EQUALITY IMPACT ASSESSMENT (EIA)

POLICY/PROPOSAL:	Brent Gambling Related Harms Strategy
DEPARTMENT:	Service Reform & Strategy
TEAM:	Public Health
LEAD OFFICER:	Katie Shevas
DATE:	07.10.2026

EIA Guidance is available online, please reach out to equality@brent.gov.uk for any further support.

SECTION A – SCREENING

1. Briefly and clearly describe the policy, proposal, change, or initiative, and what it is trying to achieve.

Brent is among the areas with the highest number of people gambling with the most negative consequences. We have over 80 licensed premises, one of the highest numbers in London. In some wards, it is easier to find a place to gamble than it is to shop in a major supermarket. Brent's demographic profile matches many of the risk groups most likely to gamble and/or experience harms from gambling – in particular, with its younger than average residents, high numbers of ethnically diverse communities, and being ranked the fourth most deprived borough in London. These factors all mean that stronger action needs to be taken to tackle gambling in Brent, to reduce the risk of harm to residents.

The Brent Gambling Harms Strategy 2026-2030 sets out our commitment to adopting a public health approach to preventing and reducing gambling-related harm across the borough. It describes how we will work to increase awareness of harms, reduce risk, intervene earlier, and make the best use of the powers and resources available to us to improve outcomes for those at risk of and experiencing harm from gambling.

2. Are there any groups who may be impacted by your proposal? For reference, Q4 lists all protected groups.

This strategy will impact all Brent residents affected by gambling harm, including those who gamble, and their affected others (someone who experiences negative personal, financial or emotional harm as a result of another person's gambling). Some people with protected characteristics, as evidenced in section 4, may be more susceptible to experiencing gambling harm and may therefore experience a greater impact as a result of the strategy. All Brent residents will be impacted by the general public awareness efforts included in the Strategy.

3. If no groups are affected, explain why.

N/A

4. Mark with an "X" the potential impact of the policy or proposal on different groups. You can mark more than one box for each group.

Characteristic	IMPACT		
	Positive	Neutral/None	Negative
Age - People of different age groups.	X		
Care Experience - People who have been in care for any period of their childhood.		X	
Disability - People with physical, sensory, learning, and mental health disabilities, long-term conditions, and non-visible disabilities.		X	
Gender reassignment - Transgender and non-binary people, including anyone who is proposing to, started, or who has completed a process to change their gender.		X	
Marriage and Civil Partnership - Applies mainly in the workplace, people who are married or in a civil partnership.		X	
Pregnancy and Maternity - People who are pregnant, on maternity leave, or new parents.		X	
Race and Ethnicity - People of different ethnicity, nationality, and skin colour.	X		
Religion or belief - People of all faiths, and those with no religious belief.		X	
Sex - Differences between men and women, including disparities in pay, career progression, and health outcomes.	X		
Sexual Orientation - People who identify as lesbian, gay, bisexual, queer, asexual, or any other non-heterosexual identity.		X	
Socio-Economic Status – People who are experiencing poverty or socio-economic disadvantage.	X		

Other relevant groups* *[replace this text and specify where appropriate]*			

* Other relevant groups could include Carers, Refugees or Asylum Seekers, Veterans, among others. Review the EIA Guidance for more information.

5. Complete **each row** of the checklist with an "X".

SCREENING CHECKLIST		
	YES	**NO**
Does the policy or proposal have implications for eliminating discrimination, advancing equality of opportunity, or fostering good relations among different groups?	**X**	
Does it relate to an area with known inequalities?	**X**	
Would it add, change, or remove services used by any groups listed in Q4?	**X**	
Does it have negative or positive equality impacts on any groups listed in Q4?	**X**	
If you have answered YES to ANY of the above, proceed to section B. **If you have answered NO to ALL the above, proceed straight to section C.**		

SECTION B – IMPACTS ANALYSIS

6. What data and evidence have you used to understand potential impacts? This could include service user data where relevant. If there is little or no evidence, explain why, and note any plans to improve data collection in future, adding this to the Action Plan in Section E.

The development of the Gambling Harms Strategy has been informed by a range of qualitative and quantitative evidence. Evidence used to inform this assessment includes: • Brent Joint Health Needs Assessment on Gambling • Brent Open Data and other relevant local intelligence sources • Conversations with those who have lived experience of gambling harm • Engagement with partners, including Betknowmore

7. For each characteristic:
    a. Provide detail for the impact listed in the response to Q4 in the left-hand box.
    b. Provide data and evidence to explain how you reached your conclusion in the right-hand box.

    Relevant data sources for Brent and its residents can be found in the EIA Guidance document.

Age	
Provide detail for the impact listed in Q4.	Provide supporting data and evidence.
The Strategy is expected to have a positive impact on people across different age groups, with particular benefits for children, young people and young adults, who can be more vulnerable to gambling-related harms. The strategy's focus on prevention, early identification, improving awareness and access to appropriate support will help to reduce the immediate and longer-term impact of gambling, with particular benefits for groups where evidence indicates a greater vulnerability to gambling harm.	The Joint Strategic Needs Assessment indicates that while participation in gambling is lowest in 16-24 year olds, they are more than 3 times as likely to experience severe harm as a result of gambling. Brent is a relatively young borough. According to the 2021 census, the median age of Brent residents is 35 years, lower than the England average of 40 years. Around 24% of residents are aged under 20, while approximately 12% are aged 65 and over. Gambling Needs Assessment 2024 2021 Census - First release | Brent Open Data

Care Experience	
Provide detail for the impact listed in Q4.	Provide supporting data and evidence.

We do not have data to show that people with care experience are more likely to experience gambling harms. No specific impacts relating to care experience have been identified from this strategy. The Gambling Harms Strategy's commitments are intended to improve outcomes for all residents affected by gambling, regardless of care experience.	

Disability	
Provide detail for the impact listed in Q4.	Provide supporting data and evidence.
We do not have data to show that those with disabilities are more likely to experience gambling harm. No specific impacts relating to disability have been identified from this strategy. The Gambling Harms Strategy's commitments are intended to improve outcomes for all residents affected by gambling, regardless of disability.	

Gender Reassignment	
Provide detail for the impact listed in Q4.	Provide supporting data and evidence.
We do not have data to show that transgender or non-binary people are more likely to experience gambling harm. No specific impacts relating to gender reassignment have been identified from this strategy. The Gambling Harms Strategy's commitments are intended to improve outcomes for all residents affected by gambling, regardless of whether they are transgender of non-binary.	

Marriage and Civil Partnership	
Provide detail for the impact listed in Q4.	Provide supporting data and evidence.
We do not have data to show that people in a marriage or civil partnership are more likely to experience gambling harm. No specific impacts relating to marriage or civic partnership have been identified from this strategy. However, it is worth noting that gambling harm can have a particular effect on families, with the harm from one member of the family gambling being felt by the wider family as	

well. The Gambling Harms Strategy's commitments are intended to improve outcomes for all residents affected by gambling, regardless of relationship status.	

Pregnancy and Maternity	
Provide detail for the impact listed in Q4.	Provide supporting data and evidence.
We do not have data to show that people who have experienced pregnancy and maternity are more likely to experience gambling harm. No specific impacts relating to pregnancy or maternity have been identified from this strategy. The Gambling Harms Strategy's commitments are intended to improve outcomes for all residents affected by gambling, regardless of pregnancy or maternity.	

Race and Ethnicity	
Provide detail for the impact listed in Q4.	Provide supporting data and evidence.
The strategy is expected to have a positive impact on people of all races and ethnicities, with particular benefits for multiethnic communities. Evidence indicates that people from multiethnic communities experience higher levels of potential and severe adverse consequences from gambling than white people. The strategy's focus on prevention, early identification, improving awareness and access to appropriate support will help to reduce the immediate and longer-term impact of gambling, with particular benefits for groups where evidence indicates a greater vulnerability to gambling harm.	Gambling Needs Assessment 2024 The Joint Strategic Needs Assessment indicates that multiethnic groups gamble less than white groups, yet experience higher levels of harm. The impact of gambling on these groups intersect with other areas of disadvantage as well, including high deprivation and financial vulnerability. Brent Census Atlas 2021 - Ethnicity | Brent Open Data Brent is one of the most ethnically diverse boroughs in England and Wales. According to Census 2021, approximately 64% of residents identified with Asian, Black, Mixed or Other ethnic groups, while around 36% identified as White. Nomis - 2021 Census Area Profile - Brent Local Authority

Religion or Belief	
Provide detail for the impact listed in Q4.	Provide supporting data and evidence.
We do not have data to show that those with a religion or belief system are more likely to experience gambling harm. No specific impacts relating to religion or beliefs have been identified from this strategy. The Gambling Harms Strategy's commitments are intended to improve outcomes for all residents affected by gambling, regardless of religion or belief.	

Sex	
Provide detail for the impact listed in Q4.	Provide supporting data and evidence.
The strategy is expected to have a positive impact on all people, regardless of sex. However, there may be particular benefits for men. Evidence shows that men are likelier to have higher rates of gambling than women, are more likely to gamble as a habitual activity and are more likely than women to spend money when gambling online. There is also early data which suggests that women may be more likely to take part if particular forms of gambling such as bingo, which are being targeted at this group. Women are also more likely to gamble with the hope of improving their financial situation. The strategy's focus on prevention, early identification, improving awareness and access to appropriate support will help to reduce the immediate and longer-term impact of gambling, with particular benefits for groups where evidence indicates a greater vulnerability to gambling harm.	Gambling Needs Assessment 2024 In Brent, our qualitative data supports this quantitative trend. Men were likelier to take part in all types of gambling activity compared to women, whereas women – and in particular, women of Asian ethnicity - were more likely to say they had never gambled or taken part in any form of gambling.

Sexual Orientation	
Provide detail for the impact listed in Q4.	Provide supporting data and evidence.

We do not have data to show that sexual orientation impacts likelihood of experiencing gambling harm. No specific impacts relating to sexual orientation have been identified from this strategy. The Gambling Harms Strategy's commitments are intended to improve outcomes for all residents affected by gambling, regardless of sexual orientation.	

Socio-Economic Status	
Provide detail for the impact listed in Q4.	Provide supporting data and evidence.
The strategy is expected to have a positive impact on people, regardless of economic status. However, there will be particular benefits for those living in deprived areas. Evidence indicates that people experiencing higher levels of deprivation, experience higher levels of potential and severe adverse consequences from gambling than those living in the least deprived areas. Studies have shown that many gambling premises are often located near potentially vulnerable populations in the most deprived areas. People living closer to gambling venues (less than 0.7km away) were twice as likely to be 'problem gamblers' than individuals living further away (more than 3.1km away). With 81 licensed premises, Brent has one of the highest numbers of gambling premises in London. The strategy's focus on prevention, early identification, improving awareness and access to appropriate support will help to reduce the immediate and longer-term impact of gambling, with particular benefits for groups where evidence indicates a greater vulnerability to gambling harm. The strategy also priorities work to take a more robust approach to reducing the number of gambling premises in the Borough- especially in the most deprived areas.	Poverty & Inequality Data Brent | Trust For London | Trust for London Brent has comparatively high levels of socio-economic disadvantage and poverty. Data on poverty and inequality indicate that around 33% of Brent residents live in poverty, compared with 22% across England, and the child poverty rate is estimated to be 42%, significantly above both the England and London averages. Evans and Cross, "The Geography of Gambling Premises in Britain"

Other Relevant Groups	
Provide detail for the impact listed in Q4.	Provide supporting data and evidence.

N/A	N/A

8. Summarise any engagement activities with relevant groups (this may replicate some of the information listed in Q7). State whether those involved represent the people affected by your proposal, or whether more engagement is needed, which should be added to the Action Plan in Section E.

We have developed this strategy using the best available evidence alongside the experiences of people who live and work in Brent. We have brought together findings from our Joint Strategic Needs Assessment, engagement with residents, workshops with partners and staff, published research, guidance from the Office of Health Improvement and Disparity (OHID) and conversations with people who have lived experience of the harms of gambling. This has built a clear picture of gambling and gambling-related harm across the borough and gives us a strong case for change.

9. Provide more detail on any areas identified as requiring further data or detailed analysis.

N/A

SECTION C – CONCLUSIONS

10. Summarise your overall conclusions based on the analysis:
    - If there are no impacts, state that here, and **do not complete sections E or G.**
    - If you decide not to move forward, explain why, and **do not complete sections E or G.**
    - If there are negative impacts, explain what you'll do to reduce them. If you choose to continue despite negative impacts, or if negative impacts remain following your action plan, provide a justification for your decision.
    - If there are positive impacts, explain how these could be strengthened, where possible.

This strategy is expected to have positive impacts on all residents who are affected by gambling, with particular positive benefits on groups most vulnerable to the harm caused by gambling: • Young people • Men • Multiethnic groups • Those experiencing socio-economic disadvantage and poverty

SECTION D - RESULT

Select one of the following options with an "X".		
A	**CONTINUE WITH THE POLICY/PROPOSAL UNCHANGED**	**X**

B	**JUSTIFY AND CONTINUE THE POLICY/PROPOSAL**	
C	**CHANGE/ADJUST THE POLICY/PROPOSAL**	
D	**STOP OR ABANDON THE POLICY/PROPOSAL**	

SECTION E - ACTION PLAN AND MONITORING

Unless your proposal has no equality impacts or you are not moving forward, complete the table below to track specific actions to:

- Reduce negative impacts and increase positive outcomes.
- Monitor actual or ongoing impacts.
- Record plans to improve data collection.
- Plan any further engagement or analysis that may be required.

Use the 'Status' column on the right to indicate whether the action is yet to start, is in progress, or has been completed.

Issue Identified	Action	Lead Officer	Completion Date	Status
Positive impacts are anticipated for young people, those from multiethnic backgrounds, men and those experiencing poverty. These impacts will be dependent on successful implementation of the various priorities as set out in the strategy.	Review the EIA once implementation of the strategy has begun, updating the action plan to ensure that the anticipated impacts are felt, and that if any new equality impacts or evidence is identified it is reflected in the EIA.	Gambling Harms Strategy Delivery Officer	At first EIA review	Not started
Improve data collection	Use data collection methods to map geographic hotspots of harm to understand where gambling harms are most prevalent in the borough, and compare this with other data sets such as indices of deprivation. This will enable us to build a data backed picture of gambling harms across the borough.	Gambling Licensing Enforcement Officer	By the end of the strategy term	Not started

11. Describe how you will monitor the actual, ongoing impact of the policy or proposal?

An action plan will be developed to deliver the strategic priorities. One of the goals the strategy is to establish baselines of data to enable future monitoring of gambling in Brent, and the effectiveness of the actions we take against it. We will continually update appropriate outcome measures within the action plan as data improves. At the highest level, the primary outcome measure we will use at this early stage is to see a reduction in the number of people gambling with the most negative consequences in Brent (according to the PGSI scale). We will also hope to see a reduction in the number and concentration of gambling premises across the borough, which should result from stronger licensing enforcement measures and successful refusals against licensing and planning applications.

SECTION F – SIGN OFF

	Signature	**Date**
Officer:	Katie Shevas	06.10.2026
Reviewing Officer or Head of Service	Ruth du Plessis 	07.10.2026

SECTION G – REVIEW

EIAs are live documents and should be reviewed regularly, especially if there are actions still to be completed or if the proposal has significant equality impacts.

When to review

- Review every 6 months until all actions in the Action Plan above are complete.
- If new data, feedback, or changes to the service arise, revisit the EIA to make sure it's still accurate.

Who should review

- The same officer who completed the EIA should carry out the review. If there's been a staffing change, the new lead officer should take over.

What to update

- Use the Status column in the Action Plan above to show progress (e.g. Not Started, In Progress, Completed). Add comments and updates in the table below — include any new data, evidence, or feedback.

When reviews can stop

- Once all actions are complete and no further equality impacts are expected, you can stop reviewing the EIA.
- Add rows to the table below as necessary until all actions are completed.

Date of 1st Review:	

Officer:	
Comment on progress toward specific actions, and provide any data and evidence updates:	
Reviewing Officer or Head of Service:	
Date of 2nd Review:	
Officer:	
Comment on progress toward specific actions, and provide any data and evidence updates:	
Reviewing Officer or Head of Service:	
Date of 3rd Review:	
Officer:	
Comment on progress toward specific actions, and provide any data and evidence updates:	
Reviewing Officer or Head of Service:	