



GAMBLING HARM LIVED EXPERIENCE EXPERTS

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[Language Guide](#)

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### **Informal Submission – Electronic Gaming Machine (EGM) Application Improvement Project**

Dear Danielle,

Gambling Harm Lived Experience Experts (GHLEE) appreciates the opportunity to provide feedback to the Victorian Gambling and Casino Control Commission (VGCCC) and the Victorian Electronic Gaming Machine (EGM) Application Improvement Project.

#### **1. Recognition of reform intent**

We acknowledge and support the increased emphasis on gambling harm as a key component within the proposed reforms. Improving clarity, consistency and transparency in the application and hearing process is a constructive step and has the potential to strengthen confidence in regulatory decision-making.

However, from a lived and living experience perspective, it is critical that these reforms go beyond procedural refinement and ensure that harm prevention operates as the central and determinative consideration, rather than one of several competing factors.

#### **2. GHLEE position on EGMs**

Gambling Harm Lived Experience Experts (GHLEE) maintain that electronic gaming machines are a high-risk gambling product associated with significant and disproportionate harm. This harm extends beyond individual users to families, communities and broader social systems, and is often concentrated in areas experiencing socioeconomic disadvantage.

In this context, GHLEE's position is that:

- No new applications for EGMs should be approved, including increases in machine numbers, venue expansions or relocations that increase access; and
- A planned and staged reduction in the number and availability of EGMs should be progressed over time.

#### **3. Non-local harm and lived experience**

While GHLEE welcomes the additional focus on local community and local Council feedback and positions on EGM applications there remains a broader concern that:

- The current framework is overly narrow and geographically constrained, failing to reflect how gambling harm actually occurs in practice. While engagement with local communities and Councils is important, harm is not confined to a single local government area and should not be assessed as such.
- There is ambiguity around the role and weighting of lived and living experience organisations, including whether groups such as Gambling Harm Lived Experience Experts (GHLEE) can meaningfully contribute to submissions and how much influence those perspectives carry in decision-making.
- Prioritising “local” submissions over broader lived experience evidence risks flawed outcomes, as gambling behaviour is mobile and occurs across multiple locations (home, work, travel). A harm reduction framework must explicitly recognise non-local lived and living experience as valid, relevant and influential evidence—not secondary or discretionary.

#### **4. Ensuring harm reduction is determinative**

Decision-making frameworks should be strengthened so that harm reduction is the primary test. This requires:

- Clear articulation that applications should not be approved where there is a reasonable risk of increased harm;
- A shift in evidentiary burden, requiring applicants to demonstrate that proposals will not contribute to harm;
- Greater transparency in how harm-related factors are weighted.

#### **5. Cumulative impact and community vulnerability**

We recommend explicit assessment of:

- Existing EGM density and losses;
- Socioeconomic vulnerability indicators;
- Aggregate community impact.

#### **6. Applicant suitability and accountability**

We recommend:

- Greater emphasis on compliance history and past conduct;
- Consideration of demonstrated harm reduction practices;
- Clear consequences for non-compliance.

#### **7. Strengthening lived and living experience input**

We recommend:

- Formal inclusion of LLE evidence;
- Recognition of LLE as legitimate evidence;

- Reflection of LLE in final decisions inclusive of evidence of LLE beyond municipal boundaries.

## 8. Community engagement and transparency

We recommend:

- Minimum standards for engagement;
- Improved accessibility of information;
- Transparency in decision-making;

## 9. Harm reduction requirements (if applications proceed)

- Machine design standards that reduce harm;
- Mandatory carded play;
- Contemporary harm reduction technology;
- Enforceable pre-commitment with mandatory maximum limits.

GHLEE is a proud sponsor and supporter of a [major petition](#) that calls for mandatory loss limits to be introduced for EGM's. More than 12,000 Australians have already made a stand on this important issue.

## 10. Precautionary approach

- Restraint in approvals;
- Prioritisation of harm prevention;
- Avoidance of expansion where uncertainty exists.

## 11. Conclusion

Reforms must result in better outcomes, not just clearer processes. This includes avoiding expansion, reducing exposure over time, and embedding enforceable harm reduction measures.

Yours Sincerely

GHLEE Board Members



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