



Improving Outcomes Fund

Learning and Evaluation Report

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Improving Outcomes Fund: Learning and Evaluation Report

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1. Executive summary

The **Improving Outcomes Fund** (IOF), commissioned by GambleAware, was established to address gambling harms among women and minority ethnic and religious communities across Great Britain. With **£4.3 million** in funding, **25 projects** were supported between **April 2024 and March 2026** to deliver culturally responsive, community-led interventions aimed at reducing the inequalities related to gambling harm among women and people from minority religious and ethnic communities.

The IOF-funded projects address barriers to gambling-related harm support, including **stigma, mistrust**, and a **lack of culturally appropriate services**, by incorporating **lived experience**, fostering **trust**, and integrating **gambling harm support into broader community services**. Many projects were led by or co-designed with individuals with lived experience, and several were founded by those directly affected by gambling harms.

New Philanthropy Capital (NPC), commissioned by GambleAware as the learning and evaluation partner for this fund, conducted an evaluation from September 2024 to October 2025, based on focus groups, learning events, case studies, and monitoring reports. Findings highlight the importance of trauma-informed, trust-based, and locally embedded approaches in building strong community relationships and providing support. However, to some extent, structural challenges, such as short-term funding, fragmented referral pathways, and sectoral divisions, limit the sustainability and reach of these efforts.

Specifically, this report answers the following broad questions:

1	What are the drivers of gambling harms for women, religious and minority ethnic communities?
2	What barriers do these groups face in seeking support?
3	How are IOF-funded projects responding with tailored approaches?
4	How are IOF-funded organisations working within the current gambling harm system to drive change?
5	What structural factors affect the success of projects?

Overall, the findings present a complex picture of gambling harms for women, religious and minority ethnic communities, one that is tied up in stigma and feelings of shame. We have found the main drivers of gambling harms for women and minority communities to be:

Social factors such as isolation



Financial factors such as financial hardship, and the perception of gambling as a means to make money quickly



Gambling as a **coping mechanism** and a way to escape **cultural/gendered pressures** (e.g. of maintaining family units, responsibility for childcare), and **experiences of discrimination** (especially racial discrimination)



With the above being enabled by the **ease of access to gambling** in modern society, in particular in **late-night betting shops or online gambling**.



When it comes to seeking support with gambling and gambling harm, **women and minority ethnic and religious communities** experience numerous **barriers**, including:

- **Stigma and shame**
- **Mistrust** in service providers and treatment options
- **Lack of awareness** about gambling-related harms
- **Lack of gender-specific** and/or **culturally appropriate** organisations and services
- Lack of awareness of or buy-in to the **need for support** from professionals, e.g. health professionals

To help individuals overcome these barriers, projects are employing a number of successful approaches and adaptations. Based on these, we recommend that future initiatives consider the following:

- **Embedding gambling support into broader services** (e.g. running sessions on debt and financial advice, and building in themes around gambling harms)
- **Creating accessible tools** for discreet and informal engagement (e.g. QR codes on leaflets)
- **Co-creating culturally and gender sensitive-approaches** to support communities
- **Building trust** through involving members of communities and people with lived experience (e.g. community champions models)
- **Bringing support to communities** on the ground and in local spaces (e.g. GP surgeries, religious buildings such as mosques and churches).
- **Commissioners providing longer-term**, flexible funding to support the time it takes to build relationships and embed approaches
- **Commissioners prioritising connection building** and bottom-up approaches to reinforce the above

Underpinning all these approaches is community leadership and the embedding of lived experience. This aligns closely with GambleAware's public health approach to tackling gambling harm, which focuses on addressing inequalities, promoting prevention and early intervention, and engaging with the most vulnerable groups through primary care and community networks. Projects identified key elements that promote the success of these approaches, including:

-  **Consistent and visible outreach** to engage community leaders and members
-  Taking time to **build trust and understanding** with communities
-  Capitalising on **existing community relationships**
-  **Co-design / co-production** of services and activities with individuals with lived experience
-  Being mindful of **ethical concerns** around tokenism and the potential harm of asking people with lived experience to share traumatic stories

While there are many examples of successful interventions, in some cases, the ability of projects to provide tailored support is somewhat inhibited by key structural factors including:

- A **lack of sustainable funding** inhibits organisations' ability to embed staff, skills, relationships and connections
- **Unclear referral pathways** leading to the user journey stalling. This is caused, in part, to division in the gambling harm sector which has caused some challenges in collaboration e.g. between established National Gambling Support Network (NGSN) and newer or adjacent sector organisations, and division around organisations in receipt of regulatory settlement, GambleAware or direct gambling industry funding due to perceived conflict of interest.

The IOF-funded projects have invested thoroughly in building relationships with communities and have a deep understanding of the challenges facing the communities they work with. To effectively break down the barriers for people to access support for gambling-related harms, organisations should be trusted and empowered to take forward approaches that are most likely to work in the communities they know best. They should also be supported in sharing this expertise with other organisations through partnerships and connections. This is essential learning for the broader gambling support system. The transition to a statutory levy presents opportunities for further integrating services, for instance, into broader strategies addressing health inequalities, cost-of-living issues. By doing this, future commissioners can ensure that sustainable funding reaches the gambling harms sector.

At the time of writing, however, there remains a degree of uncertainty regarding the specific opportunities that will arise. Indeed, there is a concern among IOF projects that, between the three different commissioning remits of treatment, prevention, and research, there won't be the necessary focus on communities most disproportionately affected by gambling harms. As a result, expertise in community-led and integrated approaches may also be lost.

We suggest that future commissioning prioritise community-led, lived-experience models and focus on reducing fragmentation in the sector through bottom-up approaches, more meaningful inclusion of grassroots and community-led organisations, and increased sustainable funding, to better enable connection, partnership, and learning.



Greater Govanhill

2. Introduction

2.1 Introduction to Improving Outcomes Fund (IOF)

IOF aims to reduce the inequalities relating to gambling harms for women and minority groups, including ethnic minority groups and religious minority groups, and people who do not speak English as their first language.

The £4.3 million funding programme was developed in response to three key pieces of research by GambleAware¹. This research demonstrated that minority groups experience more gambling harm and have low awareness and uptake of services which address gambling harm. Their research into women's gambling found that women experience gambling in different ways from men, specifically in relation to the types of gambling they participate in and their motivations for doing so.

Key findings from previous GambleAware commissioned research:

- Minority groups are less likely to gamble, but experience more gambling harms, than White British people.
- Experiences of racism and discrimination are linked to higher gambling harm
- Stigma around gambling is stronger in minority communities.
- There is low awareness and use of gambling support services amongst minority groups, with stigma being a key barrier to accessing help.
- The increasing prevalence of women's participation in gambling, coupled with rising rates of gambling disorder among women relative to men
- Women's engagement in gambling is closely linked with positive, nostalgic experiences of gambling in childhood and social connectivity in adulthood.
- Women's use of gambling to cope with trauma or intersecting issues.

Specifically, the research highlighted significant disparities in accessing support among women and people from minority religious and ethnic communities and yet experiences of systemic discrimination are linked to higher gambling harm. These groups face unique structural barriers that hinder their awareness of and access to appropriate help. The findings informed the scope and focus of the IOF, which was to prioritise gambling-related harm among women, religious, and minority ethnic communities, emphasising the need for targeted and innovative interventions to address these issues and promote equitable support systems.

A key part of this is the lived experience element of many of the IOF-funded projects. The fund was initially designed with the aim of increasing co-production and co-delivery of support with women

¹ 1. [Minority Communities & Gambling Harms: Qualitative and Synthesis Report](#), 2. [Minority Communities & Gambling Harms: Quantitative Report](#), 3. [Building Knowledge of Women's Lived Experience of Gambling and Gambling Harms across Great Britain: Summary Report](#)

and minority communities. Working with organisations that embed lived experience practice and collaborate with lived experience experts has been integral to this outcome. As a result, we have seen lived experience involvement support the recruitment and engagement of women and people from minority communities seeking support for gambling-related harms across many of the projects. Alongside this, several IOF-funded projects have employed staff with their own direct experiences of gambling harms, and people with direct lived experience of gambling harms founded at least three IOF-funded projects.

Grants worth between £150,000 and £300,000 were awarded to 24 organisations in 2024, operating across Great Britain. The grants lasted for up to 24 months (April 2024 – March 2026) (see Annexe 1 for more details). Following the initial grant-making process, a smaller development award of £75,000 was awarded to an additional organisation for a period of 9 months. The IOF-funded projects are categorised by focus and operation, activity type, and geography (see figure 1).

2.2 IOF-funded project activities

IOF-funded projects primarily work to address key barriers to gambling-related harm support, which lead to low uptake of gambling-specific support and prevent individuals from seeking informal support from friends and family. As such, most projects aim to raise awareness of gambling harms, often targeting wider communities as well as those directly affected by these harms, alongside professionals providing other aspects of support, such as health or financial services, or community leaders who can facilitate referrals and establish connections.

IOF-funded projects have also engaged their communities through various activities. Some projects have taken a community champions approach – building relationships with community leaders such as local Imams, whereas others have developed culturally and/or gender-relevant materials to support outreach activities on and offline.

Support delivery also varies across IOF-funded projects: several projects deliver training for professionals, such as healthcare professionals, on identifying gambling harms, while others offer one-to-one or group counselling support for people experiencing gambling harms and those affected by them. Several IOF-funded projects use activities such as exercise classes or wellness sessions as vehicles to build trust and relationships with people as a basis for engaging with gambling harm support. Some projects use a combination of approaches. These approaches are explored in more detail in Section 4.3.

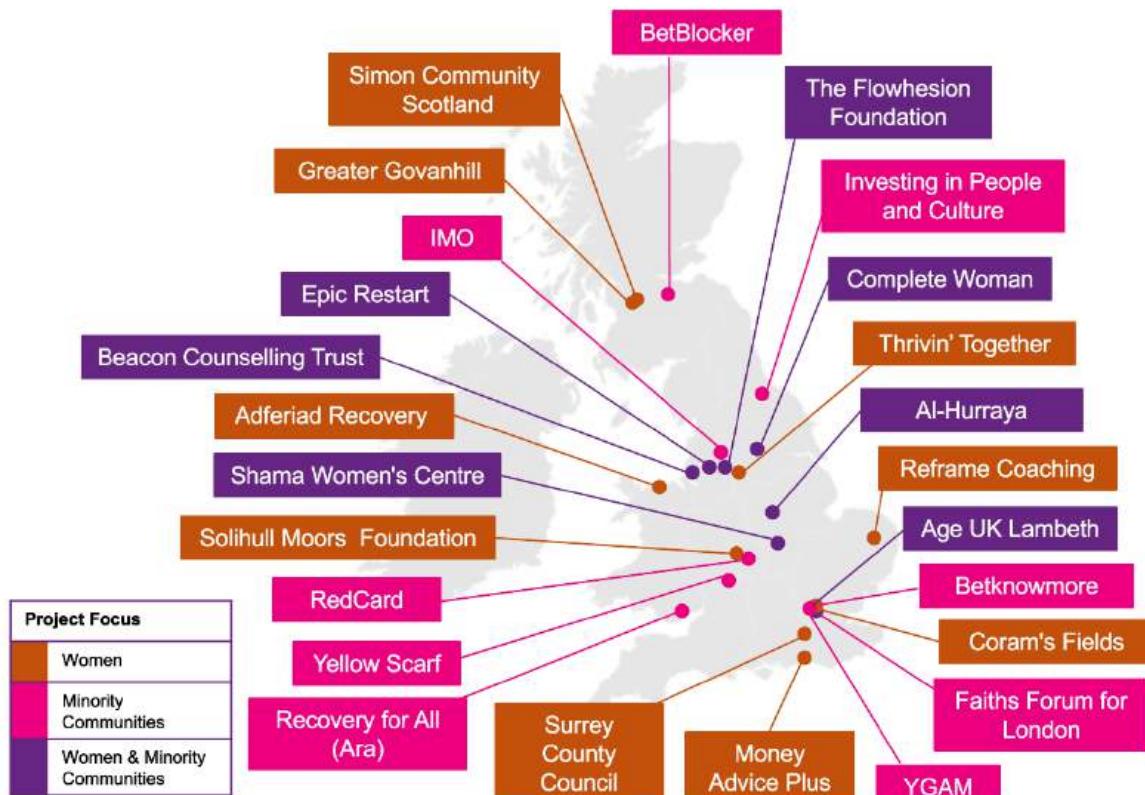
Figure 1. Summary of the number of IOF-funded projects taking specific activity approaches



2.3 IOF-funded projects locations

IOF-funded projects are located across all three nations of Great Britain and are typically based in urban areas. Some projects, including Money Advice Plus, Thrivin' Together, Adferiad Recovery and Betblocker, have a regional or national reach. Key regions where projects are based tend to have ethnically diverse and multicultural populations.

Figure 2. IOF-funded projects by location and project focus



2.4 Evaluation and learning partnership with NPC

GambleAware commissioned NPC to be the learning and evaluation partner for the IOF. The aim of the partnership is based on the following three key elements:

Table 1. Key elements of evaluation and learning partnership with NPC

Evaluation	Learning	MEL capacity-building
Bringing together evidence from across the grants to evaluate the IOF, identifying insights to support learning, the future legacy of the Fund, and influencing the wider gambling harm sector.	Supporting IOF-funded projects and GambleAware to learn over the course of the Fund, strengthening programmes and enabling them to adapt and improve in response	Providing tailored MEL support for IOF-funded organisations to enhance their capabilities and strengthen evidence around the Fund ²

The evaluation and learning partnership commenced in August 2024. It included an initial scoping phase to capture the learning from the first six months of the Fund and to inform the development of a learning and evaluation plan for the main phase.

Throughout this scoping stage and in the subsequent stages, NPC has been supported by two key groups of experts:

Partners in Learning (PiL): People with lived experience of gambling and gambling harms who have supported NPC by contributing to learning events attended by IOF-funded projects and by sensemaking of findings in both the scoping and interim report stages. They have applied their lived experience to review, validate, question, contextualise and further interrogate key findings and insights.

Sounding Board: A small group of organisations that are supported through the IOF fund, who volunteered to be part of a sounding board. These organisations co-created our evaluation design, ensuring that the workshops meet the needs of their organisations - for example, by giving feedback on learning topics and accessibility of the language used in sessions. The sounding board have specifically helped shape and refine the learning questions in the scoping phase, fed into the Learning and Evaluation plan, helped shape the April and July learning events, and supported the development of the tailored Measurement, Evaluation and Learning consultancy offer for IOF-funded projects.

² Support areas have included guidance and review in theory of change development, assistance with impact measurement, and review of impact reporting

The [scoping report](#) was completed in January 2025 and included a set of ten learning questions, which were refined together with GambleAware and form the basis of NPC's evaluation. These questions were shared with IOF-funded projects for feedback during the first learning event on 28th November 2024 and are summarised in Table 1.

Table 2. Learning questions from the scoping report

Themes	Questions
Integrating gambling harm support into non-gambling-related services	How can organisations effectively integrate gambling-related harm services?
Developing effective and inclusive approaches	What aspects of projects worked well/less well for communities?
	What are the key elements of successful engagement and active community participation?
	How can gambling-harm interventions effectively embed lived experience?
	How can practices and resources be tailored to ensure they are culturally relevant and accessible?
	What challenges, if any, are there in adapting programs to different cultural contexts?
Innovation	Where and how have new ways of working supported the success of projects?
Influencing the wider system	How can the gambling harm support system adapt to support a reduction in inequalities in outcomes?
	How can GambleAware create a sustainable legacy for the Improving Outcomes Fund?
	How effective has GambleAware and NPC's support been?

2.5 Current context and backdrop

In April 2025, following a period of public consultation led by the Department for Culture, Media and Sport (DCMS)³, a statutory levy was introduced to be charged on all licensed gambling activities to help fund research, treatment, and prevention efforts related to tackling gambling harm. This levy will be collected and administered by the Gambling Commission under the strategic direction of the UK Government. Before April 2025, GambleAware collected and administered the voluntary levy from industry organisations, while also advocating for the introduction of a statutory

³ [High stakes: gambling reform for the digital age - GOV.UK](#)

levy. Given the transition to the statutory levy and the new role and oversight of the Gambling Commission, GambleAware are undertaking a managed closure to be completed in March 2026⁴.

The backdrop for organisations working on gambling harm, therefore, has been one of uncertainty over the latter period of this learning partnership, and NPC is especially grateful for the continued engagement of GambleAware and IOF-funded projects in this learning piece.

Concurrently, GambleAware and YouGov published their annual report on usage of, and reported demand for, advice, support and treatment amongst those who gamble and those affected by another's gambling in Great Britain⁵. This report demonstrates that the need for advice, treatment, and support for gambling-related harms continues to grow. In particular:



There has been a **sharp increase** in people seeking help for gambling-related harm. Report shows almost **1 in 3 (30%)** adults who gamble and are experiencing any level of problems want treatment, support or advice, nearly **doubling** from 17% in 2020.



The number of people affected by family or friends' gambling has **increased from 6% in 2020 to 8% in 2024** — now equivalent to an estimated **4.3 million adults** in Great Britain.

As such, the work of IOF and similar funds remains relevant and vital.



Investing in People and Culture

⁴ [GambleAware statement on the new statutory gambling harms system](#)

⁵ [Annual GB Treatment and Support Survey 2024](#)

3. Methodology

To explore the key learning questions and themes uncovered by GambleAware's research and NPC's scoping report, we have engaged in a range of activities with IOF-funded projects from February to October 2025. These have included familiarisation calls, two online learning events, an in-person learning event, two online workshops with IOF-funded projects (on theory of change and measurement), focus groups and case studies, as well as analysing the monitoring forms of IOF-funded projects.

The table below displays a matrix of key research methods that provided insights into answering relevant learning questions.

Table 3. Evaluation questions and research method matrix

	Focus groups	Case studies	Learning events	Reporting forms
How can organisations effectively integrate gambling-related harm services?				
What aspects of projects worked well/less well?				
What are the key elements of successful engagement and active community participation?				
How can effective interventions effectively embed lived experience in gambling harm reduction?				
How can practices and resources be tailored to ensure they are culturally relevant and accessible?				
What challenges, if any, are there in adapting programmes to different cultural contexts?				
Where and how have new ways of working supported the success of projects?				
How can the gambling harm support system adapt to support a reduction in inequalities in outcomes?				
How effective has GambleAware and NPC's support been?				

3.1. Focus Groups

NPC conducted four online focus group sessions with a selection of IOF-funded projects. Projects were invited to participate based on the specific populations they support (i.e. those working exclusively with women or with ethnic and religious minority communities), the type of intervention or support they provide and their geographic location. To make views as representative as possible, we ensured a balanced representation across regions and intervention types. We considered the following in the selection of participants:

- We initially gave priority to those projects not involved in GambleAware's Community Resilience Fund (CRF)⁶, to include perspectives from organisations that have not previously participated in evaluation activities and so have not had the opportunity to contribute to discussions on these themes. However, due to project availability, all seven CRF projects that also received IOF funding participated in at least one of the four focus groups.
- We selected organisations that represented a range of approaches and models, for example, early intervention, awareness raising, community champions, counselling/therapeutic support, culturally and gender-aware support, group support, holistic support, training for professionals, and those specifically working with partner organisations to deliver support for domestic abuse survivor-victims.
- We selected both specialist and non-specialist gambling harm organisations.

This approach achieved a broadly representative sample of IOF-funded projects, balancing inclusion of new perspectives with coverage of established CRF participants. The diversity of organisational models and the high participation rate (over two-thirds of projects) ensured that the focus groups reflected a wide range of experiences and approaches. Overall, we spoke to 17 out of the 25 IOF-funded projects through the focus group sessions. Of the remaining projects, two shared the same inventions/worked with the same communities as confirmed participants, and the remaining projects were unavailable at the scheduled focus group times.

⁶ Launched in 2022, The Community Resilience Fund (CRF) is GambleAware's first grant-making programme, created to support community-based organisations in raising awareness and providing early intervention for gambling harms, especially among deprived, marginalised, and ethnic minority communities most affected by the cost-of-living crisis.

Focus group 1	Involved a selection of six IOF-funded projects that work with people from ethnic and religious minority groups .
Focus group 2	Involved a selection of six IOF-funded projects that are working with women .
Focus group 3	Involved a selection of five IOF-funded projects on the themes of building trust and relationships with communities .
Focus group 4	Involved a selection of four IOF-funded projects on the themes of the gambling harm system and how the sector should respond .

The focus groups explored how gambling harms are experienced differently among women and religious and minority ethnic communities, and what practices, approaches and resources are required to support these experiences best.

An inductive thematic analysis informed by principles of grounded theory⁷ was used to analyse the focus group data. This method was chosen to ensure that findings were firmly rooted in the experiences, perspectives, and language of the participating projects, rather than being shaped by pre-existing assumptions or theoretical frameworks. This method involved thematic analysis of focus group transcripts and facilitator notes to identify the key themes and insights that emerged from participants' own words. Reflective sessions were held internally by NPC to discuss and compare key themes, highlight any assumptions, and build on further categories and broader themes.

3.2. Case Studies

NPC conducted six case studies to reflect the different approaches of the IOF portfolio and provide further insight into how projects have adapted their approaches to best support their communities. The case studies contributed to answering the following questions:

- What aspects of projects worked well/less well for communities?
- Where and how have new ways of working supported the success of projects?
- How can the gambling harm support system adapt to support a reduction in inequalities in outcomes?
- How effective has GambleAware's and NPC's support been?

⁷ [What is grounded theory? | Grounded Theory Online](#)

To develop the case studies, each organisation voluntarily participated in a 60-minute online interview, where they were asked to share their perspective on the IOF programme, how they delivered their work, and how they made their projects culturally relevant and accessible to women, minority ethnic, and/or religious communities. Their responses were then compiled into the summary case studies included in this report, and provided in full for use by the profile organisations (see Annexes 4-9). The write-ups of the case studies have been verified by each organisation that participated.

Our approach to selecting case study projects centred on seeking to profile organisations which hadn't previously been documented as case studies. We aimed to cover both women, as well as religious and minority ethnic communities, through the case studies, as well as organisations from the gambling and non-gambling sectors. We also aimed to cover a range of programme approaches, although the number of case studies somewhat limited this. Using this approach, we identified and agreed on the following organisations for case studies with GambleAware:

Table 4. Case study selection

Organisation	Gambling-related focus	Target group	Approach
Beacon Counselling Trust	Yes	Women, religious and minority ethnic communities	Prevention and early intervention
EPIC Restart	Yes	Women, religious and minority ethnic communities	Creating gender/culturally relevant resources
Greater Govanhill Magazine	No	Women	Embedding GRH support in holistic support models
Investing in People and Culture	Yes	Religious and minority ethnic communities	Building partnerships
Money Advice Plus	No	Women	Combined GRH and economic abuse support for women
Thrivin' Together	Yes	Women	Building trust in communities

3.3. Learning events

In April 2025, NPC hosted a one-hour online, interactive learning event with 14 IOF-funded projects via Teams. NPC consulted with the Partners in Learning and a sounding board to develop the theme for the event, focusing on exploring what's working and what needs to be done when it comes to adapting gambling harm support provision. This session aimed to share emerging learnings and for participants to discuss and validate these findings, generating additional insights into how projects are adapting support provision and the successes and challenges associated with this.

In July 2025, NPC hosted another one-hour online learning event featuring 16 IOF-funded projects, which shared experiences, explored collaboration, and facilitated connections across the portfolio. Three spotlighted projects were selected in consultation with GambleAware: Greater Govanhill, Beacon Counselling Trust, and Money Advice Plus, who showcased innovative, community-led approaches to tackling gambling-related harms. The session highlighted the power of lived experience, cross-sector collaboration, and culturally sensitive engagement. The session aimed to draw out connections between IOF-funded projects in terms of partnerships, similar ways of working, and shared experiences of successes and challenges each project has faced.

In October 2025, NPC co-facilitated an in-person learning event with GambleAware and other evaluation and learning partners. This event was originally conceived as an IOF learning event, which would create space to further develop, sense-check and interrogate learning ahead of this Final Report. Following the announcement of GambleAware's managed closure, and in discussion with GambleAware and Ipsos⁸ The event was adapted to include a wider focus on showcasing and networking, in recognition of the overlap between organisations funded under the three programmes, as well as the similar findings emerging across them. This provided an opportunity for projects across the Improving Outcomes, Community Resilience, and Aftercare funds to share learning and strengthen their connections across the portfolio. A programme comprising panels with speakers from across the portfolio, combined with roundtable discussions, created space to hear, reflect and incorporate insights from projects to inform this Final Report.

⁸ The learning and evaluation partner on GambleAware's Community Resilience Fund

3.4 Monitoring report forms

As part of grant reporting, 22 IOF-funded projects submitted monitoring report forms to GambleAware on a 6-monthly basis (in November 2024 and May 2025). Two IOF-funded projects reported to the NGSN. This represents 100% compliance with the anticipated 24 monitoring submissions for IOF projects; the 25th project received 9 months of funding at the start of the funding cycle. As a result, this project wasn't required to submit monitoring beyond that period.

Monitoring sought to understand how organisations designed and delivered inclusive, effective, and sustainable gambling harm support. With a focus on the role of Lived Experience, what works for different communities, cultural relevance, and the impact of innovative approaches. Monitoring also provided an optional space for organisations to share their insights on how support systems can reduce inequalities and sustain impact. It also assessed the effectiveness of support from GambleAware and NPC. These reports provide an overview of projects' performance against their activity targets, including any challenges or successes that contributed to their progress during the previous period. The reports were shared with NPC for analysis by grouping the information according to the learning questions. We identified the key thematic areas from the data, which further reinforced insights from focus groups and case studies, and these have been applied and embedded into this report.



EPIC Restart

4. Findings

In this section, we address the core question of 'how can the gambling harm support system adapt to reduce inequalities in outcomes for women and minority ethnic and religious communities?'. Findings were produced in two parts:

1. An interim findings report, published in August 2025, which gathered insights primarily from focus groups, learning events and monitoring reports, and addressed the following questions:
 - a. What drives people towards gambling, and what are the repercussions?
 - b. What barriers are preventing people from seeking support?
 - c. How are organisations tailoring their support to help address barriers?
2. A final evaluation report (this report), which gathered insights from additional focus groups, case study interviews, the October learning event and additional monitoring reports.

This report provides a summary overview of all findings, including interim findings and then addresses remaining evaluation questions in more detail.

4.1. Summary of interim findings

A key theme from this research is the significant overlap and intersectionality between the experiences of women and those from religious and minority ethnic communities. Embedded within this research is the acknowledgement that, as one IOF-funded project commented, ***"there is no single ethnic minority community experience"*** and, similarly, there is no single experience of gambling harms for women. Instead, the findings below highlight the *shared experiences* that both groups face, as well as the distinct challenges and experiences that are unique to women and individuals from religious and minority ethnic communities.

4.1.2 Summary of findings: what drives people towards gambling, and what are the repercussions?

The analysis confirmed many findings from [previous GambleAware research](#) and uncovered a complex interplay of social, cultural, and structural factors driving gambling behaviours among women and minority ethnic groups. Two primary drivers of gambling were identified:



Social drivers: Social isolation in which gambling is used as a coping mechanism and a means to connect with others. However, gambling also drives social isolation and further increases the need for a coping mechanism, which drives further gambling.



Financial drivers: Using gambling to generate income to repay debts or cover financial gaps for those with low or unstable incomes. The stresses of financial hardship also increase the need for coping mechanisms, driving further gambling.

Figure 3. Key drivers of gambling harms



The use of gambling as a means of escape from personal problems, including some of these social and financial drivers, was also discussed. This is underpinned by key enablers such as the sheer accessibility of gambling in modern society. This includes the gamification of online gambling through apps and video games, which can make it more difficult for people to recognise the difference between harmful gambling and just simply gaming. Alongside this, gambling outlets on the high street are one of the few places open in the late hours. Loneliness and the search for connection were noted, particularly in disenfranchised communities where few alternatives exist late at night. As one focus group participant stated, *“After a certain hour, you can't access healthy food, you can't find a quiet space to read or relax, but you can grab a beer or head to the bookies.”*

For women, isolation is frequently linked to domestic abuse, with online gambling sometimes becoming a key source of connection: *“They've been isolated and this kind of online community invariably is their outlet as their only source of support.”* Yet gambling can deepen isolation because, as one participant put it, *“people lose themselves in gambling.”*

Financial pressures are highlighted as another strong driver. Communities often face added burdens, such as supporting extended families or relatives abroad. At the same time, refugees and asylum seekers may see gambling as one of the few available ways to earn money. *“For refugees in particular, this might be their first encounter with licensed gambling... the pull of that when they might not be able to work might seem like an easy way to make money.”*

International students were also described as vulnerable, experiencing financial independence but also loneliness, potentially for the first time. For women, especially single mothers, gambling was sometimes seen as a way to provide financially for their children: *“Lots of single mothers came forward... they were having to gamble to pay for food or pay for their children to have new clothes”.*

Gambling also acts as a coping mechanism and a form of escapism from discrimination, sexism, and multiple caring responsibilities. One participant explained that for Black communities, racial

discrimination in public life often leads to gambling as “**escapism from the life challenges and difficulties that are related to experiences of being Black**”. Women echoed similar pressures, with systemic misogyny and the expectation to be the “caretaker”, leaving them unsupported. As one participant reflected, “**The general pressures of being a woman... it (gambling) feels very much like ‘a bit of me-time’, a need to escape**”.

IOF-funded projects highlighted that the consequences of engaging in gambling behaviours can be complex, including financial instability, family and relationship issues (including domestic and financial abuse), as well as decreases in overall well-being.

4.1.3 Summary of findings: what barriers are preventing people from seeking support?

Figure 4. Unique and shared barriers to accessing support for gambling

Unique barriers for women	Shared barriers	Unique barriers for minority communities
<ul style="list-style-type: none"> • Domestic/economic abuse • Burden of caregiving and household roles • Gambling as a coping mechanism or escape • Competing demands make prioritising seeking gambling harm support harder • Lack of gender-relevant support 	<ul style="list-style-type: none"> • Experiences of discrimination • Shame and stigma • Fear of judgement and ostracization • Lack of engagement and support from social and health services • Low awareness of support available 	<ul style="list-style-type: none"> • Lack of trust in public institutions • Language barriers • Lack of culturally relevant resources • Experiences of racism and discrimination drives need for escape



Photo from www.thrivingtogether.org.uk

For women and members of religious and minority ethnic communities, accessing support for gambling-related harms can be extremely difficult due to a range of complex and interconnected barriers.

Women and minority ethnic and religious communities face a range of interconnected barriers. For women, these barriers are often shaped by domestic abuse, economic control, and the burden of caring responsibilities, which push gambling concerns lower down their list of priorities. As one project explained, “***They’re coming because they’re dealing with the domestic abuse as the main thing, and the gambling is a side thing.***” Many women also prioritise the needs of others over their own, trying to “keep it together” rather than seeking help for themselves.

For minority communities, mistrust of public institutions is a significant obstacle, rooted in experiences of racism and discrimination within healthcare and other services. In some cases, communities feared that support organisations were linked to government bodies, which reinforced suspicions and reluctance to engage.

One intersectional experience for both women and those from ethnic and religious communities is the stigma and shame associated with gambling. Gambling itself is often a taboo subject, with stigma and shame compounding these barriers. As one participant noted, “***Stigma has been the main thing I’ve come across. There is a total denial of its existence as an issue within the communities, as they feel far too embarrassed to talk about it.***” For Muslim women in particular, stigma is multiplied by both gendered expectations and religious prohibitions, leaving them feeling unable to disclose harms for fear of being ostracised.

At the same time, in some communities, gambling is not stigmatised at all but normalised, as in Roma and Traveller groups, where gambling is seen as a routine family activity. This presents a different challenge: organisations must engage communities where gambling is culturally accepted, rather than hidden. This reinforces the importance of tailoring approaches in culturally sensitive and responsive ways. As one IOF-funded project summarised: “***how you tackle the subject has to be really different for each group... understanding the variances across culture, religion, and recognising that these don’t operate in silo.***”

Language barriers further limit access, with organisations struggling to provide multilingual services or culturally appropriate translations. One project explained, “***Language is the issue that we face, even interpreters [are] finding it difficult to translate some of the professional gambling-related work.***”

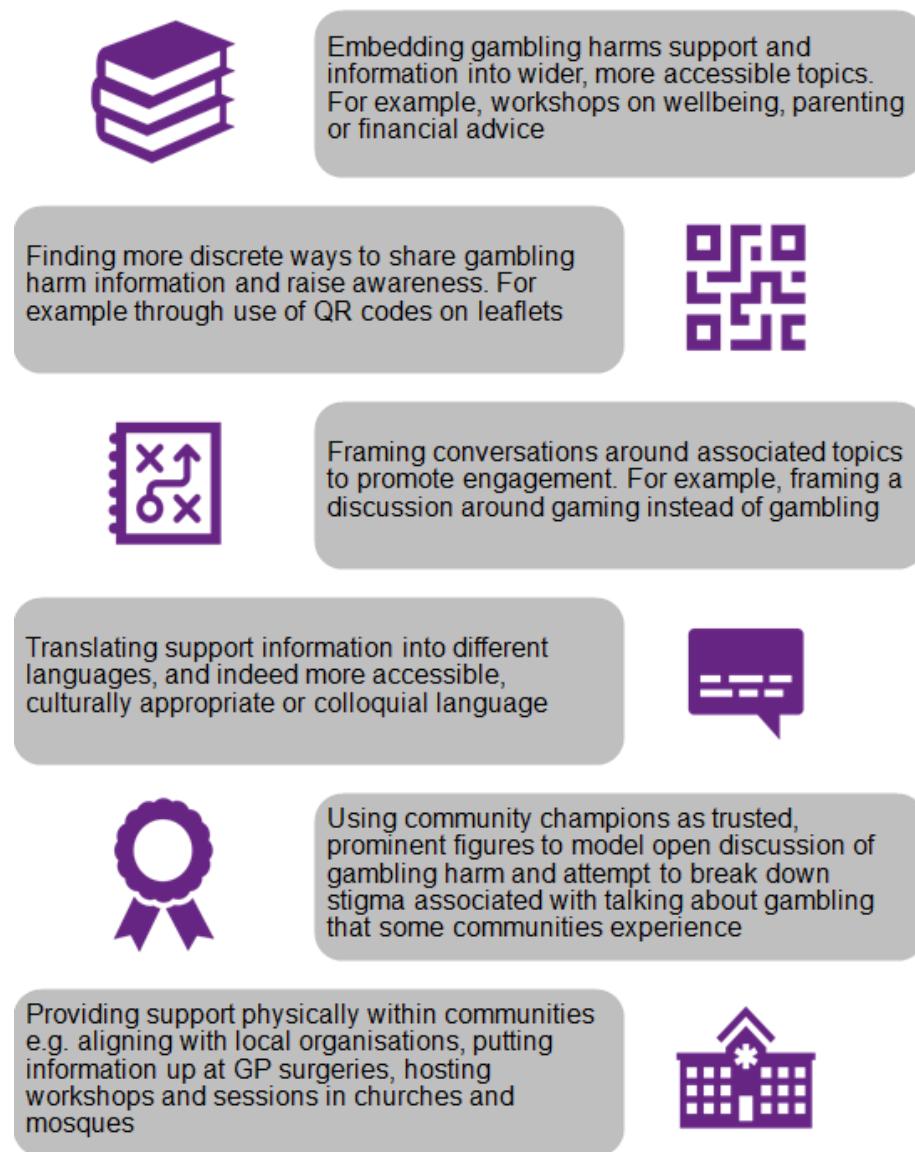
Finally, a lack of awareness among health and social care professionals means opportunities for early intervention are often missed. IOF projects reported that many practitioners do not view gambling harms as a priority, resulting in low referral numbers. As one participant observed, “***Many professionals don’t see the need for support. This lack of understanding contributes to low 1-2-1 referral numbers.***” Embedding knowledge of gambling harms into mainstream health

systems, through training, screening, and cross-sector collaboration, was seen as a critical step forward.

4.1.4 Summary of findings: how are organisations tailoring their support to help address barriers?

In response to the multiple barriers women, religious and minority ethnic communities face when it comes to accessing support for gambling-related harms, IOF-funded projects are tailoring and adapting their support to address these. This includes:

Figure 5. How organisations are tailoring support to address barriers



IOF-funded projects have developed approaches that are culturally sensitive, discreet, and community-led. A key strategy has been to embed gambling support into broader, more accessible

topics, such as debt advice, wellbeing, or support for individuals facing discrimination. This has helped reduce stigma and made conversations about gambling less intimidating. As one participant explained, ***“Rather than just going in there as a gambling harms service, it’s on the back of something else. We’ve found that particularly effective.”***



Case study example: Beacon Counselling Trust and culturally responsive practice



Beacon Counselling Trust (Beacon) is a Northwest England charity providing free counselling and support for people affected by gambling related harms and suicide bereavement. Its IOF-funded project was a collaborative initiative to address gambling harms among women and Muslim communities.

Working with Preston Muslim Forum (PMF) and Raise, the project aimed to prevent escalation of gambling harm through education, awareness and culturally sensitive interventions. Beacon coordinated delivery while empowering partners to lead in their own communities. Raise focused on gender-specific support for women and PMF hosted events to reduce stigma, integrating gambling harm awareness into broader conversations.

For example, instead of advertising for gambling harm support explicitly, they hosted holistic health events and adapted literature to be culturally appropriate. At first, Beacon was concerned that framing conversations around other topics, rather than gambling directly, would be missing the point of what the project intended to do, but it soon became clear that if the events were presented as gambling harm support explicitly, they would not get people engaging due to the high stigma around gambling in Muslim communities.

The project highlighted the importance of flexibility – adapting KPIs and delivery models to allow trust-building and culturally appropriate engagement. Co-design was key – partners shaped outreach materials, messaging, and referral pathways. Beacon’s experience demonstrates that culturally responsive service delivery is not just about translation or representation – it requires deep collaboration, adaptability and trust to create safe, accessible pathways for support.

Discreet methods have also proven valuable, particularly for women who may fear exposure. Projects reported success using QR codes on leaflets in GP surgeries, allowing individuals to access resources privately. Visual aids such as flashcards and role-play exercises were also used to create emotional distance, making it easier for people to reflect on gambling harms without feeling judged. One project noted, ***“We put the QR code where people who are more tech-savvy can just scan it... they can talk about gambling without feeling exposed.”***

Organisations are also physically meeting people where they are, bringing support to them in familiar settings. This approach prioritises accessibility and reduces barriers for those who may feel excluded or overwhelmed at accessing support in more ‘traditional’ settings. At the April 2025 learning event, IOF-funded projects shared examples of this, including partnerships with local social support services to raise awareness among women and hosting informal drop-in sessions at GP practices to provide stigma-free access to help. Some projects have integrated gambling

support into everyday routines, such as coffee mornings during school drop-off times. Others have extended outreach through radio and community-led initiatives in trusted environments, such as mosques.

Partnerships with refugee and community organisations have been critical in building trust and tailoring outreach. IOF-funded projects are also utilising “community champions” - typically trusted, prominent role models from within the communities - who use their influence to normalise the conversation around gambling to try and break down the stigma associated with gambling harms. These collaborations have enabled services to engage communities in culturally relevant ways, breaking down stigma and, in some cases, leading to referrals from groups that had previously been unreached. Lived experience leadership has further strengthened this work, ensuring that services are not only visible but resonate with the realities of those affected. As one organisation reflected, *“Helping (women from minority communities) through lived experience led, proactive outreach has led to a definite shift in awareness.”*

Together, these approaches demonstrate that effective support requires creativity, cultural responsiveness, and trust-building. By embedding discussions about gambling harms into broader conversations, offering discreet entry points, and centring on lived experiences, IOF projects have demonstrated how services can overcome stigma and reach communities that traditional models have struggled to engage.

However, the delivery of these approaches is not without challenge, and structural factors, including lack of sustainable funding, fragmented referral pathways and an at times divided sector, have had implications for organisations' capacity and ability to deliver. In the remainder of Section 4, we discuss these findings from our evaluation of the IOF in full.

4.2. What works well/less well in supporting women and minority ethnic and religious communities to tackle gambling harms?

While IOF projects have employed a range of interventions, findings have demonstrated that strategies for more meaningful community engagement and lived experience leadership have been especially successful. This section details lessons learnt about what makes those strategies particularly effective.

4.2.2 Meaningful community engagement

Community engagement and participation are core approaches for many of the IOF projects through the ‘community champion’ model. Projects work closely with communities, often embedded within them, and consider community leaders as the gatekeepers of community engagement in many instances.

 *Gambling is a specific type of harm that touches on a lot of potential cultural taboos and shame and secrecy. So actually, it contains all of the things that would prevent someone from coming forward and seeking help...So, the connections with community leaders are critical because they help establish the thing we need the most, which is trust. We can't manufacture that however much we want.* 

Focus group participant

Case study example: EPIC Restart Foundation and system activists

EPIC Restart Foundation (EPIC Restart) is a UK charity helping people rebuild positive lives after gambling harm through recovery support, coaching and community programmes. EPIC Restart's project aimed to empower women and minority communities to build purposeful lives after experiencing gambling harm. The project supported women through awareness raising about recovery pathways, lived experience involvement, early recovery coaching and overcoming legacy harms. It also worked with minority communities to understand the inequalities and challenges facing these groups in relation to gambling harms, sharing lived experience and recovery insights to destigmatise gambling harm and support those in recovery.

EPIC Restart recognised the value of working with community champions, which they call "system activists" to engage communities affected by gambling harm. These individuals, who naturally hold positions of trust within their communities, often alongside religious leaders, play a vital role in listening, supporting, and facilitating change. Rather than creating this role, EPIC Restart's outreach officer focused on identifying and strengthening relationships with existing system activists. Through this approach, the project was able to build trust, open doors and reduce the stigma surrounding conversations about gambling harm. EPIC Restart shared key learning about the time it takes to establish trust and identify individuals willing to support. Once this was established, system activists were instrumental in enabling community members to speak openly about gambling harms and access support, making them a vital part of EPIC Restart's project delivery.



The embedding of community-led models into projects has undoubtedly helped address issues of stigma, but it's not a straightforward or quick approach to implement. IOF-funded projects frequently acknowledged that trust-building is a long-term process and that disclosure of gambling harms as an issue is rarely immediate; organisations reported that multiple engagements were required to engage communities, and before individuals were comfortable enough to open up about their gambling. Our findings highlighted three key aspects of successful community engagement:



Table 5. Key aspects of successful community engagement

Successful community engagement		
Consistent and responsive	Taking time to build trust and understanding	Maintenance of existing community relationships

a. Consistent and responsive outreach

Focus group participants noted that community leaders rarely approached charities themselves, so projects rely heavily on existing relationships or introductions from trusted intermediaries (see point 3 below). As such, a concerted, consistent and proactive engagement strategy is needed to both gain access to and harness relationships with community leaders and maintain relationships with community members.

Focus group participants also noted how community relationships, especially in the early stages, can be fragile. You need to show up and consistently deliver what you promise. One focus group participant talked about the 'double-edged sword' of working in communities. The benefit is that you gain a better understanding of their culture, community, and struggles. Still, people may be reluctant to be open about their own issues with someone who is connected to their networks and communities. They may be concerned about maintaining anonymity if they talk to someone who knows others in their community or support networks as well. It was noted that this is why they take a "***bespoke, tailored approach with every person because everybody's experience is very different***". In some cases, this means working with the individual to find ways to provide support that still ensures their anonymity, for example, arranging meetings outside the community or not referring them to an external support service that may put their anonymity at risk.

b. Taking time to build trust and understanding

As discussed in section 4.3, learning clearly demonstrates that a slow, step-by-step process of building relationships in communities, particularly with religious leaders, is vital. Focus group participants emphasised the importance of connecting on a personal level and understanding individual values and motivations. One participant shared the example of using leafleting to gain access to community spaces and community leaders and then building engagements and relationships from there.

This has been particularly important for organisations providing support for women as affected others, who are experiencing financial abuse through a partner's gambling harms. We heard from projects working with these groups of women that it can take a long time to build trust and understanding, as women who are affected often experience feelings of guilt or shame when disclosing a partner's gambling-related harms. This is particularly prominent for women from religious and ethnic minority communities, where stigma around gambling is particularly high, which increases fear around identifying as an affected other due to the risk of facing judgment from within communities. In these cases, projects have found that investing in building trusted relationships with women over a long period has been crucial to reaching a point where support can be provided safely and appropriately.

The issue of time investment in relationship building is also very closely linked with the lack of sustainable funding available. For projects to consistently show up, be visible, demonstrate care, and invest time in building and maintaining relationships, they need sustainable funding that enables them to remain embedded in communities.

“It just feels like it's such a short period because once you get going and you've built those connections ... suddenly it's ... coming to an end. So, then what?”

Focus Group Participant

c. Maintenance of existing community relationships

While IOF funding may have enabled projects to forge new connections and strengthen existing relationships, for instance, with local authority members, in most instances, IOF projects relied on existing community partnerships to gain access to communities and deepen these relationships. This was either existing direct relationships or using trusted intermediaries to make initial introductions or vouch for the project representative, to community leaders and community members.

Again, limited funding was also highlighted here – organisations noted that they must be selective about the organisations they engage with and build connections, only having time to devote to relationships that are truly beneficial to them and to the communities they work with, and prioritising those with whom they have established relationships.

Investing in and maintaining these community relationships provides organisations with an important resource and expertise base to mobilise to further embed within communities.



0113 380 5680 – Office

Case study example: Investing in People and Culture (IPC) and improving engagement through partnerships



IPC offers a range of culturally sensitive and linguistically accessible services for ethnically diverse refugee and new migrant communities experiencing gambling related harms in Tyne and Wear. It delivered a collaborative model, through its partnerships with Refugee Community Organisations (RCOs) and community leaders. The project also collaborated with the Northeast Council on Addictions (NECA) for expert guidance, awareness raising, treatment and support services. Through IPC's project, NECA conducted a series of awareness raising sessions aimed at leaders of RCOs and community champions. Through this partnership model IPC, a small organisation itself, was able to significantly extend its reach. In partnership with the RCOs, IPC established a new referral pathway with NECA that led to 20 individuals from refugee and asylum seeker backgrounds receiving one-to-one support for gambling harms.

IPC has worked in collaboration with RCOs for over a decade and applied this partnership model to its IOF project to provide culturally sensitive gambling harms support services. RCOs are grassroots organisations that hold trusted and strong relations with their communities and provide on-the-ground understanding of IPC's target groups. For this project, IPC worked with 10 RCOs from different refugee and asylum seeker communities, including Ethiopian, Eritrean, Czech and Iranian communities, to leverage trusted relationships and cultural expertise to design and deliver tailored support for these groups.

RCOs played a central role in co-designing culturally sensitive engagement strategies, adapting promotional materials and establishing delivery settings to community preferences. This responsiveness significantly reduced barriers to access such as stigma and unfamiliarity with mainstream services. Through this work IPC learnt that trust was a complex and fragile aspect of working with new communities, as trust is challenging to build and can easily be lost. Community feedback throughout the project however demonstrated how partnerships rooted in trust and cultural relevance can transform access to harm reduction services.

An important lesson to take away from this when considering future interventions is the common experience among IOF-funded projects that project outcomes and outputs, especially referral rates – i.e. the number of individuals being referred to gambling-related support or treatment- have been reached lower than anticipated. This is because projects took longer than anticipated to build the level of trust and relationships needed to make referrals as planned. As such, referrals happened at a later point in project timelines, after trust and relationships had been established. We would therefore recommend that ample time and budget be built into the early relationship-building phase for future initiatives, allowing for the crucial relationships needed to be effective to be established.

4.2.3 Involvement of Lived Experience

The engagement of individuals with lived experience has also been highlighted as a strong and effective strategy in reducing stigma and tackling the issue of taboo around gambling harm. Insights from individuals with lived experience have been utilised by projects to support recruitment of project's target groups and inform the design and delivery of projects. However, as with community engagement, it's a challenging strategy to implement. Focus group participants noted that in their experience, people are only ready to share their lived experience if they, or the person

in their life who is affected, are either recovered or well on their way to recovery. Indeed, it was noted that the engagement of people with lived experience should not be taken lightly; it can be traumatic for individuals to revisit their experiences in a public forum, particularly for those who may be in the very early stages of their recovery. One participant noted that involving lived experience individuals ***“can be a powerful weapon... but then again, it can also be a massive exercise in self-harm”***.

This means that projects often recruit from a limited pool of people. Whilst this presents challenges in recruiting people with lived experience from a practical sense, we understand that ensuring lived experience individuals are in a stable place in their own recovery is a necessity to ensure that the person can contribute in the most effective and safest way. Another participant noted that taking a person-led approach to involving people with lived experience is key to ensuring that a person feels ready and safe to share their story: ***“if they’re too early in their journey, they’re probably not ready to become lived experience speakers or share that with anybody yet”***. This participant continued to explain the importance of nurturing a relationship with individuals with lived experience to support them to get to a place where they may feel ready to share their story.

When employing these kinds of strategies, it's important to be mindful of ethical concerns around tokenism and the potential harm of asking people to share traumatic stories. Steps need to be taken to ensure safeguarding and support for individuals with lived experience, as well as to ensure that staff are appropriately briefed and trained to provide support. Focus group participants suggested that offering people with lived experience alternative approaches to share their stories can be helpful and more inclusive for those who may not feel comfortable sharing directly with an audience. For example, storytelling methods, like videos, can humanise the issue of gambling harm in a first-person account without putting individuals in the spotlight and potentially exposing them to harm.

There are also circumstances where it is not appropriate or possible to use individuals with lived experience. For example, when working with children and young people. One focus group participant noted that when working with younger teenage girls, it's hard to find individuals with lived experience with whom they would identify. In that case, the most effective strategy has been age-appropriate small group conversations and trust-building over time.



Case study example: Thrivin' Together and lived experience leadership



Thrivin' Together is a UK women-led organisation providing online support, community, and opportunities for women impacted by gambling harms. It's IOF-funded project centred on strengthening its trauma-informed model and embedding lived experience at every stage of service design and delivery. This approach prioritised trust, choice and empowerment, ensuring that support reflected the needs expressed by women themselves rather than imposing predefined solutions. Over the course of the project, Thrivin' Together delivered care calls, peer-led WhatsApp groups, workshops and initiatives such as a programme to build financial confidence. The project involved an advisory board of women with lived experience of gambling harms, who provided strategic guidance and co-developed resources. Staff at Thrivin' Together also bring lived experience of gambling harms and received specialist training on topics such as coercive control and unconscious bias, reinforcing a culture of safety and understanding.

Key learning from the project highlights the importance of voluntary engagement and consistency in building trust. An example of this is the introduction of self-registrations, enabling women to join the programme at their own pace. The project was clear to distinguish itself from referral services, self-registration was simply about signing up to join a community network and safe space. This approach avoided pressurising women, and fostered a sense of belonging, allowing women to engage when ready. Thrivin' Together's project shows that lived experience is not a tick-box, but integral to effective engagement. Alongside its trauma-informed approach, co-production and lived experience leadership created trusted environments where women could feel heard, respected and supported

GambleAware has utilised its platform to promote lived experience leadership and engagement within the gambling harms sector, contributing to a broader emphasis on lived experience engagement across the impact sector as a whole.⁹ The challenge, however, is that the organisations that tend to be at the forefront of strong lived experience practice are smaller, local or grassroots organisations that may not have the resources to produce evidence and research demonstrating the impact of these approaches. These challenges are discussed in detail below; overall, GambleAware has played a significant role in establishing a robust evidence base that demonstrates the value and importance of lived experience practice

4.3 Where and how have new ways of working supported the success of projects?

Broadly, the ambition of the IOF, as one of GambleAware Innovation Funds, was to transition from traditional clinical models of support to holistic, community-embedded practice. Across the IOF portfolio, projects demonstrated a range of innovative practices tailored to the needs of women, religious and minority ethnic communities.

⁹ Note examples of other organisations practices to lived experience engagement in [Centring Lived Experience: a strategic approach for leaders - NPC](#)

While there are examples of innovation in terms of new practice, there was also innovation evident in smaller-scale adaptations of community-led and lived experience approaches, e.g. embedding support for gambling-related harm into broader services. Sentiment from some of the case studies highlights that, in fact, to deliver meaningful work, the solution is simple: you take your lead from the communities in which you work.

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Case study example: Greater Govanhill Magazine and creative storytelling



Greater Govanhill CIC is an organisation based in Govanhill, one of Scotland's most diverse communities, dedicated to amplifying local voices and tackling social issues through community-led journalism and engagement. Through its IOF-funded project, Greater Govanhill delivered an eight-week programme combining journalism skills training with participatory action research (PAR) for local women affected by gambling harms. The project aimed to reduce stigma, raise awareness, and enable participants to take meaningful action. Twelve women from varied backgrounds learned to research and write stories, contributing to a special issue of Greater Govanhill magazine on gambling harms. Alongside this, they explored advocacy strategies such as engaging faith leaders and advising charities on alternatives to raffles.

Co-design and building trust were central to the project, enabling open communication and regular feedback which allowed the project to be shaped by participants in a way that helped them get the most out of it. Recruitment required trust-building; the team avoided intrusive questions and created a welcoming, women-only space with co-developed ground rules, fostering solidarity and safety. While journalism sessions were highly successful, PAR initially felt too technical and academic which hindered engagement. Greater Govanhill actively listened to the women and took their feedback on board. They adapted by integrating PAR into journalism sessions and reframing it as 'community action', which felt more familiar and accessible than PAR. This small change boosted engagement, and women went onto engage with policy, appear in media and get recognition from local council. Overall, the project highlights the positive impact of women-only groups and creative approaches like storytelling when it comes to empowering people to speak up about gambling harms.

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It is worth noting that it is challenging to determine the extent to which these innovations originated specifically under the IOF or were pre-existing practices of IOF-funded organisations. However, key examples of innovative practice to highlight throughout the period of IOF funding include:

Online Community Building

Simon Community Scotland developed Aila, an online safe space for women connected to gambling but don't feel they have a community for support or somewhere they can go to find information. The website was co-designed with a group of women with lived experience of gambling harm

Integrated support

Several organisations have embedded gambling harm support into broader services such as debt advice, domestic abuse support, or wellness programmes. For example, **Thrivin' Together** offer a range of activities for women affected by gambling-related harms, including sessions on building resilience, yoga, and goal setting.

Use of creative Storytelling

Betknowmore UK addresses gambling harms through education, support services and awareness raising activities. Creative approaches to awareness-raising activities, have included producing digital storytelling assets, podcasts and spoken-word pieces about gambling-related harms. These activities have created space to open up a dialogue with Black men in London to speak about gambling.



Investing in People and Culture



Case study example: Money Advice Plus and integrated support



Money Advice Plus (MAP) is a UK charity providing free, confidential advice and support to help people manage debt, benefits and money effectively. MAP delivered a project to support women who are victim-survivors of complex domestic abuse situations and who are experiencing economic abuse through gambling harm. The project was delivered in partnership with Refuge, Information, Support and Education (RISE) and Breakeven, providing a mechanism to develop a shared understanding and support and referral pathway between a domestic abuse service, a gambling service and a debt advice service, providing specialist support in economic abuse and coerced debt. The project did not build new services from scratch but instead integrated existing services into a coordinated pathway. Each partner employed female-only staff to deliver gender-informed support to women victim-survivors.

Prior to this project, the link between economic and domestic abuse and gambling harms gained little attention in the UK, yet over the course of the IOF, MAP has found that the connection couldn't be clearer. In the first year of delivery, the three-way partnership had supported 115 women victim-survivors who had experienced domestic/economic abuse and gambling harm.

Trust building was central to the project's success, and delivery teams worked hard to gain the skills to meaningfully build in relationships with clients. Key to the project's achievements has been the increased confidence of dedicated team members to ask women victim-survivors about gambling harms. By introducing a screening question about gambling, MAP uncovered a high prevalence of gambling harm that would otherwise have gone unnoticed.

MAP shared that gambling harm support has become more integrated in their services, and it's now a natural thing to ask users about and offer relevant support for. Key learning from MAP's project was the importance of timing in engagement. Clients engaged with different services at different times at all stages of their journey; therefore, support must be flexible and person-centred to effectively meet the needs of individuals receiving support.

4.4 What role do structural factors (continue to) play in the success and failure of projects? How have projects mitigated this?

Within the broader sector, several key structural factors have implications for how projects are designed and delivered. Throughout our engagements with IOF projects, we have learnt that the key structural factors are as follows:

Figure 6. Key structural factors that implicate how projects design and deliver work



The lack of culturally and gender appropriate services and the limited integration of gambling harms into wider systems have been discussed in greater detail in the sections above. The remainder of section 4.5 discusses other key structural barriers in more detail:

- the lack of long-term and sustainable funding
- the under-recognition of local grassroots and community-led projects
- the fragmented nature of the sector referral pathways

These three barriers were specifically discussed in the focus group that considered how the sector can best respond with support.

4.4.2 Lack of long-term sustainable funding for initiatives

Under the voluntary levy commissioning structure, gambling organisations were under no legal obligation to contribute funds to support research into and treatment of gambling harms, which led to an unstable and unpredictable funding landscape. Contributions from gambling organisations varied, with some giving millions and others giving as little as £1 per year.¹⁰ This structure meant funding available for gambling harms support fluctuated, and with a small number of industry organisations providing the bulk of the funding, if one organisation reduced or withdrew support, it could significantly impact the funding available in the sector. This, alongside a stream of shorter-

¹⁰ [Statutory levy and online slot stake limits to be introduced to tackle gambling harm - GOV.UK](https://www.gov.uk/government/news/statutory-levy-and-online-slot-stake-limits-to-be-introduced-to-tackle-gambling-harm)

term, innovation-focused pilots, has made it difficult for a sustainable and long-term funding landscape to exist.

Focus group participants strongly and unanimously agreed that the lack of long-term, sustainable funding for initiatives was the most significant and pressing issue facing the gambling harms sector. It underpins some of the other barriers mentioned in this section because, without it, organisations do not have the conditions required to support long-term impact, and it is extremely challenging for them to implement some of the most successful community-led strategies to help those experiencing gambling harm. The lack of sustainable funding manifests in different ways, including:

- For smaller, grassroots, community-led initiatives, lack of long-term funding exacerbates the disparity in power that exists between them and bigger delivery organisations who may take their ideas and run with them because they have the resources or prioritise more 'established' organisations.
- It creates a backdrop of uncertainty, which creates a challenge in hiring and maintaining staff. When funding periods end or funding is unstable, organisations lose their trained staff and the vital skills and experience they require and then need to re-recruit and begin training someone from scratch. This is especially challenging for work in communities where, as noted above, a consistent and visible approach is crucial for building trust and establishing relationships.
- It is a driver for fragmented referral pathways because of a reduction in personnel, organisations, capacity and general consistency within the sector.
- It limits the organisation's ability to understand impact – *"how do you measure long-term impact if your funding is only for 18 months? You want to be gathering data from people 3-5 years down the line or even more.* It also limits organisations' ability to shape and share best practice – *"best practice is something that I hear all the time. Let's share best practice... but surely best practice evolves over time".* This also means it's challenging for organisations to measure broader impacts, such as those on well-being and resilience. The measurement associated with screening and/or reporting requirements of donors likely won't interrogate these factors. If projects lack sustainable funding, it's challenging for them to follow up 3, 5, or 10 years in the future to assess potential longer-term and wide-reaching impacts.
- It's unsettling for people in recovery to have a backdrop of uncertainty when it comes to what support they can receive in future. It creates a challenge in engaging individuals with lived experience - *"as a lived experience recovery organisation, that's just so unsettling for people in recovery. I would say like 90% of our workforce are in recovery. It's just an awful situation"*

To address these challenges, funders and policymakers must prioritise multi-year, flexible funding models that reflect the time it takes to build trust and meaningful relationships with communities and acknowledge that recovery from gambling harms is a long-term process. Grassroots,

community and lived experience-led organisations are best placed to understand and support the needs of communities; therefore, investment should be directed towards them to strengthen the work they do. Sustainable funding is foundational to building a sector that is resilient, equitable, and capable of delivering lasting impact.

4.4.3 Under-recognition of local grassroots and community-led projects

Focus group participants shared that despite sector-wide understanding that culturally sensitive, community embedded approaches are some of the most successful ways to engage with those at risk of gambling harm, there is still an under-recognition of this, and under-utilisation of the organisations best placed to deliver these approaches. One focus group participant explained, “*it's under recognising the fact that ... the community spaces are where we can meet people and actually have the biggest impact*”.

Despite their deep community trust and cultural understanding, local grassroots and community-based organisations are often overlooked in favour of larger accredited bodies. For example, training offered by grassroots organisations may be less appealing to professionals because it's free and no accreditation is associated with it. Yet this shouldn't undermine the value of training, which has been directly informed by service users on the ground and delivered by experts. The group felt that grassroots organisations were often engaged only to help larger bodies meet targets, rather than as equal partners.

“What pushes us aside is that they'd rather go with somebody who's accredited, and I appreciate all of that. But you're not going to get that rich information and understanding about cultural sensitivities that we've learned from our service users directly.”

Focus group participant

We also heard organisations highlight potential tensions between community-led, grassroots approaches and accreditation requirements, which makes it more challenging for smaller organisations to become accredited. For example, participants in focus groups often highlighted the community-led, informal nature of grassroots service provision, which allows them to prioritise accessibility and cultural sensitivity over rigid processes and external criteria. As one participant noted, “*it's all about meeting people where they are, we try to make it as ordinary as possible*”. Some organisations mentioned that accreditation requirements can limit outreach strategies that work well in grassroots settings, such as informal meetups or culturally embedded approaches, and may feel pressure to professionalise to meet membership criteria, which conflicts with their community-led ethos. One focus group participant explained that “*I wouldn't be able to meet with a beneficiary in a café due to professional membership requirements*”, suggesting that smaller organisations may be forced to change aspects of their delivery when required to meet externally validated criteria. Another organisation mentioned that they pursued the Gambling Harms Charter to demonstrate credibility, but this also adds an administrative burden, which can put pressure on smaller teams to manage. The implications of this are that accreditations can unintentionally exclude smaller organisations that lack resources for compliance. In contrast, IOF-

funded projects feel that funders and regulators should recognise alternative evidence of quality, such as community trust and impact metrics.

Participants detailed challenges in collaborating with larger organisations, including their ideas being used without credit. One participant shared an example of co-creating resources with a larger organisation, to then find that the resources were being printed for dissemination without the logo of their smaller, grassroots organisation. This organisation fought for recognition, but participants also observed that it is challenging to fight for equal partnership with their limited time and resources. For grassroots, community-led initiatives, the lack of long-term funding exacerbates the disparity in power that exists between them and larger delivery organisations. One focus group participant shared that it's common for ideas born out of grassroots organisations to be taken and run with by larger organisations and turned into their own because they have the resources to deliver them.

The call from focus group projects was for larger organisations to adopt a more listening approach and be less risk-averse in their collaboration with grassroots organisations. They view this as a two-way beneficial relationship, in that larger organisations can be informed by the rich knowledge and expertise surrounding community-led, culturally responsive approaches. In contrast, local and grassroots organisations receive recognition for their work and the resources/ connections to profile and embed their learning further within the sector.

4.4.4 Fragmented nature of the sector and referral pathways

IOF projects are part of a broader sector addressing gambling harm, comprising various organisations, including specialist and non-specialist organisations, public health bodies, and local authorities. This also includes the National Gambling Support Network (NGSN¹¹) established to provide free treatment, advice and support on a range of gambling-related issues. The NGSN aims to enhance referral pathways and enable local services to direct individuals to the most suitable and appropriate service for their needs. Some members of the IOF fund are part of the NGSN, including ARA Recovery for All, EPIC Restart Foundation, Adferiad, Betknowmore, Reframe Coaching, Breakeven, and the North-East Council on Addictions (NECA).

While the NGSN undoubtedly plays a role in promoting connection in the sector, not every organisation can be part of it or feel represented by it. Focus group participants noted that it can be challenging for smaller, newly established organisations to create connections, even within a network like the NGSN, because larger and more established organisations often utilise their existing connections rather than considering new collaborations with newer organisations. Focus group participants attributed this to larger organisations being overly cautious about working with newer organisations that have less of a 'track record'. As such, due to the absence of an overarching body, such as a national board, which would provide oversight and connection for organisations working in the sector, there is a continued fragmentation of the sector and a lack of awareness within, for example, the NHS, regarding the available support. So, it's up to

¹¹ NGSN was launched in 2023 and is commissioned by GambleAware through a committed fund of £81 million.

organisations working on gambling harm to forge connections and create pathways. One focus group participant noted that in Scotland, it's especially complicated because they don't have NHS clinics set up in the same way as other areas. So, they set up their own framework to understand which organisation provides what, but as another participant observed - "*it's a postcode lottery in terms of who will be willing and who isn't willing to work in that collaborative approach*".

Focus group participants recommended having an independently chaired board, separate from the Commission or any funder, responsible for oversight of treatment and forging connections. This could comprise government and public health representatives, as well as representatives from key organisations in the sector addressing gambling harms. Their "blue sky" vision was for an independently chaired board that would sit at the national level but could work regionally and locally, across sectors – linking local organisations for referrals and sharing of expertise and resources. Ideally, this board would act as an accountability mechanism to ensure and facilitate bottom-up approaches from grassroots organisations to inform service design, to ultimately ensure that a more holistic approach is taken that addresses the underlying causes of gambling harm.

Another disparity noted in forging connections and pathways between organisations was the issue of stigma associated with being linked to GambleAware and industry funding. GambleAware historically has received and dispersed significant funding via a voluntary levy from the gambling industry. Some organisations, including NHS bodies, have considered it unethical to accept funding from the very organisations they believe are responsible for creating harm in the sector. The ramifications of this perspective have been very real for some IOF projects. Focus group participants discussed a "disconnect across the sector". They shared examples of being excluded from panel discussions or turned away from events because other participants had complained about their involvement. They also noted the lack of research from GambleAware included in the recommendations for the NICE guidelines on gambling harms, stating that GambleAware's research was unfairly overlooked due to its association with industry funding.

“ *"There's kind of two sectors currently across the UK, there's those who are willing to work with GambleAware, and there are those who aren't willing to work with GambleAware, and there is such a disconnect between the two... which is a bit sad that I even have to say that. There are multiple occasions where we've been rejected from a conference or pulled off a panel because we're funded by GambleAware. We're seen in a certain light, so there is such a disconnect across the sector."*

”

Focus group participant

GambleAware is aware of this perspective and, within the organisation's history, has made changes to distance itself from industry organisations (including, as of June 2018, stipulating that no industry members could hold GambleAware board positions). Indeed, for projects that NPC has talked to, it appears that their day-to-day frontline delivery receives no input or influence from industry organisations. Focus group participants noted that there is a "perception" of industry influence but in reality "*I can hold my hands up and say for our project, it definitely hasn't been*" influenced.

The current reality is that the most significant funding in the sector comes from industry organisations¹² Following the introduction of the statutory levy in April 2025, funding from industry organisations will be mandated and distributed via the Gambling Commission. Focus group participants noted that they anticipate a degree of “*unity post-levy*” as most eligible organisations will receive their funding through this mechanism. Thus, there will be potential for a greater connection among organisations.

The challenge of a lack of sustainable funding was also highlighted as a key driver of fragmented referral pathways. This is because the space constantly changes due to the prevalence of short-term funding; the sector loses trained staff, established relationships, and even organisations altogether, against a backdrop of fragmented and limited funding. This creates loss of connections that can form the basis of referral pathways and, overall, a loss of consistency throughout the entire gambling harms sector. Linked to this is the limited capacity of organisations to forge connections. Smaller teams may struggle to find the time or personnel to lead connections and engagements. This was closely linked to the challenge of a lack of sustainable funding.



Investing in People and Culture

¹² The majority of funding for gambling harms support in the UK currently comes from the gambling industry itself. According to the Betting and Gaming Council (BGC), UK gambling operators have donated £172.5 million to support research, education, and treatment of gambling-related harms since 2020.

5. Conclusion and recommendations

The findings show that gambling harms among women, religious and minority ethnic communities are complex and multifaceted. Projects have demonstrated the critical importance of culturally responsive, community-led approaches in addressing gambling harms among women and minority ethnic and religious communities. Organisations have developed trust-based models of support that reflect the lived realities of the communities they serve.

The evaluation reveals that gambling harms in these communities are deeply intertwined with broader social and structural inequalities, such as financial hardship, isolation, and experiences of discrimination. For many individuals, gambling turns into a coping mechanism, whether to escape the pressures of everyday life, including gendered pressures of caregiving, or as a response to deep-rooted emotional or social struggles. These harms are compounded by barriers to accessing support, including stigma, mistrust of services, and a lack of culturally appropriate support.

IOF-funded projects have responded with creativity and compassion, embedding lived experience, co-producing resources tailored to cultural and gender contexts, and integrating gambling harm support into wider services such as domestic abuse support, financial advice, and wellness activities. These approaches have shown success in promoting engagement and bringing taboo subjects out into the open. However, they are not without their challenges, including a lack of sustainable funding, the time and resource-intensive nature of trust and relationship building, and challenges associated with delivering lived-experience and community-led models. Short-term funding cycles, fragmented referral pathways, and divisions within the gambling harms sector also constrain the ability of organisations to sustain and scale these approaches.

As the sector transitions to a statutory levy model and GambleAware prepares for closure, there is an opportunity to embed the learning from IOF into the future gambling harms system. This means recognising the value of grassroots organisations, investing in long-term capacity, and ensuring that community-led approaches are not sidelined in favour of clinical or centralised models.

Implications for IOF-funded Projects

The transition to a statutory levy presents a backdrop of uncertainty for projects, and concerns have been raised about the potential loss of knowledge and evidence during this transition. As such, we encourage organisations to continue capturing and sharing insights on what works, particularly around culturally tailored interventions and lived experience leadership, to inform local systems and future commissioners. GambleAware innovation funds have emphasised the importance of learning exchange, and GambleAware regularly hosts learning exchange sessions and conferences. Establishing and maintaining similar learning mechanisms under the new system, such as shared learning platforms, routine dissemination of evaluation findings, and structured partnerships between established and emerging providers, will be key.

The transition also represents an opportunity to establish and deepen collaborations with health, housing, domestic abuse, and financial support services, to embed gambling harm support into broader service ecosystems. As such, organisations should continue to push for cross-sector

collaboration, for example with GP services and domestic abuse organisations, as well as other community spaces such as food banks and job centres, to reach individuals at key entry points and normalise discussion of gambling harms in wider settings. The challenge will be how organisations can do this under a new commissioning structure, with separate commissioning arms and potentially dwindling resources. Key approaches to consider include:



Prioritising low-cost collaboration: e.g. focusing on joint training sessions, shared referral pathways, or co-located drop-ins that require minimal financial investment.



Share resources and expertise: Organisations could pool training materials, evaluation tools, and staff time to reduce duplication and maximise reach.



Build informal alliances: Establish regular communication channels (e.g., WhatsApp groups, quarterly check-ins) with partner organisations to maintain relationships without formal structures.



Highlight mutual benefits: Frame collaboration as a way for partners (e.g., GPs, housing services) to meet their own objectives better, encouraging buy-in without extra funding.

Implications for GambleAware

GambleAware is supporting funded organisations during this transition, including signposting organisations to key sources of information. As GambleAware winds down, it is prioritising the transfer of relationships and learning to new commissioners, all the while using its remaining influence to push for funding models that allow organisations to deliver sustained impact.

Where possible, we would also recommend that GambleAware continue to profile the learnings from this programme for others in the sector. We have observed that GambleAware's trust-based funding and evaluation model, which prioritises embedding lived experience as an innovative approach, has been gathering attention from those in the sector (e.g., through GambleAware's presence at recent conferences, including the Charity Evaluation Working Group and the UK Evaluation Society conference). This reflects the critical role funders have to play, which extends beyond the grant-making itself. When funders manage relationships with grantees and funded projects in a trusting, flexible, and responsive manner, it can have significant benefits for the delivery of work being funded and lead to greater impact.

Implications for the wider system and future commissioners

The findings from the evaluation underscore the need for a more nuanced approach in the sector addressing gambling harms. Prevention and treatment strategies need to be tailored to meet the distinct needs of these communities, ensuring that interventions are culturally sensitive, trust-based, and integrated with broader public health and social issues. As one focus group participant

noted, “with change comes opportunity” and the evaluation highlights several key implications for effective commissioning. This includes:

1

Ensuring services are culturally tailored, trauma-informed, community-led; and that they embed lived experience leadership.

A one-size-fits-all model is likely to be less effective; instead, services should be commissioned to prioritise trust-building with communities, using multilingual and discreet outreach approaches, and forming partnerships with trusted local figures and faith leaders. This could be achieved through co-design of interventions with community advisory panels, multilingual outreach campaigns, and peer support networks. Underpinning this could be an independently chaired board which would facilitate linkages of organisations to support ongoing knowledge sharing of these key approaches and how to embed them effectively.

2

Where possible, services should integrate gambling support into broader issues and professionals should be better trained to recognise gambling as a public health issue and incorporate screening into routine care.

This includes both healthcare professionals and, for example, HR professionals at places of employment who may provide policies and support for drug and alcohol awareness, but do not currently recognise the need for gambling harm support in the same way. Key approaches for integration include NHS trusts, housing associations, and domestic abuse services embedding screening questions into, for example, GP consultations and housing intake assessments.

Alongside this, HR teams and departments should promote workplace HR wellbeing policies that recognise gambling addiction and harm.

3

Embedding gambling harms into wider strategies around employment, social support provision, mental health and health inequalities to address inequality and cost-of-living pressures.

This could be achieved by local authorities, for example, through aligning gambling harm support with services such as debt advice, food banks, and financial literacy programmes. Alongside this, the government and future system commissioners should provide sustainable funding so that effective treatment and support become part of standard practice.

4

Prioritising funding for organisations serving religious and minority ethnic groups and women, and organisations working with community-led approaches.

This could be achieved through government commissioners, funders, women’s organisations, refugee/ migrant organisations, and other actors by ring-fencing commissioning streams and targeting grant programmes that prioritise funding for communities most in need. Assessments to further establish an evidence base for response to need could include equity audits in funding allocations.

5 Addressing confusion and fragmentation in the gambling harms system by mapping and streamlining referral routes across services and forging greater connections between organisations.

This would require a significant joint effort from various actors, including NHS England, local authority public health teams, and voluntary sector consortia. This could include a shared national referral map and digital directory of services, alongside more standardised referral criteria and protocols across services.

6 Provide training, research and networking opportunities for smaller organisations to scale their impact and participate in system-level change.

Academic institutions, umbrella charities and professional associations could establish regional training hubs for smaller organisations to convene and learn. The establishment and maintenance of peer-learning networks would also facilitate this. Alongside this, shared evaluation frameworks across organisations would enable more comparable data for impact, building a picture of system-level change.

As the gambling harms sector transitions, the lessons from the IOF must serve not only as a record of what works but as a blueprint for a more inclusive, connected, and community-driven sector.



Annexe 1: IOF grants table

Organisation	Project name	Duration	Budget
Adferiad Recovery	Wales Women's Gambling Awareness Programme	Apr 2024 – Mar 2026	£200,000
Age UK Lambeth	Better Together	Apr 2024 – Mar 2026	£300,000
Al-Huraya	Culturally Wise Women	Apr 2024 – Mar 2026	£150,000
Beacon Counselling Trust	Prevention and Early Intervention for Marginalised Communities	Apr 2024 – Mar 2026	£300,000
BetBlocker (joint project with YellowScarf)	Translation of the BetBlocker app. Enhancing Yellow Scarf's Therapy reach through a new service model.	Apr 2024 – Mar 2026	£56,000
Betknowmore	Your Voice Matters – Educating & empowering Black, African and Caribbean communities impacted by gambling harms	Apr 2024 – Mar 2026	£150,000
Complete Woman CIC	Complete Woman – GambleAware Project	Apr 2024 – Mar 2026	£99,931
Coram's Field	Championing Change	Apr 2024 – Mar 2026	£130,000
EPIC Restart Foundation	GATEWAY – empowering women and minority communities to restart	Apr 2024 – Mar 2026	£264,674

	positive lives after gambling harm		
Faiths Forum for London	Beyond the Bet: Elevating Minority Voices in Gambling Recovery	May 2024 – Mar 2026	£150,000
Greater Govanhill Magazine	Telling Different Stories: Community reporter training for local women with lived experience of gambling harms	Apr 2024 – Mar 2026	£49,596
IMO Charity	Hal – Solution: Supporting Minority Groups (from South Asian communities) experiencing harm related to gambling	Apr 2024 – Mar 2026	£169,392
Investing in People and Culture	Empowering Ethnically Diverse Communities: A project to tackle gambling issues	Apr 2024 – Mar 2026	£150,202
Money Advice Plus	Gambling Harm and Economic Abuse	Apr 2024 – Mar 2026	£299,981
Recovery 4 All (ARA)	Minority Communities' Access to Support	Apr 2024 – Mar 2026	£299,480
RedCard	Gambling Support Project	May 2024 – Nov 2024	£50,000
Reframe Coaching	Helping Women to Access support	Apr 2024 – Mar 2026	£100,745
Shama Women's Centre	Women's Holistic Recovery Programme	Apr 2024 – Mar 2026	£150,000
Simon Community Scotland	Reaching Out: Breaking down barriers and stigma for women experiencing harms from gambling	Apr 2024 – Mar 2026	£289,595

Solihull Moors Foundation	Solihull Circle of Support	Apr 2024 – Mar 2026	£47,150
Surrey County Council	Trauma Informed Gender Specific Support and Awareness for Women Experiencing Gambling Harm Across Surrey	Apr 2024 – Mar 2026	£299,434
The Flowhesion Foundation	Da Jawaarai Nuqsaan (Pashtoon for Harms of Gambling Programme)	Apr 2024 – Mar 2026	£118,168
Thrivin' Together	Together Women	Apr 2024 – Mar 2026	£125,652
Yellow Scarf CIC	Migrant SHE – Support, Help, Empowerment	Apr 2024 – Mar 2026	£100,000
	Translation of the BetBlocker app. Enhancing Yellow Scarf's Therapy reach through a new service model	Apr 2024 – Mar 2026	£30,000
YGAM	Reducing Gambling Harms in Diverse Communities	Apr 2024 – Mar 2026	£300,000

Annexe 2. Focus Group dates

Focus Group	Theme	Date
One	Engaging and working with people from ethnic and religious minority groups	13 th May 2025
Two	Engaging and working with Women	14 th May 2025
Three	Building Trust and Relationships with Communities	24 th September 2025
Four	Gambling Harm System and how the sector should respond	25 th September 2025

Annexe 3. The effectiveness of GambleAware and NPC's support

There are valuable learnings to take from *how* GambleAware have supported IOF-funded projects over the course of the programme. In case study interviews and focus groups, projects have shared that GambleAware's responsiveness and flexible approach to working with IOF-funded projects have been particularly beneficial, giving projects the ability to adapt delivery and strategies, particularly in the earlier stages of projects when many found engaging with target communities required more time than initially anticipated. The only additional support we heard projects would have benefited from was site visits from GambleAware, so projects could fully demonstrate their activity and impact.

NPC has had many engagements with IOF-funded projects, including familiarisation at the start of the partnership, as well as MEL support provided to projects and learning engagements, such as learning events, case study interviews, and focus group discussions. Feedback was largely positive across two Theory of Change and Impact Measurement training sessions held in February. In response to Sounding Board feedback, three standalone sessions on fundraising, communications, and strategy were added to increase knowledge and create space for participants to share their own approaches and learning.

Through an online evaluation survey, participants commented that they found the sessions to be interactive, clear, and grounded in practice. Peer-to-peer discussion and the inclusion of real examples were highlighted as particularly valuable. In response to the Impact Measurement session, one participant described "***light bulb moments***" that equipped them to identify learning and how to apply this within their organisation. Several noted that the sessions helped make measuring impact "***not daunting***" and "***easy to digest.***" A participant from a May focus group described how it was "***incredibly useful in sharing what we were doing, the challenges we face, and the parallels in our work.***"

Some participants suggested improvements for sessions, for example, providing editable templates in different formats for exercises, such as Word instead of PowerPoint. Participants in the Theory of Change session suggested spending more time on how to frame and answer practical impact questions. At the same time, others wanted more in-person sessions to further build connections. Another suggestion was offering follow-up support; in response, we reframed our MEL consultancy support offer as extension activities to the Theory of Change and Impact Measurement training. Broadly, the sessions were perceived as useful, increasing confidence and knowledge to help demystify key MEL elements, such as impact measurement.

GREATER GOVANHILL: TELLING DIFFERENT STORIES

Improving Outcomes Fund | GambleAware | September 2025

This case study was produced by New Philanthropy Capital (NPC) as part of an external evaluation of GambleAware's Improving Outcomes Fund.

Greater Govanhill CIC is a community-led magazine and social enterprise based in Govanhill, Glasgow, promoting inclusion and amplifying underrepresented voices in one of Scotland's most diverse neighbourhoods. This case study demonstrates the learning from role supporting local women with lived experience of gambling harms through a community reporter training programme.



What is the project?

Greater Govanhill ran the 'Telling Different Stories' project, funded through the IOF, to provide community reporters' journalism skills training to local women who have experienced gambling harms. Alongside the skills training, women also ran participatory action research on gambling harms. The project aimed to reduce stigma, raise awareness, and empower participants to take meaningful action within their communities.

Programme design and delivery

The project was designed as an eight-week programme combining two strands:

1 Journalism skills training: Weekly evening sessions focused on how to research, write and produce stories. Each woman contributed an article to a special issue of Greater Govanhill magazine, published in early 2025. Topics ranged from the impact of gambling on children's rights to personal narratives of growing up in families affected by gambling, and analyses of advertising harms.

2 Participatory Action Research (PAR): Weekly evening sessions, facilitated by an expert, encouraged participants to explore gambling harms and design small-scale advocacy action projects. These included contacting GP surgeries to display information on gambling harms, engaging local faith leaders, and advising charities on alternatives to raffles.

Overall, 12 women participated in the programme, aged from their mid-20s to mid-70s, and represented diverse ethnicities, religions, and life experiences. Some had a personal history of gambling, whilst others were affected through family members. Despite these differences, the group formed a strong bond, creating a safe and supportive environment.

Community engagement and trust building

Recruitment of participants combined digital outreach through social media with traditional methods such as flyers in libraries, newsletters and outreach via community organisations. In the early stages of the project, recruitment of participants was slower than expected, due to the stigma around gambling and the time needed to build trust with the women to give them confidence to open up. The team deliberately avoided requiring disclosure of personal trauma or experience of gambling harms during sign-up, and instead only asked a simple yes or no question, “Have you been negatively affected by gambling harms?”, fostering trust and lowering barriers to participation. These combined approaches proved effective, and the project successfully engaged its group of participants.



Creating a safe space was central to the project’s success. Ground rules were co-developed in the first session with all participants, and structured activities enabled participants to build relationships with one another and share their experiences creatively and at their own pace. Reflective diaries offered a private outlet for processing emotions. The project also provided hot food and a welcoming environment for participants, which reinforced the sense that this was a space where participants belonged.



Photo by Greater Govanhill

The decision to run an all-female group was a first for Greater Govanhill, yet this emerged as a decisive factor in building trust and solidarity. The organisation has led many community training projects for groups including refugees and migrants, people affected by health inequalities, young people and the Roma community. Still, they had never done a women-only group, and as they identified a need amongst women for gambling harms support, the IOF provided an opportunity to directly meet this need. Participants reported feeling empowered by being among ‘strong women’, and this dynamic is something the organisation plans to recreate in future projects.

Responding to challenges

Initially, the project's two strands were distinct from each other, with the journalism sessions taking place on different evenings from the PAR sessions. Throughout the project, the journalism sessions were consistently well-received. However, the PAR strand encountered challenges with engagement. Feedback from participants suggested was due to some of the language around PAR being less accessible and too academic, as well as the self-directed nature of the tasks. In response to this feedback, the team adapted the approach for future delivery, integrating PAR into journalism sessions and reframing it as 'community action' to make it more practical and less jargon-heavy.

Learning for the future

The project was an overall success: the group produced its special issue on gambling harms for Greater Govanhill Magazine, participants went on to join policy forums, spoke on TV, ran a joint event with Simon Community and Fast Forward to present the project and host a women's panel to discuss the work, and the project's work was cited in local council discussions and praised by the Scottish Parliament. Going forward, Greater Govanhill will draw key learnings from this project, including merging journalism skills training and community action sessions into a more cohesive offer, and continuing women-only groups as important, safe, supportive, and empowering environments.



Photo by Greater Govanhill

MONEY ADVICE PLUS: THE GAMBLING HARM AND ECONOMIC ABUSE PROJECT

Improving Outcomes Fund | GambleAware | September 2025

This case study was produced by New Philanthropy Capital (NPC) as part of an external evaluation of GambleAware's Improving Outcomes Fund.

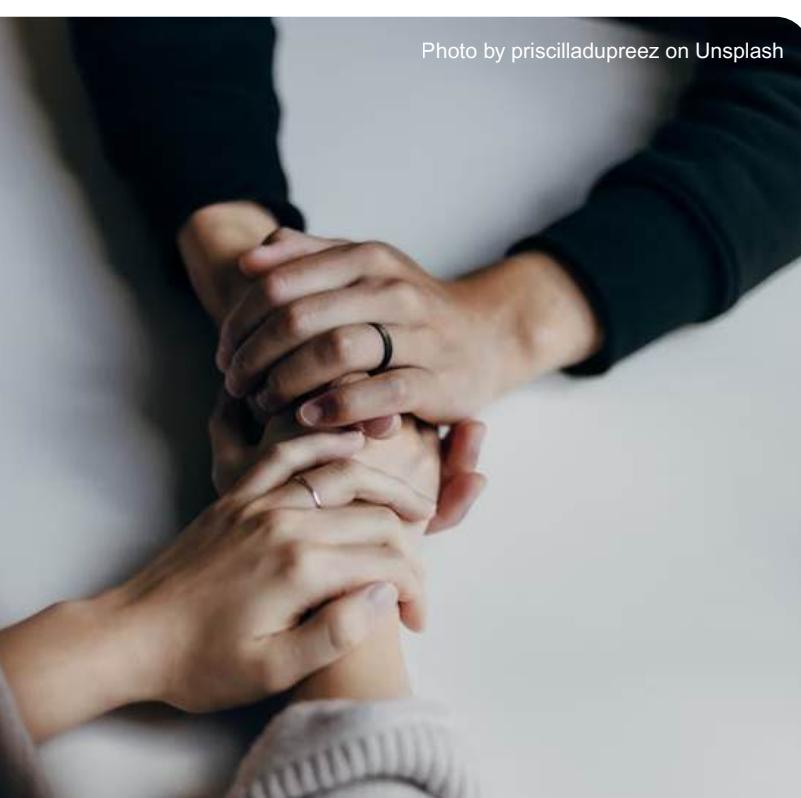
Money Advice Plus (MAP) is a Sussex-based national charity, providing free, confidential money and debt advice, including specialist support for victims of domestic and economic abuse. This case study details the role of MAP in developing a coordinated, gender informed response to the intersection of gambling harm and economic abuse, showing how partnership working in sensitive screening can uncover hidden harms.

What is the project?

MAP delivered the Gambling Harm and Economic Abuse project to provide support to women who are victim-survivors of complex domestic abuse situations and who are experiencing economic abuse through gambling harm. The project acknowledged that gambling harm can come from both the victim-survivor, being the person who gambles, or the person who finds themselves experiencing economic abuse because of another person's gambling.

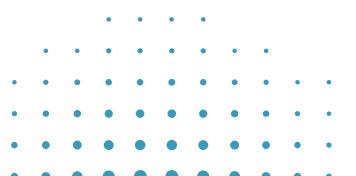
The project was delivered in partnership with RISE (Refuge, Information, Support, and Education) and Breakeven. Its focus was to develop a shared understanding between the organisations and establish a support and referral pathway between organisations that could serve different purposes.

Photo by priscilladupreez on Unsplash



We're three separate organisations that do different things; each has their own expertise and are supporting the same sort of clients at different points in their need

– Project Lead, MAP



Partnerships & Collaboration

The project integrated existing services into a coordinated pathway, rather than building new ones. Each partner employed female-only staff to deliver gender-informed support to women victim-survivors experiencing economic abuse through gambling harm. The three key elements the partnership brought together were:



MAP: debt and economic abuse specialist support for women nationally



RISE: complex need advocacy supporting women locally in Brighton and Hove



Breakeven: counselling and support groups for women experiencing gambling harm

The initial implementation of the project focused on internal setup, staff training, and aligning systems between the three delivery organisations. However, differences in data collection methods, regulation, geography and reach posed challenges. For example, MAP and RISE's respective agility stems from their independence, e.g., their swift transition to using screening tools, while Breakeven, which is tied into a national gambling network, faced more constraints around introducing new screening questions or making amendments to their systems and processes.

Community Engagement and Trust Building

Trust building was central to the project's success, and the delivery teams worked hard to develop the skills to build meaningful relationships with clients. Before this project, MAP had never previously asked clients about gambling harms, so they introduced screening questions to do so. This took some time to adjust to for the delivery team, and a key part of enabling staff to ask clients about gambling harms effectively was to build their confidence through training and support. It was an initially intimidating thing for staff to ask about, but as confidence grew, it became very natural. Additionally, this change in screening for gambling harm was introduced gently, using open-ended questions like, 'Have you ever been impacted by your own or anyone else's gambling?' This approach encouraged disclosure and felt comfortable for staff.



"The initial appointment is probably the most intense, they tell us their story at that point and then we advocate for them, it's almost like an unburdening."

— Project lead, MAP

Co-design and collaboration

The three-way partnership evolved through regular meetings, shared learning and constructive, yet sometimes difficult, conversations. Understandably, three organisations with specific expertise in different areas coming together isn't going to be immediately simple, but with consistent communication and openness, the collaboration became increasingly effective. Holding regular partnership meetings with project leads was key to establishing this consistent communication and openness amongst the three partners – these meetings were a space to collaboratively solve challenges, discuss referrals and importantly maintain enthusiasm and shared values to drive the work.

The project also engaged with external organisations, including Respect and Thrivin' Together who MAP engaged with through being a part of the IOF cohort. MAP hosted a joint away day to explore shared challenges and language use with these organisations. Valuable insights emerged from the conversations, including the differences in language use between the domestic abuse and economic abuse support sectors and the gambling harms support sector, as well as the challenges this difference presents. For example, in the domestic and economic abuse support sector, the terms 'victim survivor' and 'perpetrator' are used very regularly. Yet, when applied to a situation involving gambling harms, this language is less appropriate, and people have been less receptive to these terms. As a result, MAP is developing a lived experience group to inform future training and resources around this intersection.



Photo from <https://www.uok.org.uk/>

Embedding gambling harm support

Staff training, led by Breakeven, helped MAP and RISE to understand the prevalence and impact of gambling harm in situations of domestic and economic abuse. In fact, screening revealed that a third of MAP's clients were affected by gambling harms.



"We started to screen, and it showed that a third of our clients were impacted by gambling harms, which is massive"



– Project lead, MAP

Part of the next steps for the team is to develop training resources for the wider debt, domestic abuse and gambling sectors, as well as materials for victim-survivors themselves. MAP shared that often the women they work with are focused on the specific support need for which they accessed the service, and need space to reflect on and consider further support from another partner. So, having access to physical resources to take away can be incredibly helpful.

Learning for the future

Key learning from MAP's project was the importance of timing in engagement. Clients engage with different services at various times throughout their journey; therefore, support must be flexible and person-centred to meet the needs of individuals receiving support effectively. The project also learnt the importance of language, with terms like 'victim' and 'perpetrator' carrying significant stigma, particularly in the context of gambling harms, which can affect engagement. Therefore, open dialogue is needed to navigate this sensitively.

Overall, the most important learning for MAP was to ask the question. By introducing a screening question about gambling, MAP uncovered a high prevalence of gambling harm that would otherwise have gone unnoticed.

“We were surprised at how casually people would say ‘oh yeah’ and then had a story to tell... if we hadn’t asked, we wouldn’t have heard that.”

— Project lead, MAP

Looking ahead, the team hopes to secure further funding to refine referral pathways, expand training, and ensure that others affected can access support tailored to meet their needs.



Photo by shansonmedia on Unsplash

BEACON COUNSELLING TRUST: EDUCATION, AWARENESS AND INTERVENTION

Improving Outcomes Fund | GambleAware | September 2025

This case study was produced by New Philanthropy Capital (NPC) as part of an external evaluation of GambleAware's Improving Outcomes Fund.

Beacon Counselling Trust is a charity based in the North West of England, which offers free counselling and support for gambling-related harms and suicide bereavement, with services across Merseyside and Greater Manchester. This case study details the Beacon's role in developing a collaborative model of support for women and Muslim communities, integrating gambling harm awareness into broader health and well-being conversations, reducing stigma and building trust.

What is the project?

Beacon's IOF-funded initiative brought together two community organisations, Preston Muslim Forum (PMF) and Raise, to deliver tailored support for two marginalised groups: women affected by gambling harms and members of the Muslim community in the North West. Originally conceived as two separate bids, the project was merged into a single project, developing a cohesive system of support for women and the Muslim community, which respective partner organisations deliver in their own locations.

The project aimed to prevent the escalation of gambling harm through education, awareness and interventions, while also offering culturally sensitive support pathways.



Photo from <https://beaconcounsellingtrust.co.uk/>

Programme design and delivery

Beacon acted as the lead organisation, coordinating delivery while building trust and capacity building with PMF and Raise. Memorandums of Understanding were established to formalise expectations between partner organisations and ensure accountability in terms of measurement frameworks and targets. Key elements of project delivery included:

1

Localised launches: PMF-led community-facing events, framed around general health and wellbeing to reduce stigma and encourage engagement

2

Flexible delivery: Beacon adapted its expectations and KPIs based on partner feedback and the time needed to develop culturally appropriate support and meaningfully build trust with communities

3

Brief interventions: Partners delivered short educational sessions, with PMF integrating gambling harm into broader health conversations.

Photo from <https://beaconcounsellingtrust.co.uk/>

Community Engagement and Trust Building

Building trust was crucial to the project in all aspects, including between partner organisations and amongst target communities. Trust was built through in-person activities and meetings, as well as openness and shared ownership. In terms of building trust between partners, Beacon acknowledged its partners' expertise and cultural knowledge, particularly in navigating sensitive topics such as gambling within Muslim communities.

“We went in, I hope, with a degree of humility... this is your neck of the woods, this is your community, not ours. We know our place.”

– Project Lead, Beacon

PMF tailored outreach approaches to ensure community members were not made to feel alienated or deterred from engaging. For example, instead of directly advertising gambling harm support, they hosted holistic health events and adapted literature to be culturally relevant. Initially, Beacon was concerned that framing conversations around other topics, rather than addressing gambling directly, would miss the point of what the project aimed to achieve. Still, it soon became clear that if the events were presented as gambling harm support explicitly, they would not get people engaging because the stigma around gambling is so high in Muslim communities.

Embedding gambling harm support and co-design

Partners all contributed to co-designing the programme, which focused on culturally sensitive education, awareness, and support around gambling harms. PMF helped shape outreach materials and messaging, while Beacon provided training and resources. Delivery of support was adapted to meet the needs of communities and to ensure support was culturally sensitive, including gender-specific support groups and alternative referral pathways. For example, in some cases, individuals working directly with PMF didn't want to be referred to Beacon for counselling due to cultural barriers. In such instances, PMF provided counselling internally to ensure clients felt comfortable.

Learning for the future

The project surfaced several key learnings:

Trust building takes time: Engagement with marginalised communities requires patience, flexibility and the ability to adapt to ensure approaches are culturally sensitive.



Data collection must be treated carefully: In some cases, cultural mistrust of data sharing and the need for individuals to protect their anonymity limited tracking and collection of outcomes data.



Flexibility is essential: KPIs and delivery models must adapt to real-world conditions such as cultural stigma, legal constraints on data sharing, limited partner capacity, and the merging of two distinct delivery models, requiring ongoing flexibility in KPIs and programme design.



Partnerships require nurturing: through regular contact, clear expectations and mutual respect are vital.



Beacon hopes to continue working with both partners and embed this collaborative model into future commissioning frameworks, building on its success in overcoming cultural barriers, engaging marginalised communities, and delivering impactful, community-led interventions.

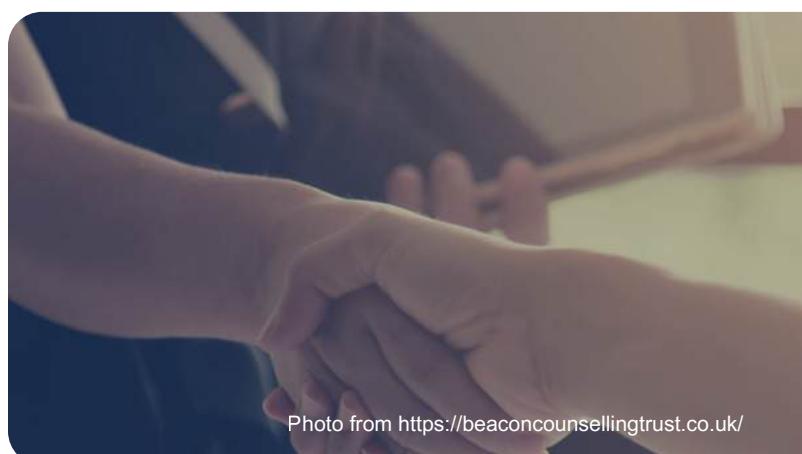


Photo from <https://beaconcounsellingtrust.co.uk/>

THRIVIN' TOGETHER: SUPPORTING WOMEN IMPACTED BY GAMBLING

Improving Outcomes Fund | GambleAware | September 2025

This case study was produced by New Philanthropy Capital (NPC) as part of an external evaluation of GambleAware's Improving Outcomes Fund.

Thrivin' Together (TT) is a UK-wide, women-led organisation providing a safe, online-only space for women impacted by gambling, offering peer support, advice, and opportunities for recovery and empowerment through lived experience. This case study details the role of lived experience, trust-building and a trauma-informed approach to shaping support for women in the UK who are impacted by gambling harm. A trauma-informed approach is essential as many women experience gambling harm alongside financial strain, relationship pressures, shame and anxiety.



Photo by Hannah Busing on Unsplash

What is the project?

TT's 'Together Women' project aims to provide a safe online space for women in the UK to seek out support. With funding from GambleAware's Improving Outcomes Fund (IOF), TT has developed its trauma-informed model through insights gained from lived experiences, reflective practice, and staff training. Staff have completed unconscious bias and safeguarding training, and they applied this learning by redesigning their registration process. Their registration form now asks women what they feel they need help with, rather than prescribing or assuming support, TT staff explained, "We earn the trust by being consistent and by asking people what they want, rather than telling them what there is."



Photo by Melanie Kanzler on Unsplash

Key Activities

Over the past 18 months, Thrivin' Together has delivered:



176 care calls completed

offering women check-ins, space to ask questions or say if they've been struggling.

45 professionals

registered in TT's Professionals network, a quarterly forum co-run with Reframe Coaching, which brings together organisations, including 11 IOF-funded projects, that support women impacted by gambling, to share good practice and strengthen their collective support offer.

106

women registered for support, which is provided through phone calls, WhatsApp groups, and workshops.



18 newsletters

shared with women who have registered with TT, keeping women connected and up to date.

15 Helping Hand e-vouchers

distributed, providing support to address short-term financial hardship e.g. buying essentials or topping up energy meters.



Buy the shoes

A four-session financial capability and confidence programme created in partnership with MyMoneyMinded and women with Lived Experience, was piloted with positive feedback. The programme supports women to explore their beliefs around money, to strengthen budgeting skills and build financial confidence particularly for those who have been impacted by gambling. Following the successful pilot delivery was paused until staff capacity changed. The programme restarted in October 2025 with a new staff lead.

3 WhatsApp Groups set up

supporting peer-led discussions, including a gambling & neurodiversity group in response to demand. The groups provide informal spaces for women to check in, ask questions, share experiences, and offer support. TT staff monitor but allow women to lead, with engagement self-directed and some naturally fostering community and conversation.

1 Specialist Q&A session



delivered for TT members.

Partnerships & Collaboration

Thrivin' Together has developed several key partnerships over the past 18-months, enabled through IOF funding, which expanded TT's reach and impact through cross-sector collaborations:

1

Simon Community Scotland: TT worked with Simon Community Scotland to explore cross-sector recovery models, integrating support for women experiencing gambling harm alongside housing and addiction recovery.

2

Perinatal Mental Health Charity: TT collaborated with a perinatal mental health charity to raise awareness of gambling harms during pregnancy, providing tailored support for women in this vulnerable period.

3

Professional's Network for Women & Gambling: Working in collaboration with Reframe Coaching to co-develop and co-facilitate the Professional's Network for Women & Gambling, continues to grow with representation from all areas of the UK, and has hosted presentations from Ulster University and the Scottish Recovery Consortium on women-specific topics.



Community Engagement and Trust Building

At the heart of Thrivin' Together's work is a strong commitment to trust-building. Key elements of their approach include:

- **Advisory board** including four women with lived experience who provide strategic guidance, shaping the direction of the organisation, co-developing workshops and peer-support groups.
- **A trauma-informed contact process** that gives women complete control over how and when they are contacted. This acknowledges risks such as domestic abuse. In addition to empowering women to engage on their own terms, such as through peer support groups. TT manages moderation and safeguarding challenges through regular reviews in team meetings.
- **Avoiding top-down engagement:** TT does not chase or pressure women to remain active. Instead, it fosters a hands-off yet consistent presence that women can return to when they are ready.
- **Ensuring staff have lived experience** and receive **specialist training** on topics including coercive control, neurodiversity sensitivity, unconscious bias, SEA training etc.



“We’re not in it for the numbers, we’re in it for the women.”

— Staff Member, Thrivin' Together

Key learnings

Over the past 18-months Thrivin' Together has developed insights into what works and what must change in supporting women affected by gambling harm. TT's learning reflects both challenges and successes of trust building through peer-led and trauma-informed engagement. Demonstrating the factors which enable women to re-engage and where the existing system falls short:

1

Voluntary engagement from women is crucial. Earlier in the project, TT enabled other organisations to complete registration forms on behalf of women, which could lead to low levels of engagement. TT adapted this process to include voluntary self-registration, which empowered women to participate at their own pace and on their own schedule. As a member of staff explained: "We want the women to be self-motivated...it's not a referral service, it's a registration to a network and space." Emphasising voluntary engagement, trust and a sense of belonging that are cornerstones to TT's success

2

Consistency builds trust, not over-offering. TT's trauma-informed model avoids overwhelming or chasing women. It shows consistency through peer-support WhatsApp groups and by keeping communication open and responsive, allowing women to engage when ready. This approach reduces pressure and ensures they feel safe to return on their own terms

3

Workshops, while impactful, are labour-intensive. Attendance is unpredictable, and staff have started exploring alternative delivery formats (e.g., leaflets, videos) to offer flexibility and reduce staff burnout.

4

Co-production is desired and valued, but harder to sustain without dedicated resources. TT intends to grow this element more deeply in the coming year.



“

"We're not offering treatment. We're offering connection, safety, and space."

– Staff Member, Thrivin' Together

EPIC RESTART FOUNDATION: REBUILDING POSITIVE LIVES AFTER GAMBLING

Improving Outcomes Fund | GambleAware | September 2025

This case study was produced by New Philanthropy Capital (NPC) as part of an external evaluation of GambleAware's Improving Outcomes Fund.

EPIC Restart Foundation is a UK-wide charity supporting people to rebuild positive lives after gambling harm through recovery coaching, peer support, and awareness programs. This case study details EPIC Restart's project to empower women and minority communities in their recovery journeys, highlighting its lived experience-led approach, strategies for trust-building, and key learnings for future service design.

What is the project?

EPIC Restart's project aimed to empower women and minority communities to build purposeful lives after gambling harm. The project supported women through awareness-raising activities, lived experience involvement, early recovery coaching and overcoming legacy harms. It also worked with minority communities to understand the inequalities and challenges facing these groups in relation to gambling harms, sharing lived experience and recovery insights to destigmatise gambling harm and support those in recovery.



Photo by EPIC Restart Foundation

Programme design and delivery

EPIC Restart is a lived experience-led organisation, and this underpins its approach to supporting people experiencing gambling harms. Its project can be understood in two streams: support for women and support for minority communities.

The project's support for **women** included:



Awareness raising: Amplifying information about recovery pathways through social media, community outreach and online channels.



Practical advice: Guiding women into treatment or other support, providing recovery strategies and information.



Empowering women: One-to-one support, creating safe spaces for women to be heard and connect with others, helping them to move forward into long-term recovery, with increased confidence, self-belief and renewed sense of purpose.

EPIC Restart focused on supporting women after its first year, when only one woman engaged with its services. This individual went on to become a staff member and advocate for support for women experiencing gambling harms, through breaking down stigma and encouraging others to seek help.



“She wanted to really drive the kind of breaking the stigma around women reaching out for help... and that really massively allowed us to then look at how do we create a pilot around supporting women.”

— Head of Programmes, EPIC Restart

Support for **minority communities** included:



Intentional outreach: Recruitment of an outreach manager to explore collaborations and work with minority communities.



Awareness raising: Sharing lived experience, recovery insights to destigmatise gambling harm in minority communities.



Capacity building: Collaborating with minority community representatives to build EPIC's offer to better meet the needs of minority communities on their recovery journeys

Community engagement and trust building

To engage people from ethnic minority communities, EPIC hired a dedicated outreach worker who embedded themselves in local communities in Leeds. Their first three months were spent listening, learning and building trust, “we decided, rather than to helicopter in, we just wanted to learn.”

EPIC Restart's key strategies to building trust and increasing community engagement with ethnic minority communities were:

Attending **community events** like prayer gatherings, fairs and sports days.

Building relationships with **religious activists**, trusted community members who acted as bridges between services and communities.

Hosting a regular slot on a **major Islamic radio station**, to share lived experience stories and raise awareness.



Trust building was slow but essential for this project, and sometimes it took multiple attempts for individuals to actively engage with the service. The key takeaway from EPIC Restart was the importance of simply showing up, consistently engaging with communities, knocking on doors, and delivering support directly to people. Another key learning has been not to be afraid to try things and make mistakes, but to keep trying again. For example, in some cases where the project created materials to put up in community spaces, such as noticeboards, they have been taken down because perhaps they weren't using the correct language, or the messaging didn't resonate with people. EPIC Restart reflected that this showed the mistrust that existed within some communities and reinforced the need to try again in a different way – by asking the communities directly for feedback and as a result adapting language and messaging to be more culturally relevant.

EPIC Restart takes a person-centred approach to everything it does. As such, the project has highlighted the importance of listening to and learning from the people they support, and actively asking them what they need to better support and understand them. The project team have found that taking a person-centred approach can help to reduce power dynamics between people accessing services and the organisation, which contributes to growing trust and building meaningful relationships with people in the communities they support.

“People will reach out to us because they see themselves in us”

– Head of Programmes, EPIC Restart

Lived experience involvement

Lived experience was central to every aspect of the programme, from design to delivery to communications. EPIC Restart is a lived experience-led organisation, meaning staff who deliver support have lived experience and were able to share their own stories with support groups, which resonated deeply. This approach helped to reduce stigma and shame, especially among women.

The project identified that the shame and stigma were very different amongst women compared to groups of men they work with – in some ways, women experience more shame and stigma, but it is also hidden at the same time. For women that EPIC Restart has supported through the project, it has been clear how powerful hearing from other women with lived experience has been for them, helping women realise they are not alone and understand what has happened to them, and that it's okay to share it with others.

The project utilises social media as a key tool to share lived experience stories and engage with people, connecting them to further support. Content created for TikTok is specifically adapted to help women, using appropriate language and ensuring that content is not fear-mongering, but rather acts as a safe space for people to interact with and feel seen.

“When we had someone on the podcast who was a woman with lived experience, and was very real and honest and authentic, every clip we put up was just tenfold more popular than anything else we put up. So, it's really just harnessing that lived experience.”

– Head of Programmes, EPIC Restart

Learning for the future

EPIC Restart's project is rooted in co-design and continuous feedback. They adapted their group activities based on participant input, shifting from high-adrenaline events to more inclusive options, such as therapeutic art and yoga. They also recognised the need for flexibility and adaptability:

Sessions were offered at varied times to accommodate single mothers and working participants

Subtitles were added to online sessions to support neurodiverse participants and those with language barriers

Materials were translated into six languages, and a bank of interpreters was established

Other key learnings included:

- **Diversifying outreach:** previously, EPIC Restart relied on one staff member's social media presence and has since invested in building its own communications capacity, seeing the impact of social media in terms of engaging people.
- **Being patient and persistent:** particularly in minority communities, the project has demonstrated that effective trust building takes time and consistency.
- **Champion lived experience:** EPIC Restart's clear message is that lived experience needs to be throughout and meaningfully embedded across the whole gambling harms support system, because it is the key to successfully supporting people.

Looking ahead, EPIC Restart hopes to establish regional hubs and integrate gambling harm into broader recovery systems.

INVESTING IN PEOPLE AND CULTURE: SUPPORTING REFUGEE AND MIGRANT COMMUNITIES

Improving Outcomes Fund | GambleAware | September 2025

This case study was produced by New Philanthropy Capital (NPC) as part of an external evaluation of GambleAware's Improving Outcomes Fund.

Investing in People and Culture (IPC) is a North East England charity promoting social and economic inclusion for refugees, asylum seekers, and minority communities. This case study illustrates the learning from IPC's role in supporting refugee and migrant communities to address gambling-related harms through partnership-led and culturally tailored approaches.

What is the project?

IPC offers a range of culturally sensitive and linguistically accessible services for ethnically diverse refugee and new migrant communities experiencing gambling-related harms in Tyne and Wear. It delivers a collaborative model through its partnerships with Refugee Community Organisations (RCOs) and community leaders. The project also collaborates with the North-East Council on Addictions (NECA) for expert guidance, awareness raising, treatment and support services. Through IPC's project, the NECA conducted a series of awareness-raising sessions aimed at leaders of RCOs and community champions.

Programme design and delivery

The programme was designed to address gambling-related harms within refugee and migrant communities by leveraging the in-depth cultural knowledge and trust held by RCOs. The delivery model was rooted in partnerships with 10 RCOs from different communities, including Ethiopian, Eritrean, Roma, Czech, and Iranian groups.



The key elements of delivery included:

1

Training and awareness sessions led by NECA are focused on gambling-related harms, culturally sensitive engagement, referral pathways, confidentiality, and empowering community leaders and champions to disseminate information effectively within refugee and migrant communities

2

Dissemination of information about gambling-related harms through culturally appropriate promotional materials.

3

Establishment of a referral pathway with NECA, resulting in 20 individuals receiving one-to-one treatment.

4

Development of peer support groups for specific communities based on participant feedback.

Flexibility and responsiveness to cultural differences were central to the project's success, with promotional and engagement strategies tailored to each community's cultures and preferences.

Partnerships and collaborations

IPC has worked in collaboration with RCOs for over a decade and has applied this partnership model to its IOF project, providing culturally sensitive support services for gambling harms. RCOs are grassroots organisations that maintain trusted and strong relationships with their communities, providing an on-the-ground understanding of IPC's target groups. Combined with its partnership with NECA, IPC's project was able to extend its reach as a small organisation to engage and support people across refugee and asylum seeker communities. Before its partnership with IPC, NECA hadn't received a single referral from refugee and asylum seeker communities in its 50 years of operation. Through establishing a referral pathway between IPC and NECA, the project enabled 20 people to receive one-to-one support for gambling-related harms.



Photo by IPC

Community engagement and trust building

IPC's approach is grounded in listening to communities and responding to their lived experiences, particularly around gambling-related harms. It had already identified a need for gambling harm support, which the communities themselves had expressed. The pre-existing demand for support services for gambling-related harms grounded the project in relevance.

“

“To build trust, your project has to be relevant. If it didn't come from the community and isn't based on what people need, we would just be forcing it onto them, and it wouldn't go well.”

— Project Lead, IPC

IPC was flexible, responsive, and adaptive throughout the project, ensuring that services were tailored to the specific cultural preferences of different groups. For example, when designing promotional materials, adaptations were made in response to feedback from Roma communities that visual and picture-based materials were preferred, whereas written materials were preferred for Eritrean communities.

“We were tailoring our promotion directly to what communities responded well to and listening to the cultural expertise that the RCOs have. This led to a shift in uptake and engagement from these communities because they were being reached in a way that they could respond to. And if you do that, they are not really hard to reach. They are just hardly reached.”

— Project Lead, IPC

A key challenge IPC overcame during the project’s initial stages was that members from specific communities were not comfortable engaging in activities based in NECA offices, in cases where it was far from a community’s local area. Instead, some communities wanted to receive support in IPCs or an RCO’s office, as these were familiar safe spaces. The project adapted by bringing NECA delivery staff to their own trusted office space, which successfully overcame this barrier. However, this wasn’t a one-size-fits-all approach, as for some communities where gambling is a particularly stigmatised issue, members preferred to access support in NECA’s offices because it was far away from their community, thereby avoiding the risk of being seen by people they know.

Trust was identified as a complex and fragile aspect of working with new communities, and it was noted that building trust is challenging and can easily be lost. Issues around trust, often stemming from experiences in home countries or cultural and racial discrimination, required careful management.

Embedding gambling harm support and codesign

RCOs and community members were fully integrated into the project from the outset, and all services and activities were co-designed in collaboration with them. This enabled key learning for IPC, including making key distinctions between communities such as new and emerging migrant communities and well-established migrant communities. Newcomers faced unique challenges related to language, recent trauma, and different attitudes towards trusting institutions like the police. The project demonstrated cultural sensitivity by adapting services; for example, it recognised that peer support groups were not equally suitable for all communities.

Gambling harm support was also embedded through centring lived experience and community feedback. The project responded to existing community-led efforts to address gambling harms and used feedback loops to adapt services, such as replacing online translation tools with in-person interpreters. By embedding a feedback-based approach, the project was able to continually improve and establish a sense of community ownership for the work being delivered. The project highlighted the importance of tailoring interventions to specific cultural needs and contexts, rather than treating all ethnic minority groups as homogenous.

“Listen to those who have lived experience, they are the ones who will lead you to do a good job, so that you actually support them”



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