Identifying gambling-related harms earlier to inform sentencing and treatment pathways

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In 2020 and 2021 Staffordshire University, the Howard League for Penal Reform and the Magistrates' Association collected data with magistrates across England and Wales and wider professionals across the Criminal Justice System (CJS), including therapeutic experts working with those experiencing gambling-relatedharms. Our research explored 1) sentencers' understanding of crime and problem gambling 2) what sentencing considerations were employed when a defendant had a gambling addiction and 3) what therapeutic pathways were offered within the CJS. Magistrates were surveyed (N = 656 participants) and 26 magistrates attended online focus groups (6 focus groups occurred). A further 21 professionals from the criminal justice sector took part in an online world café event to cross check and add to the sentencer data. Suggestions for CIS improvements were made throughout the course of the research. A final report 'Sentencers' understanding, and treatment of problem gamblers' (Page, 2021) is available via the Howard League for Penal Reform website. The findings have been included in the work of the Commission on Crime and Problem Gambling led by Lord Goldsmith, which aims to inform national reforms and the government's Gambling Commission. Findings include and advocate for 1) sentencing guidance reforms to include gambling as a mitigating (and aggravating) factor, 2) that at the earliest opportunity gambling is detected through assessment (via police custody, liaison and diversion and pre-sentence reports), 3) that appropriate be-spoke gambling treatment referral pathways are employed and 4) that CJS professionals receive gambling addiction and gambling-related crime training.

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Staffordshire University is now working as a learning partner with GamCare to support HMPPS in developing a national Gambling Strategy. We are working to identify prevalence and support needs within incarcerated populations and those on licence across England and Wales. This article also includes provisional findings from a GamCare co-ordinated community event in 2022 with people with lived and learned experience of gambling harms and the CJS (N = 14).

Internationally, leading mental health assessment tools, such as the DSM-5 and WHO ICD, cite that gambling is an addiction with similar cognitive and mental health impacts to substance misuse addiction. It is understood that a person's cognitive processing becomes impaired when they reach the point that they are chasing their gambling loses with more gambling (Smith and Simpson, 2014). Scientific evidence indicates that this is when brain chemistry and neuro-cognitive ability alters (Blaszczynski et al, 2008; Leeman and Potenza, 2012; Pettorruso et al, 2019; Zhang and Clark, 2020; Goudriaan, 2020; Lee et al, 2020) and as such, rational choices pertaining to committing crime to address gambling related debts and continue in addictive gambling is questionable (Page, 2021).

Committing crime to fund a gambling addiction is a gambling harm and gambling can also increase the likelihood of becoming a victim of crime (Langham et al, 2016). For example, we found that the person with the gambling addiction may become victim to domestic abuse aggravated by behaviours associated to the addiction (Page, 2021). Approximately half of the sentencers surveyed in our research had court case experiences, albeit infrequently, where problem gambling was identified as a contributing factor to crime (ibid). Typical crimes linked to gambling that were identified in court were mostly cases of acquisitive crime with breach of trust, or domestic abuse. However, gambling was cited more frequently in family courts in relation to parenting concerns. Interestingly, child abuse came up in a small number of criminal court cases where the defendant had a gambling addiction. Most sentencers and CJS stakeholders felt problem gambling needed better identification within PSRs and training for gambling screening would be beneficial. At an online world café event, CIS stakeholders told us that defence lawyers would be unlikely to raise gambling addiction in court without sentencing guidance allowing for mitigation. They also highlighted that some defendants would be reluctant to disclose gambling addiction and therefore several prompts for disclosure might be necessary during the persons CJS journey.

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Sentencers and criminal justice stakeholders identified that prevalence for gambling-related crime is still unknown within the sector (Page, 2021). Research has shown that 13% of arrestees within a Cheshire police custody suite reported having a gambling problem (Mann, 2018) and as such, it is likely that gambling is a hidden problem within the courtroom. HMPPS are currently working with GamCare and Staffordshire University to get a sense of prevalence rates and support needs through a survey that is to be distributed across secure estates in England and Wales and via probation to those on licence. At present, preliminary findings from a GamCare organised community world café event and two focus groups with people with lived experience of gambling-harms and affected others have demonstrated that 1) CJS professionals need to be screening for gambling 2) more treatment support is needed and 3) that when support is in place leading to gambling abstinence or significant reduction, crime stops.

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Our research demonstrates the importance of staff across the CJS being trained on gambling addiction, gambling related crime and referrals for relevant treatment pathways (Page, 2021). Fines and custodial sentences can be counterproductive when addressing gambling addiction due to an increased potential of recidivism according to magistrates (Page, 2021). In Page (2021;13) one magistrate surmised:

"... if it's something they have less control over because it is an addiction, then they need help to get rid of that addiction, rather than just punish them...". In Canada, expert witnesses help to inform court mitigation decisions and appropriate therapeutic pathways pertaining to gambling-related crime (Smith and Simpson, 2014). In both our research projects with sentencers and CJS professionals and then more recently with those with lived and learned experience of gambling harms and the CJS, there has been some discussion about whether better treatment pathways could be achieved if gambling-related-crime was included in problem-solving-courts. In parts of the USA and Australia, the problem-solving court model has been applied to gambling to successfully monitor therapeutic intervention and desistance (Guenaga, 2011; Turner et al, 2017; Dollar et al, 2018; Adolphe et al, 2019). Breaches of therapeutic support conditions lead to the court resuming and more punitive sentencing occurring. Our research advocates for bespoke gambling treatment pathways to be employed within sentencing (Page, 2021) and whilst magistrates courts could set up relevant RAR activities inclusive of gambling addiction treatment, mental health support and debt management (ibid), problem-solving-courts may better allow for reduced stigmatisation for the offender and a wider variety of bespoke interventions to be employed to support desistance from crime through gambling addiction recovery.

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