

NRGP news.

NATIONAL RESPONSIBLE GAMBLING PROGRAMME

A public/private sector initiative of government regulators and the gambling industry in South Africa

REGULATION OF REMOTE GAMBLING **THE WAY TO GO**

“Remote” gambling – which includes gambling via the Internet, the telephone and interactive TV – presents many dangers for players, and these dangers must be addressed in the formulation of South Africa’s policy in this regard.

This was contained in a submission by NRGP executive director Professor Peter Collins to the parliamentary portfolio committee hearings into proposed amendments to regulate interactive gambling in South Africa.

Professor Collins argued that the amendments involved much more than just the legalisation of a new form of gambling which was already prolific and highly accessible; rather, they needed to focus on ways to minimise harm and maximise benefits.

The principal challenge for lawmakers was to regulate the interactive gambling industry to protect actual and potential gamblers – particularly the young and those in danger of harming themselves and those close to them – while simultaneously generating economic benefits for the general public through taxation, investment and employment.

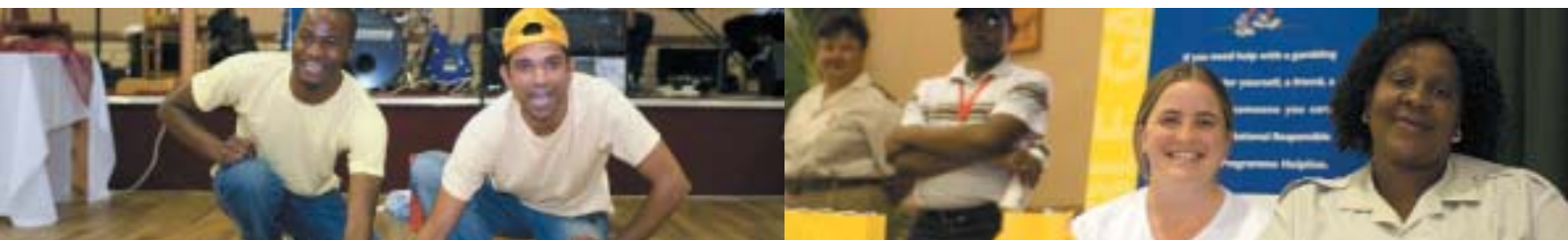
He drew a parallel with what he described as a very similar situation in the early 1990s, “with respect to authorising and regulating casinos in circumstances where illegal casinos proliferated in huge numbers in every large city and most medium-sized towns”.

Remote gambling, he argued, posed the risk of stimulating problem gambling - excessive and/or compulsive gambling – in that it offered opportunities for:

- Continuous, ‘rapid action’ play, high stakes and high and frequent prizes
- Convenience gambling, which discouraged people from planning and budgeting for gambling, and which encouraged them to gamble impulsively.
- People who were relatively ignorant of how gambling worked, its dangers and how to avoid them to gamble on whatever they liked, as often as they liked and for whatever amounts of money.

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GETTING INTO THE ACT AT CORPORATE WELLNESS DAYS



Actors Marty Kintu and Kaashief Noorodien (left) put on their show for 150 Correctional Services staff attending a wellness day in November. Cerian Statham (right), assisted by AllPay facilitators Hilton Kuhn and Bukelwa Duma, manned the display and handed out gambling myths leaflets, comic books and other promotional items. The industrial theatre performance usually conducted at schools has been adapted for adult audiences and conveys the responsible gambling message with verve and vigour. Other wellness days in which the NRGP has participated recently were at the Department of Environmental Affairs, as well as at Clicks Stores head office.

There was no reason to believe that, like the vast majority of customers at land-based casinos, most remote gamblers would not do so responsibly. Remote gambling was highly accessible, but it was also a form of gambling in which technology readily permitted a wide variety of safe play measures to discourage people from excesses.

These included prominent links to websites where players could self-test for problem gambling, receive education on how to gamble safely, be put in touch with Internet counselling facilities and be given both the NRGP's free counselling number and access information about its other expert and confidential free services.

Remote-gambling operators could also offer players a facility for setting limits to their losses, and there is computer software that could detect patterns of play which indicated problem gambling and alert players accordingly.

Legislative and regulatory options included prohibition of remote gambling, a free-market approach and industry regulation. Prohibition was unlikely to eliminate remote gambling offered by offshore sites, while a free-market system resulting from unregulated e-commerce (and representing the current situation online), was not supported by any government in the world.

This left industry regulation, which was what the draft amendment Bill sought to propose.

The NRGP believed that the regulations arising from the proposed amendments should contain the following provisions:

- That would-be suppliers be required to show they have effective player-identification procedures in place, particularly to prevent children from gambling.
- That links to sources of web-based information about the dangers of excessive gambling be prominently displayed on gambling websites.
- That easy access be given to an online self-test for problem gambling.
- That easy and prominent access be given to the NRGP and its free services.
- That specific mention be made of illegal gambling conducted via cell phones and especially illegal lotteries, as well as the legal interactive TV gambling available.
- That operators be required to keep records of customer transactions to enable identification of patterns of excessive play.
- That operators be required to demonstrate social responsibility and conform to a code of practice drawn up by the South African Responsible Gambling Trust, the public/private sector partnership of government regulators and industry which oversees the NRGP.

"The NRGP favours the legalisation and regulation of remote gambling precisely because it will make possible the imposition and enforcement of provisions such as those for the avoidance of problem gambling," he said.

NRGP RECEIVES IABC AFRICA GOLD QUILL AWARD FOR ITS PUBLIC EDUCATION EFFORTS

The NRGP has been awarded one of Africa's top prizes for multi-audience communication by the International Association of Business Communicators.

Judged against entries from throughout Africa, the continental awards are the lead-up to the International IABC Gold Quill Awards.

The NRGP entry outlined its strategy of utilising a variety of communication techniques, channels and formats, within budget constraints, to convey its message of combating the behavioural problems with gambling to diverse audiences in a multicultural and multilingual society.

It showcased the diverse strengths of the NRGP's public education team – in

communication, media liaison and management, marketing and business strategy, advocacy, lobbying and research.

The purpose of the awards is to recognise excellence in business communication at both individual and corporate level in Africa.

"We were extremely impressed by the level of entries that we received and were hard-pressed to judge the winners according to our stringent criteria of effective communication programmes," said Susan Beaumont, chair of the IABC Africa Region.



CERIAN STATHAM

UNUSUAL JOURNEY TO THE NRGPs PROBLEM GAMBLING COUNSELLING LINE

Cerian Statham was going to become an accountant. Instead she ended up as the newest of the compassionate and professional voices on the NRGPs problem gambling counselling line. It's an unusual journey ... but that's how it happened.

Cerian was born in Johannesburg, where her father worked on the mines, but the family moved to the Cape when she was four years old and stayed there. Cerian attended Rhenish Girls' High School in Stellenbosch, then went on to the University of Stellenbosch to study accounting.

But then she came to a life-altering realisation: she was heading into the wrong career, because "accounting was easy," she says now, "but it wasn't for me."

And she had the courage to do something about it, which in her case was to walk away from the world of figures and concentrate on an old love, psychology. It was, she admits, quite a switch.

This brought her to the NRGPs problem gambling counselling line, where she counsels callers with gambling problems, and spends



Cerian Statham |

some of her spare time furthering her studies in psychology through the University of South Africa.

"I discuss the callers' problems with them and refer them," she says. "It can be challenging at times, but I'm enjoying it. There's satisfaction in it, or I wouldn't be doing it."

And her unusual first name? Well, it's not a nickname, but pure Welsh.

EVA CHABALALA



Eva Chabalala |

Eva Chabalala has covered a lot of ground since she was born in Ga-Rankuwa in the North-West Province.

She was still a child when the family moved to Shoshanguve, where she completed high school, and then it was off to the University of the North in Tzaneen to

NRGP TREATMENT PROFESSIONAL GOES THE EXTRA MILE

study psychology. From there she travelled to Denmark to read a master's degree and then returned to South Africa.

She spent a year working for the Human Sciences Research Council before moving on to the Gauteng Department of Education and then the Careways service provider group. Then she struck out on her own as a consultant in psychology, based in Pretoria, where she lives with her husband, a school principal, and their three children.

Eva has handled some tough ones as a treatment professional for the NRGPs. She recalls one problem gambler who was such an acute case that, as she says, he "would go into the casino on a Friday and come out on Sunday, having lost his whole month's salary."

In another case a problem gambler was on the point of having his house repossessed, not to mention all his furniture, and there was no food for the family. Eva "went the extra mile", as she says, and negotiated with his employers to get their co-operation. The employers agreed to pay his salary into a bank account controlled by his wife, enabling him to make a fresh start by removing the means that fed his addiction.

For Eva it is a success story – not an earth-shaking one, perhaps, but a brick in a much larger edifice, and one can tell she is proud of what she accomplished.

"I love the work," says this woman with the big, warm laugh. "I love working for the NRGPs!"

FIVE MINUTES WITH NEW SARGT TRUSTEE PETER FONSECA

ON THE NRGF, LPMs...AND UNREGULATED GAMBLING

Peter Fonseca, chief executive of Thuo Gaming and the newest member of the South African Responsible Gambling Trust's board, has some interesting things to say about the NRGF, the impact of limited payout machines and unregulated gambling.

Peter, as much of a veteran as one can be in the young South African gambling industry, replaced Paul Leonard in one of the four industry seats on the SARGT board and represents the LPM, racing and bingo sectors.

Question: How long have you worked in the gambling industry, and in what capacity?

I have worked in the industry for 10 years, variously as a general manager, chief executive and company director. During this time, I have managed major businesses in both Australia and South Africa, and I currently have overall responsibility for all Tattersalls interests in South Africa.

My present involvement in the industry here includes holding the positions of vice-chairperson of the Limited Payout Machine Association of South Africa (LPMASA), a trustee of the South African Responsible Gambling Trust (SARGT) and serving as the new chairperson of the South African Route Operators Association (SAROA).

Question: You have worked in other jurisdictions; how does the NRGF compare to problem gambling initiatives elsewhere?

I think it would be fair to say that the NRGF is one of the most comprehensive programmes of its type in the world; in a number of respects it is unique.

Firstly, it is the only one of its type which is a public/private sector partnership, demonstrating the value and benefits of close collaboration between policymakers,

regulators, industry professionals and service providers.

And secondly, it is the only programme I know of which integrates research, treatment and prevention under a single organisational umbrella. This structure eliminates duplication, is cost-effective and efficient, and ensures that these three key components work in tandem to a common goal of promoting a culture of responsible gambling in the country.

The programme enjoys a good reputation internationally, and it is no surprise that other major jurisdictions are to follow our South African model.

Question: Is South Africa's regulatory framework well respected internationally, in particular efforts as regards efforts to address the issue of problem gambling?

It is common cause, I think, that South Africa has one of the world's most stringent and sophisticated gambling dispensations, one which has delivered much with regard to the public interest. Regulation in this country recognises that while, for most people, gambling is harmless entertainment, there is a small minority who develop problems with their gambling, and it sensibly makes provision for a range of measures designed to reduce those risks.

Question: Many people predicted the LPM industry would exacerbate the incidence of problem gambling; has this been the case?

In fact, no. Independent research conducted for the NGB and the NRGF shows that over the past three years, during which time LPMs were introduced into the market, the incidence of problem gambling in South Africa fell from 6.8% of adults in 2003/4 with ready access to commercial gambling to 4.8% in 2005/6. Somewhat less than 1% can be considered compulsive gamblers.

Statistics show that of those who have been treated for problem gambling over the past



SOUTH AFRICAN
SARGT
RESPONSIBLE GAMBLING TRUST

year, for example, very few have cited LPMs as their principal gambling product of choice.

Question: To what do you ascribe this?

I believe our collective efforts as industry and government to educate the public about gambling are bearing fruit. There is no doubt in my mind that South Africans today are better informed about gambling, how it works and its associated risks, and our significant investment in public awareness initiatives have met with pleasing success.

The conventional wisdom that the availability of commercial gambling necessarily leads to higher levels of addiction is, in fact, an incorrect perception. We have known for some time about research in Canada, the US and New Zealand which demonstrates clearly that if the introduction of additional gambling is accompanied by extensive public education, the prevalence of problem gambling can be contained, if not reduced. But this is the first time in South Africa that we have seen local evidence of this.

Question: There has been some debate about the wisdom of locating gambling venues, like casinos and LPM sites, in poorer neighbourhoods. Do you have a view on this issue?

If one looks at recent research, there is nothing which suggests that poorer people are more irresponsible than others when it comes to spending their money, on gambling or any other leisure pursuit, for that matter.

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NRGP dealing with DEMAND AND NUISANCE CALLS

THE NRGF PROBLEM GAMBLING COUNSELLING LINE IS KEEPING UP WITH THE TIMES, REFINING ITS SKILLS AND EXPANDING ITS CAPACITY TO KEEP UP WITH THE DEMAND FOR ITS SERVICES.



Some of the NRGF's telephone counsellors are (from left to right) Mirriam Philiso, Johan Arries, Cerian Statham, Andrew Fraser, Euginia Budaza, Simone Smith and Nadia Marsh (seated).

BARBARA VAN DER SPUIJ reports that there have been no major hitches with the current telephone system, which has four incoming lines – two permanently allocated to the counselling system and a third on stand-by for very busy times.

The computers were too small and outdated to supply the capacity for the client referral programme and other programmes, so two more powerful computers were bought and a total system upgrade carried out.

DR RODGER MEYER says on average 1 000 to 1500 Problem gambling counselling line calls a month – 20% of the total – still come from people seeking general gambling information which ranges from the Lotto results to advice on how to win. But “while we accept

that will never eradicate all non-problem gambling calls, our efforts over the past year have been to good effect”.

In addition, the statistical recording software of the counselling line service has been improved. Data from all calls are now recorded on customised software which makes statistical record-keeping much more accurate and comprehensive.

The software can now generate electronic referral forms to the various treatment professionals country-wide, and new software, designed to follow up referrals post-treatment has been put into use. This programme automatically generates follow-up enquiries at 6, 12 and 18 months, the aim being to track the programme's treatment service outcomes with greater accuracy.

The NRGF's stated mission has always been that every problem-gambling call will be answered by a trained telephone counsellor, and during the past year – thanks to the introduction of a full complement of eight telephone counsellors who provide a 24/7 counselling line service – virtually no calls were diverted to the answering machine.

At peak times (8am to 4pm) there are two counsellors always on duty to ensure that all calls are answered. The well-qualified, well-trained telephone counselling team undergoes regular training and supervision to constantly monitor and upgrade the quality of the service. All especially difficult calls are monitored and managed case by case.

FIVE MINUTES WITH NEW SARGT TRUSTEE PETER FONSECA ON THE NRGF, LPMs...AND UNREGULATED GAMBLING

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A study undertaken by Stellenbosch University in 2004, for example, which investigated whether social grant recipients were spending their money on gambling in the formal sector, found that hardly any beneficiaries had done so.

But what is of concern to me is the high prevalence of unregulated, or illegal, gambling in poor areas. These forms of gambling offer no player protection, are readily available to minors, are often fraudulent and associated with criminal activity, and obviously make no provision for addressing the question of problem gambling.

CELEBRATING WOMEN IN GAMBLING



Euginia Budaza

The NRGF's senior telephone counsellor Euginia Budaza was invited to attend a Women's Day conference with a difference in KwaZulu-Natal this year. She was among 28 other women invitees – all working in various spheres of the gambling industry, such as KZN bookmakers and the KZN Gambling Board (one delegate was the first female bookie in what is still very much a male-dominated field), and representatives of the office of the Premier of KZN.

The idea behind the conference was to allow delegates to celebrate their achievements as women in the gambling industry. All agreed that they had come a long way and so they wanted other women who were currently in junior positions to know that it was possible to attain a senior position in the regulator community or industry.

Gambler sues for over \$21 million

In what will undoubtedly become a landmark court case in American gambling history – regardless of who wins or loses – Parkinson's disease sufferer Max Well is suing the giant SmithKline pharmaceutical corporation and six Las Vegas casinos for more than \$21 million for not protecting him against himself.

As a result, Wells claims, he lost over \$12 million dollars because of his compulsive gambling.

Wells stated in papers before the court that he was first diagnosed as having Parkinson's disease in 2000. As the disease progressed, his physician prescribed a course of medications, one of which was Mirapex.

In November 2004, after taking Mirapex for several months, Wells became aware that he was developing an irresistible compulsion to gamble, because by then he had lost several thousand dollars gambling in Las Vegas and on the internet.

This was contrary, he argued, to his normal behaviour before he had started taking Mirapex, so he told his physician about the change in habits and expressed concern about the possibility that the Mirapex medication might be responsible.

His physician then replaced the Mirapex with SmithKline's Requip, a drug of the same type, and increased the dosage; at that time, Wells said, neither manufacturer provided warnings to either the public or physicians about possible side effects regarding compulsive gambling.

When he began taking the increased dosage of Requip Wells's gambling compulsion became irresistible. He began to gamble more and more, making frequent trips to Las Vegas and a few other locations to gamble at casinos, all of which were advised that he had Parkinson's disease.

In late 2005 the Parkinson's disease symptoms worsened, and his physician doubled the dosage of Requip, with

disastrous results. Wells's gambling grew even more frenetic. Between September 2005 and the end of January 2006 he gambled away another \$10 million in cash, mainly at the casinos, and left about \$1.2 million in markers which remained unpaid.

During the last week of January 2006 Wells's wife – who was still unaware of how much he had lost – began to question him closely about his compulsion. He soon told her the truth and consulted his physician again.

When the physician heard how much Wells had lost, he immediately reduced the Requip dosage and after a few days stopped it; once Wells ceased to take Requip his compulsion subsided and he stopped gambling altogether.

Wells's case against SmithKline is that by mid-2005 the corporation could reasonably foresee that Parkinson's patients using Requip might develop an irresistible gambling compulsion as a side effect of taking the drug.

SmithKline nevertheless negligently failed to provide adequate, proper and non-deceptive warnings to that effect; such warnings as were provided were ineffective and misleading, because they minimised the association between Requip and the possibility of compulsive gambling as a side-effect.

This made it impossible for a person taking the drug to meaningfully weigh the consequences of its use. The failure to properly warn him resulted in his developing an irresistible gambling compulsion and losing about \$12.2 million.

Wells's claim against the casinos was that each had intentionally appropriated more than \$75 000 of his property without his effective consent, because at the time he was suffering from a mental defect, disease or intoxication which prevented him from making reasonable dispositions of his property.

This included property in the form of cash which was appropriated from various accounts Wells held in Texas in payment of markers mailed to him from Nevada. The theft was also accomplished through the use of promotional materials, telephone calls and gifts sent or given to Wells in Texas by the casinos.

At this time, Wells stated, it was known that he was taking medication for Parkinson's disease, and in some instances had specific knowledge that he was using either Mirapex or Requip; because of heavy publicity surrounding the publication in mid-2005 of a Mayo Clinic study on the propensity of such drugs to create an irresistible gambling compulsion.

ANOTHER A W A R D FOR ADVERTISING

The NRGPs public education team co-operated with final year students from The Animation School to submit a public service advertising entry to Multichoice's prestigious Vuka Awards.

In the "Newcomer Category" the NRGPs ad received six nominations, and the entry was placed first in five of these for:

- Best Animation
- Best Sound Design
- Best Concept/Script
- Best Direction
- Best Overall

This means that the NRGPs will get free air time on the DSTV bouquet over the next 12 months.

rise in student gambling in USA

Treatment professionals in the United States are becoming increasingly concerned about gambling problems among university and college students in a country where gambling last year generated \$57 billion in revenue, according to the Associated Press news agency.

As long ago as last year, the Harrah's Entertainment group and its partner, the Narragansett Indian tribe, ran an advertisement in the state of Rhode Island - where there are proposals to build a resort casino - which said that "the (proposed) casino will be an amazing place for Rhode Island students to have fun when they're taking a break from studying", and set up a campaign aimed at registering student voters to back the proposal.

In near-by Massachusetts, meanwhile, there is hot debate about proposals to expand the state's gambling facilities by licensing resort casinos and the installation of slot machines at racecourses - both of which are currently forbidden, although there are many other existing forms of gambling available.

Massachusetts Governor Governor Deval Patrick is backing the establishment of three full-scale resort casinos in different parts of the state, including the Boston metropolitan area. One of the proposed casinos would be located within 20 miles of University of Massachusetts-Amherst, the state's largest undergraduate campus.

By his calculation - the accuracy of which is disputed by some dissenters - the new gambling venues would generate an estimated \$450 million in annual tax revenue, which would be used for repairing roads and giving property tax credits for homeowners. He acknowledges that there would be side-effects, such as addiction and child neglect, but they would be "manageable" through programmes which would also be funded by the additional tax revenue.

But treatment professionals have warned that students in Massachusetts and elsewhere are more susceptible than others to gambling addictions, and that university and college administrations are not prepared to deal with the fall-out. They note that if Governor Patrick gets his way, poker, roulette, slot machines - and the accompanying free hospitality - would be available within a short drive from many of the state's 100-plus campuses, and if racecourse owners in the cities of Boston and Revere also win the licenses they seek, students at Harvard University, Boston College, Northeastern University and other tertiary institutions would need only to take a commuter train ride to go gambling.

As it is, according to the AP, Harvard researchers say that 5% of the student body have a severe gambling problem, with another 7% classed as problem gamblers - about double the adult rates in both cases. "By the time they get to college, most kids have already gambled," according to Keith Whyte, executive director of the USA's National Council on Problem Gambling, who mentions the lottery as an example of such gambling. "However, most have probably not had the opportunity to go to a casino with high stakes and access to credit. It would be exposing them to a new type of gambling."

It is clear that student gambling is already a widespread phenomenon in the United States, with scant regard paid to the minimum legal age of 21 which is enforced in most parts of the nation. In the state of Connecticut, which has two of the largest resort casinos in the world, there is evidence that the age-limit does not deter youngsters, and "there is a steady flow of high-school and college students (who) attempt to get into the casinos," according to Marvin Steinberg, head of the Connecticut Council on Problem Gambling.

Further afield, researchers at the University of Nevada-Las Vegas reported as long ago as 2005 that more than half of students under 21 on that campus claimed to have gambled in a casino, adding that a "large number of those under 21 gave evidence suggestive of pathological gambling", and colleges in the state of Missouri have changed their health-centre intake forms to include a space for gambling issues after counsellors found this problem was prevalent but was not being addressed.

Not everyone agrees with the treatment professionals, however. JudyAnn Bigby, the Massachusetts Secretary of Health and Human Services, says that the proposed casinos would attract an upper-income crowd rather than young students. They would be "destination resort casinos ... not designed to attract college students. My understanding of where the students gamble is on the Internet." She added that that the casinos would train workers to identify problem gamblers, and operators would be prohibited from advertising to young people.

A recent University of Massachusetts graduate, Brett Burdick supports the governor's plan. Burdick is a regular online poker player who occasionally travels to casinos in Connecticut and Atlantic City, and he estimates he would go gambling about once a month in Massachusetts. I don't think people are going to be skipping classes," he says. "I don't think people are going to be suffering grade-wise just because a casino is 20 minutes away."

Some American states are responding to the perceived new threat with dedicated programmes. Oregon, which has casinos on Indian tribal land like those on the east coast, offers grants to student groups to conduct gambling-awareness campaigns, while the University of Missouri at Columbia oversees an awareness campaign at 12 public schools in Missouri, home to nearly a dozen riverboat casinos.

"This is a hidden addiction, something we weren't addressing," says Kristy Wanner, gambling-prevention co-ordinator for the programme. "An alcohol issue is easier to detect. They get into a fight, they get a DWI (driving under the influence)."

She says campus counseling centres can begin by adding a "gambling" check-box to intake forms which ask students to identify problems around substance abuse or depression - some students report being \$25,000 in debt from gambling.

Jim Wuelfing, prevention director at the Massachusetts Council on Compulsive Gambling, said the council's research shows that high schools and colleges don't address gambling in student handbooks. Two years ago, when every college and university in Massachusetts was invited to attend an information session, only two dozen delegates showed up, and just four accepted the council's offer of on-campus training in policy development and awareness. The offer was made again this year, and seven educational institutions requested training.

"My concern," Wuelfing said of gambling, "is if it comes, that the state be prepared for prevention, intervention and treatment of problem gambling."

DUTCH LOTTERY NOT TO BLAME FOR LOSERS' MENTAL DAMAGE – court

It's official – the Dutch Postal Code Lottery is not responsible for any mental damage people might suffer if they fail to win a prize.

This precedent-setting judgment was handed down by an Amsterdam court, the Haarlems Dagblad newspaper reported earlier this year, in a case which arose when a group of eight players in the Hoogstraat, Heusden, won 13.9 million euros early in 2006.

The plaintiff was Helene de Gier, who lives in the same street but won nothing, which

was not surprising, since she had not bought any lottery tickets.

Nevertheless, she and her partner decided to sue the lottery on the grounds that she suffered mental damage because she had not won the prize, particularly because of the lottery's unusual *modus operandi* – every postal code is regarded as a lottery number.

“The Dutch Postal Code Lottery not only uses private postal codes without the permission of the people who decide not to

participate,” De Gier's submission stated, “but also singles out the losers.” This being the case, De Gier demanded compensation for the damage to her mind.

The court did not buy this argument, however, although it acknowledged that the lottery could create a stir in a small community like Heusden. The Postal Code Lottery said it was pleased with the verdict. The Haarlems Dagblad did not record De Gier's reaction.

QUEENSLAND LEGISLATORS CRACK DOWN ON UNDER-AGE GAMBLING

The state government of Queensland in Australia is taking aim on a sensitive target area - profits - to control under-age gambling, media reports say.

New bills introduced in the state parliament seek a hefty raise in the fines for operators, employees or agents who allow minors to gamble. Operators would be liable for \$7 500 instead of \$1 500, and employees or agents for \$3 000. The bills also include a maximum penalty of \$15 000 for allowing a minor to gamble or even try to gamble. Adults who help minors gamble would also face fines.

The Queensland Government also introduced new amendments which would clarify who required “blue card” clearance to work with

children (the blue card check is a detailed national check of a person's criminal history, including any charges or convictions. It also examines any past disciplinary action or police investigation information).

The amendment to the current legislation was drawn up to spell out in detail that anyone providing health services to children which involved physical contact, or who provided a service to a child who was alone, would be required to obtain a blue card.

The amendment was also framed to require people providing counselling or support services to a child on a one-on-one basis or over the telephone or Internet to obtain a blue card, with the exception of doctors and other registered health practitioners.

UK prevalence study shows no rise in problem gambling

The number of problem gamblers in the United Kingdom has not altered since a corresponding survey back in 1999, according to the latest report of the Gambling Prevalence Study which was commissioned by the UK Gambling Commission.

Some 0.6 per cent of the adult British population has a gambling problem, contradicting recent press speculation which suggested that the number of problem gamblers stood at nearer the million mark.

Peter Dean, the Gambling Commission chairman, commented as follows on what many observers will see as an entirely unexpected result: “The key message is that overall there has been surprisingly

little change, either in the number of gambling participants or to the number of problem gamblers since 1999. (But) we remain concerned that there are still over a quarter of a million adults who are problem gamblers.

“The challenge, for us and for the industry is to tackle this through the new licensing regime that has been put in place from 1 September. British-based gambling operators must now comply with strict and detailed social responsibility obligations, and we will monitor how these requirements are met.” The next prevalence survey will be published in 2009. A full copy of the 2007 study can be found at www.gamblingcommission.gov.uk.