army’s website.

I would like to express the Ministry’s gratitude to all those that made the event possible and all those providers that contributed to the event. These Forums are provided as an avenue for networking, sharing of knowledge and building of clinical and public health capacity within the sector.

Review of Intervention Services

There has been much speculation and some inaccurate public statements about funding reductions that the Ministry has imposed on intervention service providers. I wish to elaborate on this for the sake of completeness and transparency.

The Ministry has undertaken a detailed service review of all its contracted problem gambling intervention service providers based on service delivery over the 2008 calendar year. The overall results indicated that, for a number of providers, there was an under-utilisation of service in some areas. This level of under-utilisation cannot be sustained by the Ministry. As part of sound contract management practice, the Ministry is working through funding adjustments and resource realignments, where necessary, with a number of providers. It is not appropriate to comment on the impact of these changes at an individual provider level as a number are still proceeding through the “contract negotiation” phase.

If there are any specific issues that you wish to clarify at an individual provider level, then your first point of contact should be with your assigned contract manager within the national problem gambling team.

Web-based Resource – Territorial Authorities

The Ministry of Health has recently completed a Problem Gambling Resource for Local Government, which is available on the Ministry's website: <http://www.moh.govt.nz/moh.nsf/indexmh/problemgambling-localgovt>.

The purpose of the resource is to assist Territorial Authorities with their Class 4 (all gaming machines outside casinos) and TAB gambling venue policy reviews. It will also be a valuable tool to assist Territorial Authorities to work with service agencies in their regions to respond to community needs. The Ministry has worked with the Department of Internal Affairs and Local Government New Zealand to develop the resource.

This resource includes:

- information about gambling legislation and the roles of various Government departments in New Zealand
- the role of the Territorial Authorities in reviewing their gambling venue policies (including what they are required to do, what they may choose to do, and what they cannot do)
- gambling venue policy options for Territorial Authorities
- background information on the economic and social impacts of gambling and problem gambling in New Zealand
- guidance on the statistics that could be used to inform gambling policies, based on available and well-referenced research
- guidance on how the Territorial Authority could best present the statistical information (using tables, graphs, and/or charts) so that it is easily understood.

The development of the resource is consistent with the Ministry's integrated problem gambling strategy, which includes an objective to promote healthy public policies in relation to gambling harm, and an objective to enhance the capacity of communities to define and address gambling harm.

The Ministry will be completing a review and update of the publication in one year, at which time the Ministry will also give consideration to any feedback received about the publication.

National Pacific Problem Gambling Provider Fono 10-11 June 2009

On the back of a very successful Pacific fono and associated clinical training day, held in November 2008, the next fono was held on 10 - 11 June 2009. It was a valuable opportunity for our Pacific providers to get together to share ideas and network as one 'family', which is a fundamental platform of Pacific culture. The associated clinical training day will once again be delivered by Abacus. Thanks to all those who have made time to contribute to the fono.

National Maori Problem Gambling Provider Hui 6 – 8 October 2009

There has been a high level of dialogue among Maori providers and the national co-ordination service around the forthcoming Maori national problem gambling hui originally scheduled for late July. It has been unanimously decided that the preference is to delay the hui until 6 – 8 October 2009 when the marae venue is available, appropriate guest speakers can be secured and arrangements properly concluded for a celebration launch of the Whakatau Mai Ra national gambling research project findings.

Maori providers have also expressed a desire that the associated clinical training days for this hui be separated out. Accordingly, two separate clinical training days for Maori service providers have now been tentatively scheduled to be held on 5 August 2009 in Hamilton, and 12 August 2009 in Wellington. The national co-ordination service will liaise with providers to see whether these two one-off events can be hosted at local providers' premises.

I am conscious that the summary of proceedings from the national Maori problem gambling hui held in November 2008 have still not been circulated. I understand that the summary of proceedings is in the process of being circulated to all participants, and that an abridged version and copies of the speeches and presentations will also be made available on the problem gambling national co-ordination service section of The Salvation Army's website.

I look forward to receiving more details around the kaupapa for this hui and the expected outcomes.

Audit Programme – July – September 2009

The Ministry is in regular discussion now with KPMG, as the provider who will undertake the audits of all contracted problem gambling service providers. KPMG is in the process of contacting all providers to confirm dates for site visits and discuss engagement protocols. We are in the process of finalising the audit tool, reporting templates and confirming the make up and mix of the audit teams to ensure these reflect the cultural, clinical and public health characteristics and needs of each provider.

Six Monthly Monitoring Reports – January – June 2009

It is opportune to remind all providers of the need to ensure their six monthly contract monitoring reports, covering the January-June 2009 period, are submitted in a timely manner. They are due to be received by Healthpac and a copy sent directly to the Ministry no later than 20 July 2009. The Ministry will also ensure that responses are turned around as soon as possible. This is important, particularly for this monitoring period, as the information contained in the provider reports and the Ministry's responses will also be fed into the audit programme.

Public Health – Procurement of Public Health Training

The Ministry's problem gambling team has released a tender request for proposals for the provision of a problem gambling public health workforce development and training service. It is anticipated that the service would provide training for problem gambling public health service providers along side the national forums and events. The public health service provider will also provide a point of reference for ad-hoc inquiries and advice to problem gambling public health practitioners in a similar way to which intervention services use ABACUS for technical advice and training on intervention matters.

The tender closed in mid June 2009 and subject to suitable responses it is hoped to have an active service soon thereafter.

Update on the Ministry's revised Problem Gambling Web-page

Based on external feedback provided and as part of the first scheduled website update, some enhancements have been made to both the layout and the content of the Ministry of Health's Problem Gambling Website. This will make the information easier to navigate and more user friendly. As an example the "Service User Data" topic has been added into the main menu instead of being in a sub-topic choice under the "Monitoring & Reporting" menu.

We have also provided additional intervention service data to allow comparison with previous years, and levy data calculations have been updated to reflect the April 2008 to March 2009 periods. These are just a few of the changes made. Please visit the site by either clicking on the link below, or by cutting and pasting the link into your browser: <http://www.moh.govt.nz/problemgambling>

The web pages contain comprehensive problem gambling information. If you have any question / queries or suggestion, please email to problemgambling@moh.govt.nz

continued...

Research & Evaluation

Evaluation

The Evaluation project being delivered by Auckland University of Technology is entering into its third (and final for this levy period) phase. The first and second phase reports for this project have been very useful and informative so far and the Ministry anticipates that the final report will be of similar value. The Ministry appreciates the enthusiasm and level of participation in this project.

Research projects

All reports for the research projects commenced in the 2004-2007 levy period have now been finalised and are available on the Ministry's website (see <http://www.moh.govt.nz/moh.nsf/indexmh/problemgambling-research-implementation0407>). These reports often have interesting findings of relevance for informing both intervention and public health service delivery. You may also want to think about whether the research findings match your experience – think about what evidence you have for agreeing or disagreeing with the report – could this be the start of an idea for a provider initiated research project?

Ongoing Research

The National Effectiveness Study, that is, examining the effectiveness of brief interventions, is well underway with the pilot stage hopefully commencing in August this year. This study is one of the largest of its kind for the problem gambling sector and will likely provide a very useful starting point for assessing effectiveness of different treatments for problem gambling. Thanks to all of the services that are working so hard to make this project a success.

The Ministry has commenced negotiations for a research project on community-level harm from gambling. This is another project that will be of international interest as few efforts have been made to measure the impact of gambling at a community, rather than individual level. Key to this project will be identifying measures of community wellbeing that are sensitive to changes in the gambling environment and then working alongside problem gambling providers, particularly those with public health contracts, to trial evidence based public health initiatives targeted at addressing the measures identified. This will be an exciting project that will likely, in the longer term, form a foundation for evidence of public health and health promotion effectiveness.

The Ministry has finalised negotiations with Auckland University of Technology for a second iteration of the gambling module in the Pacific Island Families Study. Having a second phase of gambling related data collected within this study will represent some of the first longitudinal data collected for gambling. Many of the questions the sector continues to ask about the incidence of gambling, risk factors and resiliency can only be addressed through research projects of this nature. You can read the report on the first data collection phase of this study here: <http://www.moh.govt.nz/moh.nsf/indexmh/problemgambling-research-implementation0407-pacific>.

Current Research RFPs

The Ministry is currently seeking proposals for provider and/or researcher initiated research projects – this RFP closes 30 June 2009 – go to www.gets.govt.nz to see the RFP. Last time two proposals were selected for funding, you can read more about these projects here:

<http://www.moh.govt.nz/moh.nsf/indexmh/problemgambling-research-implementation0710-industryresearch>

The Ministry has also recently advertised RFPs for three projects furthering the evidence on the impact of gambling on Māori families and communities, Pacific families and communities and Asian families and communities. The Ministry hopes these projects will build upon existing knowledge and in particular inform understanding on risk and resiliency factors in relation to gambling.

Upcoming RFPs

The Ministry has a number of other projects it still hopes to commence in this levy period. These include:

- A project on the effect of gambling marketing and sponsorship
- A planning and pilot phase for a the national gambling study
- Several small pilot or scoping projects, including a small project looking at youth gambling
- Several industry focussed projects

Gambling marketing and sponsorship

Another project of interest to many of you will be the project to examine the influence and reach of gambling marketing and sponsorship. A complicated area, this project will be unlikely to answer conclusively all of the questions that the sector has around gambling advertising and sponsorship, but the Ministry will be hoping to get some validation and evidence to support or challenge some of the more common assertions around the effect of sponsorship, marketing and advertising in this area.

Interestingly enough, a similar project was completed last year looking at alcohol sponsorship and its effect on hazardous drinking (Kerry O'Brien & Kypros Kyri. Alcohol industry sponsorship and hazardous drinking among sportspeople. *Addiction*, 103, 1961–1966).

National Gambling Study

The 1991 and 1999 national gambling surveys were seminal projects that continue to be cited in journals and media articles a decade later.

The Ministry revised the gambling module in the 2006/07 New Zealand Health Survey (NZHS) to use the Problem Gambling Severity Index (PGSI) allowing validated national and international comparisons to be made. Gambling specific analysis of the findings of this survey have recently been released (you can read more about these findings here: <http://www.moh.govt.nz/moh.nsf/indexmh/a-focus-on-problem-gambling-results-2006-07-nz-health-survey>) and represent a new milestone in population level information on gambling and gambling harm in New Zealand.

The NZHS does not, however, provide the depth of information that was provided by the previous gambling surveys. After seeking feedback from researchers and stakeholders in 2008, the Ministry agreed to build an in-depth survey on gambling using participants recruited from the next NZHS. This study will also form the basis of a small longitudinal study specifically focused on gambling, risk and resiliency.

Progress on this project has been delayed by some uncertainty around the future of the NZHS, however, the Ministry will shortly advertise an RFP to begin the planning and possible pilot phases for this project.

Industry projects

As some of you may be aware the Ministry did not select a provider for the PIDS and pop-up research RFP earlier this year. The Ministry is reviewing the RFP for this project and hopes to return to the market on this project soon. The Ministry also hopes to advertise RFPs for projects investigating the effect of venue and game characteristics in the near future.

Some concern has been expressed from the sector about the Ministry's focus on involving the gambling industry in these projects. The Ministry believes, however, that this approach is both necessary and appropriate. In the same way that the Ministry is formalising its requirements for researchers to work with public health and intervention services from an early stage for projects that involve clients or research in the workplace, the Ministry believes that the gambling industry should have the opportunity to be involved in the planning of research in their places of work. As many of you will know yourselves, when people aren't involved in the planning of a project they are less likely to participate, and the Ministry believes strongly that the questions for these projects need to be answered by research in real life settings – that is, in gambling venues.

Outcomes monitoring

As many of you will be aware, the Ministry has been working on a framework for measuring progress on its strategic objectives, across the continuum of intervention and public health, for a few years. Several of you have led processes, or been involved in commenting on the draft versions of the outcomes framework. The Ministry anticipates that the framework will serve as a foundation for demonstrating progress in future years and is currently working to operationalise collection of information and data to inform reporting on this project.

In closing, you will see that there are many projects currently being worked on, and I hope that you find this regular update informative and useful.

Kind Regards

Barbara Phillips
Group Manager – Minimising Harm Group
Ministry of Health

What's Happening...

Calendar of Events (to December 2009)

3 – 4 June 2009	National Coordination Service: National Maori Hui (3rd June) Postponed to 6 - 8 October 2009 Abacus: Maori Problem Gambling Clinical Training (4th June) Postponed to 5 & 12 August 2009
10 – 11 June 2009	National Coordination Service: National Pacific Fono (10th June) Abacus: Pacific Problem Gambling Clinical Training (11th June)
17 – 18 June 2009	National Coordination Service: National Asian Forum (17th June) Postponed to 22 July 2009 Abacus: Asian Problem Gambling Clinical Training (18th June) Postponed to 23 July
July/August/September 2009	KPMG: Service Provider Audits – National
July 2009	Ministry of Health anticipated public consultation programme on the Ministry's Strategy for Preventing & Minimising Gambling Harm (2010-2016). Confirmation of venues and dates will be posted on the Ministry's website as soon as Cabinet approval has been received.
22 – 23 July	National Coordination Service: National Asian Forum (22nd July) - Auckland Abacus: Asian Problem Gambling Clinical Training (23rd July) – Auckland
29 – 30 July 2009	National Coordination Service: Annual National General Provider Forum (29th July) Cancelled Abacus: General Problem Gambling Clinical Training (30th July) Cancelled
5 & 12 August 2009	Abacus: Maori Problem Gambling Clinical Training (5th August) - Hamilton Abacus: Maori Problem Gambling Clinical Training (12th August) - Wellington
9 – 12 September 2009	Cutting Edge Conference
6 – 8 October 2009	National Coordination Service: National Maori Hui - Napier
21 – 22 October 2009	National Coordination Service: National Pacific Fono (21st October) - Auckland Abacus: Pacific Problem Gambling Clinical Training (22nd October) - Auckland
November 2009	NAGS - National Association for Gambling Studies (Australia) Conference

Notes:

NZ International Conference (AUT/PGFNZ) to be held in Feb 2010 in Auckland

Abacus will provide further ad hoc support to problem gambling providers around the country as requested

The dates provided in this calendar are indicative and may be subject to change

For more information or to contribute to future newsletters, please contact:

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