

Scottish Gambling Education Hub Evaluation Final Report

Prepared for GambleAware by IFF Research

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Acknowledgement

GambleAware is a wholly independent charity and has a framework agreement with the Gambling Commission to deliver the National Strategy to Reduce Gambling Harms within the context of arrangements based on voluntary donations from the gambling industry.

GambleAware commissions research and evaluation to build knowledge of what works in prevention and reduction of gambling harms that is independent of industry, government, and the regulator.

IFF Research alone are responsible for the views expressed in this report, which do not necessarily represent the views, decisions, or policies of the institutions with which they are affiliated.

IFF Research would like to thank Fast Forward for their support throughout the evaluation.

Glossary

Term/phrase	Definition
Hub	“Hub” refers to the Scottish Gambling Education Hub which is a gambling education programme aimed at professionals and volunteers who work with young people and families, and at young people, parents, and carers themselves.
CAMHS	“CAMHS” or Child and Adolescent Mental Health Services are services that assess and treat young people with emotional, behavioral or mental health difficulties.
CPD training	“CPD” or Continuing Professional Development training refers to one of the Hub’s core activities which provides free training sessions on youth gambling and gambling harms to practitioners who engage with young people.
Toolkit	“Toolkit” or the Gambling Education Toolkit refers to one of the Hub’s core activities which provides information and resources to practitioners to support them with addressing the topic of youth gambling and problem gambling.
SGEN	“SGEN” or the Scottish Gambling Education Network refers to another one of the Hub’s activities which brings together practitioners and organisations from a variety of education and health settings across Scotland, with the aim to share best practices, provide support and help establish, sustain and expand local gambling education projects.
RCA Trust	“RCA Trust”, formerly known as the Renfrew Council on Alcohol, provides community-based alcohol and gambling related prevention and treatment services in Scotland, and is in partnership with the Hub to ensure a strong safeguarding infrastructure in the event the Hub or the people it supports identifies people who may need clinical treatment for gambling harms.
GambleAware	GambleAware is an independent, grant-making charity commissioning prevention and treatment services across England, Scotland and Wales in partnership with expert organisations and agencies, including the NHS.
Fast Forward	Fast Forward is Scotland’s national youthwork organisation specialising in risk-taking behaviours, prevention and early-interventions.

1 Executive summary

Introduction

The Scottish Gambling Education Hub (“the Hub”) was launched by Fast Forward, Scotland’s national youthwork organisation, in November 2018, supported by funding from GambleAware. The Hub is a preventative and educational programme addressing youth gambling and gambling harms. The Hub offers free training, consultancy and resources to organisations working with children, young people and families. Its programme of work includes seven activities, summarised in Figure 1.1.

Figure 1.1 The Hub’s activities



In June 2020, GambleAware commissioned IFF Research to conduct a process and outcome evaluation of the Hub. The purpose of the evaluation was to assess the effectiveness and early outcomes of the Hub and to inform GambleAware’s future commissioning decisions for a Hub approach in England and Wales. The evaluation aimed to:

- Provide formative and summative feedback on the implementation of the Hub and its seven activities (process evaluation)
- Explore the added value of the Hub (outcome evaluation)
- Provide proportionate and relevant recommendations on delivering the Hub to support both achieving its outcomes and evidencing its impact

The evaluation design involved a scoping stage, needs assessment, post-training and follow-up surveys with practitioners, and post-training and follow-up surveys with young people, depth interviews with stakeholders and practitioners and analysis of administrative and performance information.

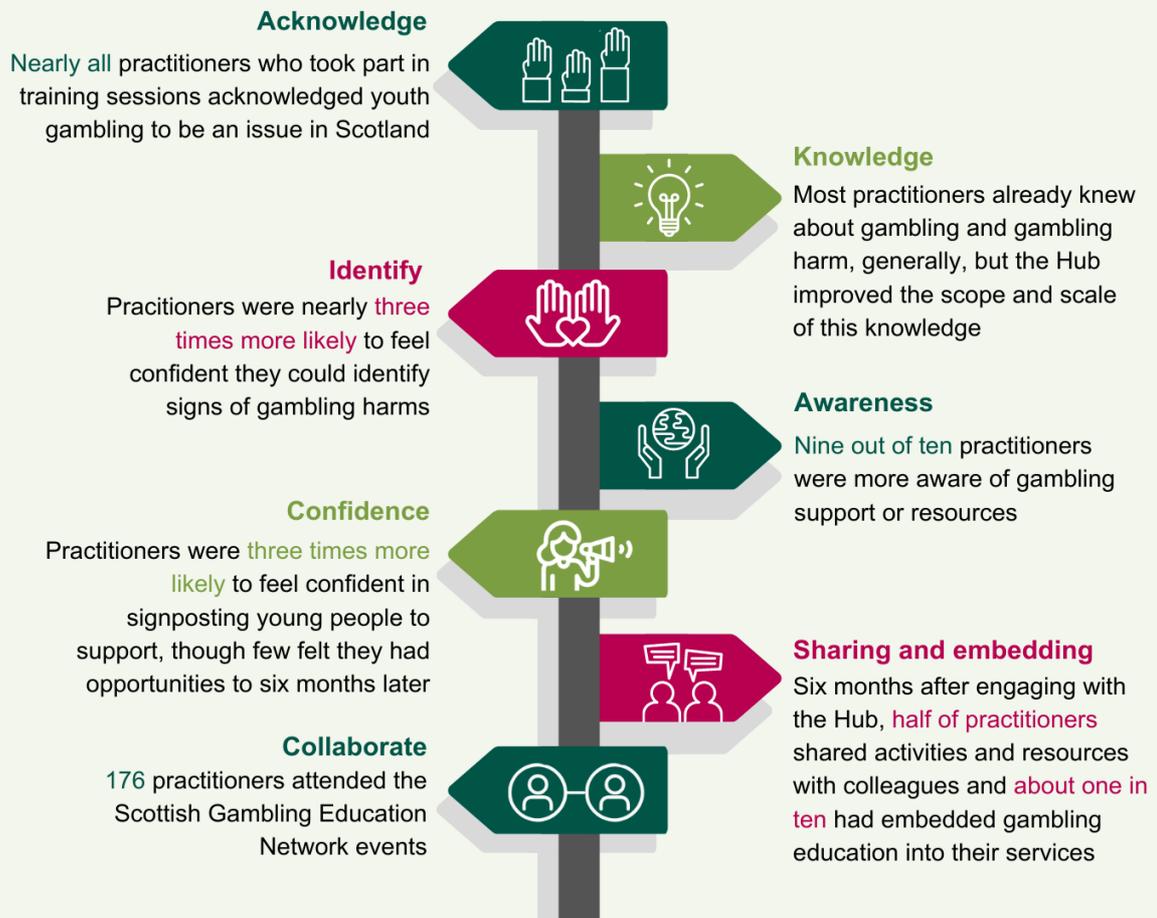
The figure overleaf summarises the main findings for the evaluation. This is discussed in more detail below.

Figure 1.2 Key findings infographic

Scottish Gambling Education Hub Evaluation

375 training sessions delivered, reaching 2,938 practitioners	1,753 newsletter subscribers and 8 Network events delivered
5,000 Toolkit downloads	100 theatre performances delivered, reaching 15,853 young people
8 social media campaigns	13 Youth Fund grants awarded

Practitioner outcomes



Young people outcomes



GambleAware

fast forward

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The delivery of Hub resources and activities

The Hub's offer involves seven core resources and activities: Continuing Professional Development (CPD) training sessions; The Gambling Education Toolkit; Peer-based theatre performances; The Scottish Gambling Education Network (SGEN); Policy guidance; Support with online gambling harm messages for further and higher education institutions; and The Gambling Education Youth Fund (previously the Small Action Fund).

The COVID-19 pandemic greatly impacted the Hub's plan for these resources and activities due to restrictions on face-to-face interactions with practitioners and disruption to practitioner services. However, despite challenging conditions, the Hub delivered all its intended activities and, in many cases, performed well in relation to the targets set at the point of the Hub's inception.

By November 2021, the Hub had met or exceeded targets for delivering Continuing Professional Development (CPD) training sessions and reached its intended audience through the Gambling Education Toolkit. The Hub also achieved targets set for theatrical performances and SGEN events. The Hub fell short of some targets. Specifically, those that related to social media campaigns implemented by further and higher education institutions and the Gambling Education Youth Fund. There was no target for policy guidance provision.

Outcomes for practitioners

The Hub improved practitioner awareness of the relevance of youth gambling education to their role; knowledge of and ability to recognise youth gambling risks in the people they support; their awareness of available support services and their confidence in signposting young people to support.

The Hub's activities also enabled practitioners to identify better the signs of gambling harms and helped increase practitioner confidence in signposting the people they support to gambling support services. For both outcomes, there was a threefold increase in the number of practitioners agreeing that they were equipped with the knowledge and skills to perform these competencies in practice following the delivery of CPD training sessions.

Evidence for the achievement of the Hub's mid-term outcomes for practitioners was more limited. Although practitioners reported an improvement in their awareness of available support and their confidence to signpost young people to such support, for many this has not been translated into practice. Practitioners typically attributed this to not yet encountering young people in need of signposting.

The evaluation captured evidence of practitioners sharing and using the gambling education and prevention activities acquired from the Hub, but there was limited evidence of youth gambling education embedded into their work. This was often because of challenges faced by practitioners, namely other issues being prioritised over gambling education, time constraints and COVID-19 restrictions.

An expected mid-term outcome for practitioners was the facilitation of collaborative work to embed gambling education in policy. This outcome is evidenced by the performance of the Scottish Gambling Education Network (SGEN) and Fast Forward's wider work to bring together cross-sector stakeholders and services to enable them to collaborate on topics related to gambling education. Although the performance of the SGEN and Fast Forward's contribution to other events provides evidence of youth services working together on gambling education policy, findings from surveys and qualitative interviews with practitioners suggest that there is room for greater collaboration.

Outcomes for young people

There is evidence to suggest that, through practitioner engagement with activities and resources, there has been improvement in the number of young people understanding and acknowledging gambling risks and being aware of available support. There was, however, less evidence of their improved ability to critically assess risk and make more informed decisions around gambling. The reasons for this are threefold: incidence of gambling harm among young people is relatively low, meaning there is less opportunity in their day-to-day work for a practitioner to encounter a young person in need; the different types of practitioners engaging with the Hub, including managers with less direct contact with young people; and social distancing measures due to the pandemic. Limited interaction with young people reduced the opportunities to critically assess risk, and thus limited evidence of how young people have benefited from the Hub. Regardless of the pandemic, practitioners felt that the benefits for young people are likely to take time to cascade from practitioners to young people.

Implications

What changes should Fast Forward consider making to the Hub model to improve practitioner and young people outcomes?

The evaluation findings highlight features of the model necessary for achieving practitioner and young people outcomes. These relate to the scope, content, delivery and engagement with the Hub's activities and resources.

Scope

The Hub's offer currently involves seven core resources and activities. The evaluation has identified CPD training sessions and the Gambling Education Toolkit as the two which carry the most value to practitioners, acting effectively as hooks to engage different practitioner groups and enablers to bring about positive outcomes for practitioners and young people. Once practitioners engage with CPD training sessions or the Gambling Education Toolkit, they are more likely to engage with other features of the Hub.

The Scottish Gambling Education Network (SGEN) is also an important feature of the Hub, but for slightly different reasons. The Network helps to raise the visibility and credibility of the Hub and, in turn, draws practitioners to the other Hub activities. The Network also plays a role in facilitating the mid-term outcome of youth services working together on gambling education policy.

Two Hub components had low take-up and despite this the Hub still achieved most of its intended outcomes: The Gambling Education Youth Fund (previously the Small Action Fund) and support with online gambling harm messages for further and higher education institutions.

Content

The content of the Hub's activities and resources was highly commended by stakeholders, practitioners, and young people throughout the evaluation. The topics included in Hub outputs and the pitch and tone was felt to be important in making gambling education accessible and relatable. This signifies that Fast Forward's work in continually developing outputs that reflect the current landscape regarding relevant themes, language and research, including the incorporation of lived experience, has been successful.

The Hub's activities and resources should therefore largely stay on the same path in terms of content; keeping the pitch and tone consistent and remaining adaptable to changes in the gambling

landscape. However, the Hub's activities and resources were tailored towards professional practitioners. To maximise the impact of these outputs it is recommended that the Hub focusses on delivering resources and activities that better meet the needs of non-professionals involved in the lives of young people, for example, parents and carers.

Fast Forward should revisit the use of the term "brief interventions" in the Hub's content. Given this term refers to a specific type of intervention in health settings, some practitioners were unfamiliar with this term and found it confusing. Limiting its use outside of the health sector, where it was coined and is more commonly understood, and instead using a less specialist term may be more inclusive to the range of audiences the Hub works with.

Delivery

The Hub's activities and resources were intended to be delivered fully in-person. However, when faced with the COVID-19 pandemic and its associated restrictions, many activities transitioned from face-to-face events to digital events. Specifically, CPD training sessions, SGEN meetings and theatrical performances.

We recommend Fast Forward retains a hybrid delivery model to leverage the strengths of both modes and help to maximise the number and diversity of practitioners engaging with the Hub. Digital channels carry the advantage of removing travel time and associated costs, while in-person channels carry the advantage of greater participation and collaboration.

Based on the qualitative research, there were mixed views on device accessibility for Hub resources, with practitioners specifically interested in the Toolkit being mobile-phone compatible. The evaluation team noted this in the interim evaluation report. In response, Fast Forward reviewed the Toolkit's accessibility and conducted a comprehensive review of its overall useability, look, and feel: this redesign was underway at the time of reporting. Given the increased move of services to online delivery during the pandemic, we recommend new resources launched by English and Welsh Hubs have multi-device accessibility. We recommend downloadable resources have offline accessibility.

A key feature of the Hub model is its adaptability and on-going innovation in the face of changing circumstances and needs. That agility is supported by the terms of Fast Forward's grant agreement with GambleAware and the collaborative spirit of that working relationship, and the team involved in delivering the Hub. The team includes people with lived experience of gambling and gambling harm and youth trainers who bring knowledge of existing evidence and good practice around harm reduction, substance misuse among young people, and relationships with support organisations.

Engagement

The topics the Hub features in its activities and resources resonated well with practitioner's needs. Yet often practitioners were less aware of the Hub's full suite of activities and resources, beyond the CPD training sessions and the Gambling Education Toolkit. We recommend Fast Forward builds on its successes engaging practitioners and develop the way it communicates its fuller offer to practitioners who have engaged with one or more of its offerings.

The evaluation identified opportunities for the Hub to better engage specific audiences in its resources, including:

- Engage non-professional audiences, like parents and carers, who are involved in the lives of young people and thus also likely to support young people's knowledge of gambling and gambling harms. For example, this may be through helping professionals who work with parents and carers to include gambling education in their policies, and supporting the

professionals who work with parents and carers to be aware of gambling and gambling harms among young people, like through their staff induction;

- Engage with policy stakeholders more through personal stories, referencing local area and schools, and reducing harm and cost savings; and
- Engage communication teams in universities alongside other contacts since these are the teams that will ultimately lead on any gambling education social media campaigns.

How can monitoring and evaluation of the Hub be improved?

The nature of the Hub's preventative and multi-faceted design bring with it inevitable challenges regarding the monitoring and evaluation of its work, particularly due to the absence of population-wide benchmarks of existing levels of gambling and gambling harms amongst young people. However, there are some considerations for improving how the Hub monitors and evaluates its work.

Understanding the effect of the Hub on young people

We recommend future research to explore whether and how the Hub's seven activities directly and indirectly impact young people, capturing young people's experiences first-hand. This could be focussed on the theatrical performances, Youth Education Fund and social media messages; all Hub activities directly involving young people that this evaluation was unable to go into more detail on. These all have high potential for impact, and of transferability to other contexts.

Focus and prioritise outcomes

We recommend Fast Forward continues to tie their ongoing monitoring and evaluation work back to the programme Logic Model; this is a good way to make sure it is not spending time collecting information it does not need, or that is not as good as other intelligence at explaining the Hub's impact journey. Practically, this means ensuring there are KPIs attached to all activities and outcomes in the Logic Model. For example, adding one for the Hub's advice and advocacy work. This way the KPIs will be specific and clear, and Fast Forward will know what targets have been achieved, are on track to be achieved or may fall short of achieving. There is also room to introduce new outcomes. For example, one of the activities of the Hub is the provision of advice and advocacy to organisations and individuals. At present there is not a corresponding outcome for this activity and so it is not possible to monitor and evaluate progress in this regard.

Maintain focussed and pragmatic evaluation tools

In early 2021, IFF Research helped Fast Forward to refine the evaluation mechanisms in place, condensing around 30 surveys into six surveys with a greater emphasis on outcomes. It is recommended that Fast Forward maintain streamlined evaluation mechanisms and avoid the introduction of additional surveys where possible. A small set of evaluation tools helps to provide continuity in data collection, which facilitates an improved ability to monitor and evaluate the Hub over time.

There is potentially room to take the streamlining of evaluation mechanisms further. The longitudinal approach to surveys (e.g., Needs Assessment, Post-training, and Follow-up) is still advocated. However, the existing suite of practitioner surveys could perhaps be boiled down into one universal strand. For example, removing the gaming and gambling specific surveys and incorporating the activity into the more general CPD training survey. One universal strand of surveys would provide a more robust base size for analysis and would likely reduce burden for participants and Fast Forward.

Maximising young people responses

To maximise the engagement of young people with evaluation surveys it is recommended that Fast Forward look to introduce incentives. Incentives can take many forms, but from experience we recommend gift vouchers.

Fast Forward should also consider opportunities for the 'gamification' of the evaluation mechanisms aimed at young people. Possible ways of achieving this include the introduction of more interactive tasks (e.g., drag and drop activities and sliding scales), more visual elements (e.g., pictures and videos), participant rewards (e.g., points and achievements upon completion) and repackaging surveys as quizzes.

2 Introduction

Programme context

Gambling behaviour, including youth gambling, has become a subject of public health and policy interest in the UK in recent years. Academics, policy makers and practitioners are beginning to recognise the act of gambling carries the potential to bring about adverse impacts on the health and wellbeing of individuals who gamble, as well as their families, communities, and society.¹

While traditionally seen to be an adult activity, gambling is also a common risk-taking behaviour amongst young people. The Gambling Commission's Young People and Gambling Survey, conducted in 2019, found that 48% of 11 to 16-year-olds in Great Britain had participated in gambling at some point in their lives and 36% had spent their money on gambling in the past 12 months. Furthermore, 2.7% of young people aged between 11 and 16 years old are defined as 'at risk gamblers' and 1.7% are defined as 'problem gamblers'.²

Overview of the Scottish Gambling Education Hub

Fast Forward is a registered charity in Scotland that has been working to enable young people to make informed choices about their wellbeing and to live healthier lifestyles, including gambling education.³

Following a successful pilot, in November 2018 the Scottish Gambling Education Hub ("the Hub") was created by Fast Forward in partnership with GambleAware. GambleAware is an independent charity that commissions prevention and treatment services in partnership with expert organisations and agencies across England, Scotland and Wales.⁴

The Hub is a gambling education programme aimed at professionals and volunteers who work with young people and families, and at young people, parents, and carers themselves. It aims to facilitate a cross-sector gambling education system, triggering community engagement with youth gambling issues. It also seeks to create a practitioner network that educates others on how to identify harmful gambling behaviors in young people, and how to respond early by signposting to available support. Its scope does not include treatment, but the Hub receives clinical input from the RCA Trust and will signpost to the service where appropriate.

The Hub built on Fast Forward's existing tools and gambling education training to increase the reach of gambling education to a selection of targeted audiences (primarily professionals and volunteers working with children, young people and families), and also delivers gambling education workshops direct to young people. The Hub focuses its work on practitioners working in five sectors: training and employability services; informal education and youth work; formal education; further and higher education; and services supporting parents and carers. The Hub's offer involves seven core resources and activities:

- **Continuing Professional Development (CPD) training sessions:** The Hub provides free training sessions on youth gambling and gambling harms to practitioners who engage with

¹ [UK Gambling Commission, 2020. Problem gambling vs gambling-related harms](#)

² [UK Gambling Commission, 2019. Young people and gambling survey 2019: A research study among 11–16 year olds in Great Britain](#)

³ www.fastforward.org.uk

⁴ www.begambleaware.org

young people under the age of 25 and/or with parents and carers, across a variety of health and education settings. This includes a bespoke session about gaming and gambling.

- **The Gambling Education Toolkit:** The Toolkit is designed for practitioners who work with young people and families, in health and education settings. It provides information and resources to support them with addressing the topic of youth gambling and problem gambling. The Toolkit includes a variety of activities that make it adaptable and suitable for a diverse range of settings, ages, objectives, skills and competences.
- **Peer-based theatre performances:** The Hub offers theatrical performances to secondary school pupils about the impact that gambling and other risk-taking behaviours can have on young people and their family and friends. Originally this was in-person. In response to the pandemic, in autumn 2020 Fast Forward commissioned a film of the theatrical performance, adapting the original script into a screenplay and hiring a cast and production team to translate the live performance into a short film for schools to play to young people. The film was launched with its own website and a set of action packs in May 2021.
- **The Scottish Gambling Education Network (SGEN):** A professional network that brings together practitioners and organisations from a variety of education and health settings across Scotland, with the aim to share best practices, provide support and help establish, sustain and expand local gambling education projects. It involves quarterly meetings and monthly newsletter updates.
- **Policy guidance:** The Hub offers tailored consultation, resources and policy guidance to professionals, practitioners and organisations.
- **Support with online gambling harm messages for further and higher education institutions:** The Hub offers support for colleges and universities to develop and include informative gambling harms messages online.
- **The Gambling Education Youth Fund (previously the Small Action Fund):** The Youth Fund provides an opportunity for community youth groups to apply for up to £1,000 to create, develop and complete their own local project increasing the awareness and understanding of gambling related issues.

Evaluation objectives and questions

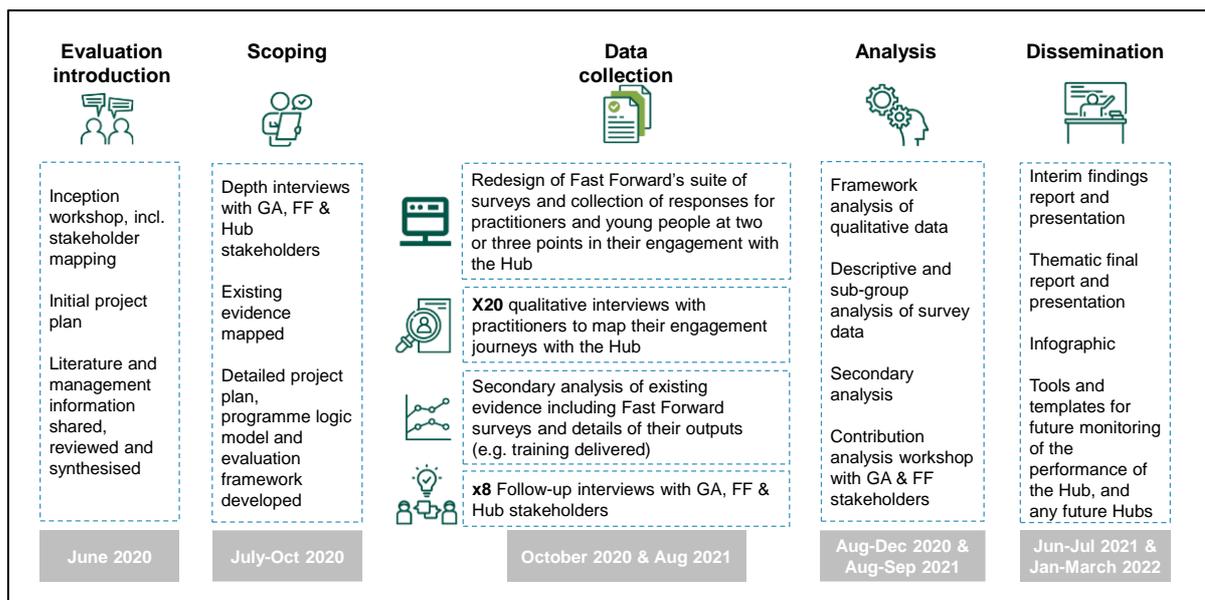
In June 2020, GambleAware commissioned IFF Research to conduct a process and outcome evaluation of the Hub. The purpose of the evaluation was to assess the effectiveness and early outcomes of the Hub and to inform GambleAware's future commissioning decisions for a Hub approach in England and Wales. The evaluation aimed to:

1. Provide formative and summative feedback on the implementation of the Hub and its seven activities (process evaluation)
2. Explore the added value of the Hub (outcome evaluation)
3. Provide proportionate and relevant recommendations on delivering the Hub to support both achieving its outcomes and evidencing its impact

Evaluation approach

The evaluation design involved a scoping stage followed by surveys with practitioners and young people, depth interviews with stakeholders and practitioners and analysis of performance management information. Figure 2.1 summarises the evaluation approach.

Figure 2.1 Evaluation approach



Scoping

During the scoping stage, the evaluation team:

- Conducted 10 interviews with key stakeholders** involved in the design, delivery and use of the Hub to understand the context, the Hub's rationale, assumptions and its associated activities, available evidence that the evaluation may use to answer the objectives, and to gain stakeholder feedback on evaluation objectives. This included Fast Forward staff, delivery partners and stakeholders from GambleAware and other interested parties. See Appendix B for full sample details.
- Reviewed and synthesised 19 strategic and delivery programme documents** to inform the service Logic Model and research material design. This included a proposal, three progress updates, three evaluation reports, nine Hub beneficiary survey data reports, an evaluation design plan, an application for the Youth Fund (previously Small Action Fund) and an infographic about Trust Me theatre performances.
- Reviewed existing data to assess the Hub's implementation and impact**, with a focus on whether and how they could be used to answer the evaluation objectives. This included reviewing Fast Forward's existing suite of 43 practitioner and young people survey questionnaires across eight categories: Youth Employability Group surveys; SGEN Quarterly Meeting Feedback surveys and reports; school surveys; parents and carers surveys; informal education surveys; further education surveys; and peer-based theatre performance surveys.
- Updated the programme Logic Model** to accurately depict the aims, processes, assumptions, outcomes and impacts (intended and unintended) for the Hub and its activities.

An outcome of the scoping stage was recognising the need to revise the evaluation approach. To ensure that GambleAware and Fast Forward were equipped with the tools they needed to monitor the effect of the Hub on practitioners and young people, and to better understand how practitioners are embedding gambling education in their work, IFF Research revised the surveys to produce seven

new surveys. The surveys were used with practitioners who participated in CPD training sessions and young people who took part in a gambling education workshop since November 2020.

Quantitative surveys with practitioners and young people

To monitor and measure the impact of the Hub's activities, Fast Forward administered seven online quantitative surveys via SurveyMonkey. These surveys include:

- **The Practitioner Gambling Needs Assessment:** Completed by practitioners prior to attending CPD training sessions. The survey covers motivations for attending training, knowledge of gambling and gambling harms, confidence in identifying gambling harms and confidence in signposting to support.
- **The Practitioner Gambling Post Training Survey:** Completed by practitioners immediately after attending CPD training sessions. The survey covers the same topics as the needs assessment (to allow for changes over time to be measured), and questions on plans for how the content of training will be used in practice and their experience of the training session.
- **The Practitioner Gambling 6-Month Follow-Up Survey:** Completed by practitioners six months after attending CPD training sessions. The survey covers the same topics as the needs assessment and the post training survey (to allow for changes over time to be measured), and questions on the experience of using the content of training in practice.
- **The Practitioner Gaming Needs Assessment:** Completed by practitioners prior to attending CPD training sessions focused on gaming and gambling. The survey covers motivations for attending training, knowledge of gambling features in games, knowledge of gambling harms, confidence in identifying gambling harms and confidence in signposting to support.
- **The Practitioner Gaming Post Training Survey:** Completed by practitioners immediately after attending CPD training sessions focused on gaming and gambling. The survey covers the same topics as the needs assessment (to allow for changes over time to be measured), and questions on plans for how the content of training will be used in practice and the experience of the training session.
- **The Young People Post Workshop Survey:** Completed by young people on employability programmes immediately after attending a workshop. The survey covers knowledge of gambling and gambling harms and awareness of available support.
- **The Young People 3-Month Follow-Up Survey:** Completed by young people on employability programmes three months after attending a workshop. The survey covers the same topics as the needs assessment (to allow for changes over time to be measured), and questions on actions taken since the workshop.

Data collected from these surveys between November 2020 and July 2021 was analysed by IFF Research to provide insight into the outcomes of the Hub's training sessions and workshops, specifically in terms of their knowledge of gambling and gambling harms, their awareness of available support and actions taken in terms of gambling and gambling education following their engagement with the Hub. This was achieved by tracking survey responses over time. For example, by comparing responses to a question in the Practitioner Gambling Needs Assessment to the same question in the Practitioner Gambling Post Training Survey. Appendix C of this report presents the number of responses for each survey that were available for analysis.

The achieved data sets from practitioner surveys included several types of practitioners, both in terms of organisations they worked for and job role. Table 2.1 presents the profile of practitioners that participated in each survey by the type of organisation they work for.

Table 2.1 Practitioner survey completes by organisation type

	The Practitioner Gambling Needs Assessment	The Practitioner Gambling Post Training Survey	The Practitioner Gambling 6-Month Follow-Up Survey	The Practitioner Gaming Needs Assessment	The Practitioner Gaming Post Training Survey
Provides support to children and young people	91	88	33	26	31
Higher and Further Education Institutions	78	55	18	10	11
Provides social care to children and young people	52	45	24	13	4
Youth employment services	37	50	18	8	9
Health and wellbeing organisation	35	30	6	11	7
Primary or secondary school	28	25	12	4	4
Provides support to parents and carers	18	14	0	0	13
Youth justice and criminal justice organisations	21	14	1	5	6
Other	17	28	15	7	6

Qualitative interviews with stakeholders and practitioners

Practitioners

Between April and May 2021, 20 qualitative depth interviews were conducted with practitioners that had attended Hub training sessions and engaged with other Hub resources. Participants represented a range of settings, including formal and informal education, organisations that support parents and carers and youth employability services, and worked in different regions of Scotland. Appendix A details the achieved qualitative sample.

The interviews with practitioners covered a range of topics, including how they became aware of the Hub, their motivations for engaging with the Hub, the activities they had engaged with, their experience of these activities and their perceptions of the Hub's impact on them, the organisation they work for and the young people they work with. Interviews lasted up to 60 minutes.

Stakeholders

Between September and October 2021, qualitative follow-up interviews were conducted with eight stakeholders that participated in the scoping stage. These individuals were involved in the design, delivery and use of the Hub's activities since the Hub's inception. Appendix B details the achieved qualitative sample.

The interviews covered a range of topics, including their motivations for engaging with the Hub, their experience of Hub activities, the perceived impact of the Hub on practitioners and young people and views on the transferability of the Hub. Interviews lasted up to 60 minutes.

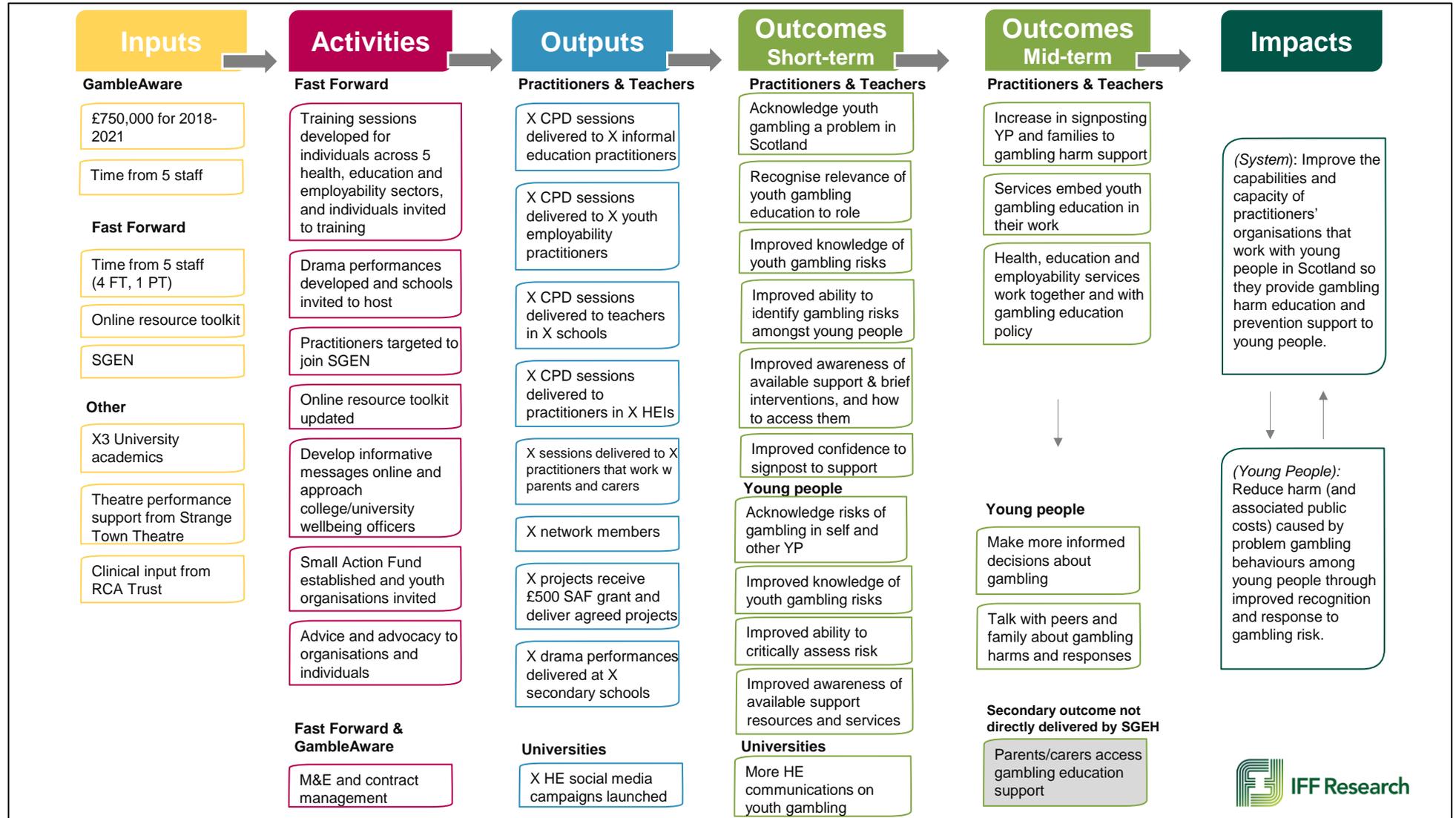
Analysis of Fast Forward management information

In addition to conducting primary research with practitioners and stakeholders, the evaluation team also analysed management information collected by Fast Forward over the first three years of the Hub's operation. This data covered a variety of metrics, including the number of practitioner training sessions held, the number of practitioners attending training sessions, the number of theatrical performances delivered, the number of young people seeing theatrical performances, the number of newsletter subscribers, the number of SGEN events held and the number of Gambling Education Youth Fund applications.

The Hub Logic Model

To ensure the evaluation measured the right things in the right way, we developed a Logic Model for the Hub. The aim of the Logic Model was to provide a simplification of the relationship between the delivery of the Hub and the assumptions that underpin its operation, the resources committed and the expected results on practitioners, and young people. This built on an existing model developed by Fast Forward and was designed in collaboration with GambleAware and Fast Forward. Figure 2.2 presents the Logic Model followed by a summary of each element within it.

Figure 2.2 Scottish Gambling Education Hub Logic Model





Context and rationale

The Hub is a gambling education programme aimed at professionals and volunteers who work with young people and families, and at young people, parents, and carers themselves. It aims to facilitate a cross-sector gambling education system, triggering community engagement with youth gambling issues. The evaluation aimed to assess the effectiveness and early outcomes of the Hub.

Assumptions

The process of developing the Logic Model helped to identify some key assumptions that show why we think one outcome will lead to another and to help the evaluation understand the causal processes involved in Hub delivery. Understanding the assumptions underpinning the programme logic also helps the evaluator to understand why an outcome may not have been achieved. The following are the programme assumptions that underpin the Logic Model:

Figure 2.3 Scottish Gambling Education Hub Logic Model: assumptions



Inputs

The inputs column on the left-hand side of the Logic Model essentially expresses the resources – funding and stakeholders – that have been committed to the delivery of the Hub and are expected to deliver key activities necessary for bringing about outcomes and impacts.

GambleAware commissioned Fast Forward in October 2018 to deliver the Hub and run it over a three-year period with a total project funding of £750,000. The aim was for the Hub to run across all 32 Scottish local authority areas divided into 12 regional clusters. Together with the investment and time from GambleAware and Fast Forward staff, a suite of early intervention and prevention activities and resources were planned, to reduce gambling harms among young people.

Other stakeholder audiences were involved in the design and delivery of the Hub. Three University academics who are specialists in gambling education were used as a source of expertise when developing the Hub resources to ensure it was based on best practise and most up to date guidance. Strange Town is a theatre group that offers opportunities in the performing arts to young people aged 5 to 25 in Edinburgh. The group was essential for the delivery of one of the Hub’s core activities which involved drama-based activities delivered across secondary schools. Finally, the RCA Trust, formerly known as the Renfrew Council on Alcohol, provides community-based alcohol and gambling related prevention and treatment services in Scotland, and is in partnership with the Hub to

ensure the Hub has strong safeguarding infrastructure if the Hub or the people it supports identifies people who may need clinical treatment for gambling harms.

Activities

The activities column summarises how the Hub expects to use the resources invested in the programme to enable the intended outcomes and impacts to come about. These include both already implemented activities and intended activities which were impacted by COVID-19 pandemic. Figure 2.4 presents the seven activities of the Hub.

Figure 2.4 The Hub's activities



As part of the Hub activities, Fast Forward also has in place infrastructure to monitor and evaluate what is being delivered in line with the targets agreed on at the contract stage. This monitoring takes place in the form of quarterly reports and contract monitoring meetings with GambleAware to ensure good governance with respect to the inputs and the outcomes the Hub is working towards.

Outputs

Outputs are the immediate results expected from the seven activities carried out by Hub staff and trainers. The Logic Model assumes the activities are the pre-condition for the outputs, so if an output (and related outcome) is not achieved then we may first look to whether the intended activities were implemented as intended.

Taking the short-term outcomes of practitioners having an improved knowledge of gambling risks, we can see the related activities and outputs in the Logic Model the Hub expects will lead to this outcome. The uptake of Hub activities by practitioners across different sectors (e.g., CPD training sessions, the Toolkit etc.) will translate into improved awareness and understanding of youth gambling risks.

Outcomes

Short-term outcomes

Short-term outcomes are the changes to the knowledge, attitudes and behaviours of practitioners and young people because of outputs and are expected to emerge within a few weeks of engaging with Hub activities and resources.

CPD training sessions taking place with practitioners and teachers, and/or practitioners accessing the online resource Toolkit and engaging with the Scottish Gambling Education Network, are expected to lead to six short-term intended outcomes related to practitioners' knowledge and attitudes:

- Acknowledge youth gambling is a problem in Scotland
- Recognise the relevance of youth gambling education to their role
- Improved knowledge of youth gambling risks
- Improved ability to identify gambling risks amongst young people
- Improved awareness of available support and brief interventions, and how to access them
- Improved confidence to signpost to support

The Gambling Education Youth Fund grants secured by youth groups, theatre performances delivered, and harm reduction workshops delivered to young people on youth employability programmes, are expected to lead to four outcomes related to young people's knowledge and attitudes:

- Acknowledge risks of gambling in self and other young people
- Improved knowledge of youth gambling risks
- Improved ability to critically assess risk
- Improved awareness of available support resources and services

Important for the successful delivery of the Hub is the interplay between practitioner and young people short-term outcomes; it is assumed that young people short-term outcomes will not be achieved if the practitioner short-term outcomes are not met. Once practitioners have improved their knowledge and awareness of youth gambling risks and are confident in their ability to signpost young people to support, their learnings can transfer onto young people engaging with their services and support. The delivery of harm reduction workshops also had the added intention of demonstrating to youth employability practitioners how to effectively deliver gambling harm reduction with young people on their programmes.

Mid-term outcomes

Medium-term outcomes are the outcomes expected to take longer to emerge and are likely to occur in the months after engagement with the Hub, if positive changes from short-term outcomes are sustained.

For practitioners, an improved ability to identify gambling risks and confidence to signpost to support is intended to lead to an increase in them signposting the young people and families they work with to gambling harm support. This behaviour is dependent on important conditions being met; that they are seeing young people or families after the training and that among those people they support one or more is at risk or experiencing gambling harm.

After practitioners gain knowledge and confidence about youth gambling education (short-term outcomes), especially recognising the relevance of youth gambling education to their role, they are expected to embed this knowledge in their work. For example, share the Toolkit or training materials with colleagues, include it in new staff onboarding, update policies and guidance for staff and service users to reflect gambling education.

Fast Forward then expects, once services have embedded gambling education in their work, that services from different sectors – health, education and employability – will work together to influence gambling education policy.

For young people, improved knowledge of risks and ability to critically assess gambling risk, are intended to lead to mid-term benefits: make more informed decisions about their gambling and talk with peers and family about gambling harms and responses. These outcomes rely on the successful achievement of young people short-term outcomes and practitioner mid-term outcomes.

Parents and carers accessing gambling education support is a secondary outcome of the Hub but not being measured by the evaluation because parents and carers are not the intended audience for the Hub.

Impacts

Long-term impacts are the ultimate, high-level effects that the programme is working towards, and can typically take years to emerge.

If the intended practitioner and wider profession outcomes are realised, the Hub aims to improve the capabilities and capacity of practitioners' organisations that work with young people in Scotland, so they provide gambling harm education and prevention support to young people.

If the intended young people outcomes are realised, the Hub aims to reduce harm (and associated public costs) caused by problem gambling behaviours among young people through improved recognition and response to gambling risk. These two impacts are believed to be mutually reinforcing.

3 Hub resources and activities

This chapter covers the resources and activities delivered by the Scottish Gambling Education Hub in the first three years of its operation. It begins by addressing engagement with each resource and activity before moving on to practitioner awareness and their motivations for engagement.

Delivery of resources and activities

Delivery context

The COVID-19 pandemic greatly impacted the Hub's planned delivery due to restrictions on face-to-face interactions with practitioners and disruption to practitioner services. It was therefore necessary for Fast Forward to adapt the mechanisms in place to ensure delivery maximise their reach to practitioners and young people.

In response to evolving service needs and the pandemic, Fast Forward made changes to its delivery over the first three years of its contract. The changes made include:

- **Pivot to digital:** Many activities transitioned from face-to-face events to digital events. Specifically, CPD training sessions, SGEN meetings and theatrical performances.
- **Expansion:** Some activities and resources were expanded. For example, new CPD training sessions on a variety of themes linked to gambling harm were introduced (i.e., gambling and gaming, and gambling and trauma).
- **Refinement and redesign:** Some activities were enhanced and improved. The Gambling Education Toolkit for example was updated in 2021 (initially to resolve device compatibility issues, though the scope for redesign expanded) to make it more visually engaging, to incorporate lived experiences, and to make the language more accessible.

Targets and delivery

To facilitate a cross-sector gambling education system and to equip practitioners with the ability to identify harmful gambling behaviours in young people, and signpost to available support, the Scottish Gambling Education Hub ("Hub") aimed to deliver a suite of resources and activities. These are listed below, alongside the targets established at the outset of the Hub's inception, where relevant.

Despite the substantial challenges posed by the COVID-19 pandemic, the Hub delivered all its intended activities and, in many cases, performed well in relation to targets.

By November 2021, the Hub had met or exceeded targets for CPD training sessions and performed well in terms of reaching practitioners with the Gambling Education Toolkit. The Hub also nearly met the targets set for theatrical performances and SGEN events. Table 3.1 shows that, although these targets were not met, they were very close to being achieved. The Hub did however fall short of some targets. Specifically, those that related to social media campaigns implemented by further and higher education institutions and the Gambling Education Youth Fund.

Table 3.1 Summary of activities delivered against targets

	Target	Achieved	Summary
 CPD training sessions	Training sessions: 400 Practitioners participating in training: 2,500	Training sessions: 375 Practitioners participating in training: 2,938	 Surpassed targets
 Gambling Education Toolkit	N/A	Gambling Education Toolkit downloads: 5,000	No target set
 Theatrical Performances	Trust Me performances delivered: 115 Number of young people in attendance: 16,000	Trust Me performances delivered: 100 Number of young people in attendance: 15,853	 Close to targets
 Scottish Gambling Education Network (SGEN)	Number of newsletter subscribers: 1,800	SGEN events: 8 Number of attendees: 176 Number of newsletter subscribers: 1,753	 Close to targets
 Social media campaigns from further and higher education institutions	Number of institutions implementing gambling education social media campaigns: 12	Number of institutions implementing gambling education social media campaigns: 8	 Under target
 Gambling Education Youth Fund	Number of applications: 35 Number of grants: 30	Number of applications: 15 Number grants: 13	 Under targets

Practitioners interviewed for the evaluation had largely only engaged with CPD training, but many expressed intentions to use other Hub resources once social distancing restrictions were lifted and they started delivering services again. For these practitioners, the training was typically the start of their gambling education journey. A less common experience was practitioners with established gambling education support and processes already in place.

Awareness of resources and activities

Practitioners had typically become aware of the Hub through word-of-mouth in their workplace, either through a colleague who had engaged with the Hub's resources and activities, or who were familiar with Fast Forward's other strands of work. Three-fifths (60%) of training participants heard about the session they attended through word-of-mouth. Practitioners of different roles and types of



organisations cited this as the way they learned about the Hub, suggesting that snowballing of Hub resources had happened to some extent across the Hub's target audiences.

"Word-of-mouth. Someone in the organisation had accessed the training and shared with colleagues saying it would be beneficial for everyone on the team."

Organisation that provides social care to young people, Fife

"It was highlighted as something useful for my particular role. It was sent to me in an email by one of my team leaders."

Youth employability organisation, Moray

Email communication (21%), either direct from Fast Forward (7%) or from another organisation (14%) was the next most common source of practitioner awareness of the Hub. Some practitioners had met Fast Forward staff through related networks or events and learned about the Hub that way. This suggests that Fast Forward's reputation has played an important part in growing engagement with the Hub.

"Fast Forward emailed out to say they had new resources available...I've worked with them in the past and Fast Forward are a wonderful organisation; they have got young people's needs in mind and they come from a young person's place. It is not 'don't do it, it's no good for you', it's all about harm reduction and about supporting young people to make the right choices and make positive changes."

Informal education and youth work, Highland

The least common source of Hub awareness was practitioners proactively searching on Google and Eventbrite for professional development training; 2% of training attendees discovered the training through desk research, and 3% had come across the Hub resources through the Hub's website. The pandemic seemed to benefit interest in the Hub's training because practitioners spoke about using the time to upskill, while their services were on hold or reduced.

"We were looking into was gambling as part of an unhealthy living module. (We) started research into it and believed that gambling needed to be a module on its own so through that research we tried to find out about gambling and find what we could use for free from home and that's when we found Fast Forward."

Youth justice and criminal justice organisation, Glasgow City

Motivations behind engaging with resources and activities

Practitioner motivations for accessing Hub resources were varied and often multi-faceted; motivations were driven by personal and organisational needs, and Fast Forward's reputation.

The most common motivator for engaging with Hub training and the Toolkit was practitioners wanting to broaden their skillset. This was evidenced through survey responses, where 58% of training attendees said they were driven by Continuing Professional Development (CPD); 33% by personal interest, and 23% by general interest.¹ Few practitioners mentioned more specific motivations, but most were motivated by more general factors, suggesting many were new to gambling education. Motivations were consistent across different types of organisations and practitioners.

¹ Survey: Practitioner Gambling Needs Assessment survey. Question: Q5. Base: All practitioners (375) Respondents were asked to give reasons for coming on the training: more than one answer provided by some.



“I feel it’s a constant catch-up with what is going on. I am more confident with what has been the more consistent issues for young people like education and healthy relationships and that sort of thing... I was hoping to update the knowledge I already had on gambling, the levels of engagement in gambling and the types of gambling that were available to young people.”

Informal education and youth work, Glasgow City

At an organisational level, those engaging with Hub resources expected them to be relevant to their service, either on their own, or alongside related topics Fast Forward’s broader service covered, like drugs and alcohol, and financial wellbeing. Practitioners with organisational motivations expected Hub resources to help their own organisations provide better support to clients (whether that is young people or adults) so they could offer a first line of support to gambling and potential gambling harms. These practitioners also hoped their engagement with the Hub could help them to raise their awareness of gambling harms and increase their confidence to talk about it with their colleagues and delivery partners.

Practitioners we interviewed described how they were looking for resources to support their professional development, either because of new assignments or expanding remits which became more relevant to gambling. For practitioners motivated by their own development, they were looking for theoretical and practical gambling education knowledge, and to improve their confidence in speaking about these topics.

“It is important for us to be aware of what additional support there is for young carers particularly because the risks of young carers starting gambling because of their mental health or because they want to help out their families with financial constraints. I think knowing how to address that is important.”

Informal education and youth work, City of Edinburgh

Perceptions of the transferability of the Hub

At the outset of this evaluation, GambleAware was exploring the possibility of rolling out the Hub model to England and Wales.² To support commissioning decision-making, discussions were had with strategic stakeholders and practitioners on the transferability of the Hub during the Scoping stage of the evaluation. Overall, the Hub model was viewed as transferrable to English and Welsh contexts. However, the way it is transferred and subsequently delivered will likely result in a design which looks different to the Scottish model. Key considerations for the roll-out of the Hub model elsewhere are listed below.

Structure

Scottish education and health systems are set up differently from their English and Welsh equivalents. The Scottish Hub’s programmes are aligned to the Scottish curriculum so these would need to be revised to align with English and Welsh curriculums.

Child and Adolescent Mental Health Services (CAMHS) in England were highlighted by stakeholders as being stretched and potentially lacking the capacity to engage with a new youth provision. The role of CAMHS in safeguarding young people was seen by stakeholders as important, because the Hub does not deliver such interventions. Given the importance of signposting, establishing relationships with CAMHS in England and Wales was viewed as critical to successful transfer.

² At the time of writing GambleAware had confirmed it would move forward with commissioning Hubs in England and Wales.

Stakeholders identified an advantage for establishing a Hub in England; gambling legislation and licensing laws with bookkeepers originate from England, and so an English Hub may be more successful in advocating for these laws to change to better protect young people.

There was nothing to suggest the five-sector model could not work in the other contexts – informal education, youth employability, formal education/schools, further and higher education, parents and carers – but it is likely new Hubs would face similar challenges of getting footholds in local authorities and education providers, who have lots of competing priorities.

Engagement and service scale

For England specifically, its size may make direct engagement with public authorities and buy-in to the service more challenging, requiring more time, staff and probably different strategies to those taken by the Hub. This was viewed as an important difference compared with Scotland, likely presenting practical limitations of service reach, without more staff. This could suggest that a regional approach would be beneficial. Similarly, it is possible that lessons learned from digital delivery during the pandemic could help to offset the challenge of geography and population requirements.

Competition

Whereas Fast Forward were among the first to offer youth gambling support in Scotland, the number of gambling education players already involved in the youth gambling market in England means work needs to be undertaken to map what youth gambling services are already available, and how they currently operate and work together. Then, engagement work with these players is needed, to get them on board and to ensure the hubs are complementary and not duplicating services.

Related to this is the credibility of Fast Forward amongst the key professions they were seeking to target support. With some professions, like youth workers, they were pushing on an open door because they were an established and respected organisation that had a track record of understanding and working with Scottish practitioners and young people. Thus, it will be important for the Hubs in Wales and England to ideally be delivered by known and respected youth organisations.

In addition to the practice implications summarised above in the previous section for the Scottish Hub, English and Welsh Hubs should consider the following:

- pilot the Hub in a broad range of English and Welsh schools, regions and areas of deprivation before full roll-out;
- consult CAMHS, youth & addiction workers, local authorities, education providers, and youth & adult gambling support providers; and
- possibly align English and Welsh Hubs with established youth and/or gambling education networks and organisations, for credibility and ease of communication with key stakeholders.

Practice implications

- The different ways practitioners learned about the CPD training suggests that Fast Forward should focus on strengthening 'word-of-mouth' channels, so that what people share to colleagues or peers are the key messages the Hub wants communicated. We recommend Fast Forward continues monitoring the ways people first hear about the training because a risk of relying on word-of-mouth only is there might be gaps in stakeholder coverage.

- Practitioners were motivated to engage with Hub resources for different reasons, and Fast Forward should ensure its resources meet these motivations. For example, including theory underpinning gambling education practice and opportunities to practice discussing key principles of gambling harm prevention would meet the needs for practitioners motivated to improve their confidence in speaking about gambling education. For practitioners looking to strengthen their organisation's gambling education practices, they are more likely to benefit from learning about example policies and guidance from organisations in their sector.



4 Practitioner Outcomes

Fast Forward intended to impact the attitudes, knowledge and behaviours of practitioners through the activities described in the previous chapter. Two types of outcomes were expected. Short-term outcomes are those expected to happen shortly after activities and outputs have been delivered, weeks rather than months. Short-term outcomes were expected to lead to further outcomes in the mid-term. Mid-term outcomes are those expected to happen six to twelve months after activities and outputs have been delivered.

This chapter addresses the extent to which practitioner outcomes have been achieved, and factors influencing progress. It draws on evidence gathered from in-depth interviews with stakeholders and practitioners and surveys conducted with training session participants.

In summary, the evaluation captured evidence that the Hub has brought about an improvement in knowledge and awareness of youth gambling harms and education. Particularly the ability of practitioners to identify and recognise the signs of gambling harms and confidence in signposting to gambling support services. Evidence of changes in behaviour was more limited. However, the evidence that was available indicated positive impact for at least some practitioners.

Short-term outcomes

Acknowledge youth gambling as a problem in Scotland

Practitioners who took part in training sessions commonly acknowledged youth gambling to be an issue in Scotland before attending training (76%), and the training increased this view amongst nearly all practitioners (96%). Practitioners from health organisations that work with children and young people (including the NHS) were slightly less likely than practitioners from other types of organisations to agree that youth gambling was an issue in Scotland following training (87%).

Practitioners we interviewed in depth echoed this; they already recognised youth gambling as an issue in Scotland, and this is what prompted their engagement with the Hub. The training improved their understanding of the extent to which gambling was a problem for Scottish young people, how accessible it is to young people and the different gambling formats available, including gaming.

"I never thought about how we normalise gambling in everyday lives; adults gamble in front of their children, people give kids scratch cards in their gifts like it's an okay thing to do."

Informal education and youth work, Dumfries and Galloway

"Previously I had an idea that gambling was just the casino, bookies and online betting. I never would have associated gaming with gambling".

An organisation that supports parents and carers, Fife

Hub staff and trainers agreed; they observed surprised reactions during training sessions when practitioners were asked to consider types of risk-taking behaviours for young people, and to order them according to how prevalent they each were for Scottish youth. Practitioners underestimated the extent of gambling activity.

"Seeing training, where teachers are asked to order various 'risk-taking behaviour' cards... and almost always they got it wrong. That was how (the Trainer) started the sessions, and that experience for teachers was surprising: because they didn't think gambling was as common (as other risk-taking behaviours)."

Stakeholder



Recognise relevance of youth gambling education to role

Before engaging with the Hub's work, around seven in ten (68%) practitioners said that they recognised the relevance of youth gambling to their roles. This increased to more than eight in ten after training (86%). Of the minority that were not in agreement, 5% disagreed and the remainder were uncertain (9%).

Practitioner recognition of the relevance of gambling to role is largely connected to having an improved understanding of gambling in general. Understanding its prevalence and the nature of the risks and harms supported practitioners to understand why they needed to know about this in their role. In the few instances where practitioners were unable to see the relevance of youth gambling, this was generally down to having not yet encountered it as an issue amongst the audience they work with.

Some practitioners said that the gambling education delivered by the Hub was relevant to their work because, amongst the audience they work with, they knew of people at risk of experiencing gambling harms.

"We work with a lot of people who come from low-income areas, and after the gambling session I learned that gambling is somewhat aimed at low-income people and can harm them quite substantially. Because of this, I feel that the gambling education was very relevant."

Youth and adult employability organisation, Dundee

"We find that gambling is often involved in families that are affected by alcohol and drugs. Although we don't specialise in support for families affected by gambling, we support families where gambling can be involved so an awareness of gambling is relevant to the organisation."

Health and wellbeing organisation, Glasgow City

Some felt that gambling education was relevant to their role because, from their perspective, there was a requirement to be able to support the people experiencing harm from gambling, and the Hub was said to have equipped them with the ability to do so. This involved having a better understanding of resources and services people can be signposted to and having more confidence in having conversations about gambling.

"We support students. I've never helped a student with any issues relating to gambling. However, I know it must affect some of the student population. It was helpful to learn about how to signpost resources and support."

Further education college, Aberdeen City

Hub staff felt that the continued engagement with the Hub's services was proof of practitioners recognising the relevance of youth gambling education to their work. This was demonstrated through the initial participation in training sessions, and in repeat engagements with more specialist training and in the use of the Toolkit and participation in SGEN events.

"The fact that participants engage with other aspects of the Hub's work shows that they feel its relevant to their roles."

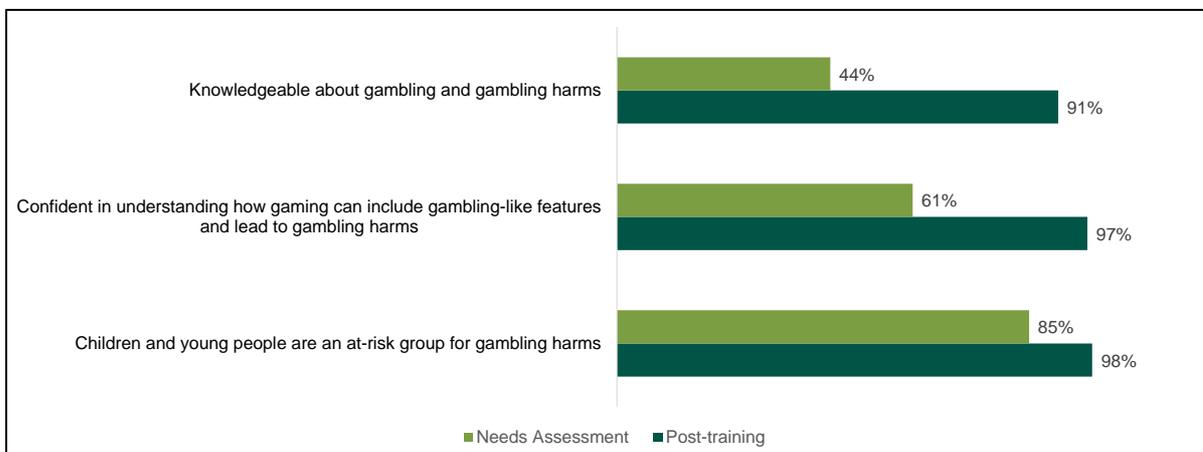
Stakeholder

Improved knowledge of youth gambling risks

Most practitioners who attended the training gained better knowledge of youth gambling risks. Figure 4.1 shows more than nine in ten practitioners agreed after training they know about gambling and its

harms (91%), that they understood how gaming can include gambling-like features (97%) and that children and young people are an at-risk group.

Figure 4.1 Knowledge of youth gambling risks



Survey: Practitioner Gambling Needs Assessment and post-training surveys. Question: Q9/16. Base: All practitioners (375/336)

Similar results were observed for participants of gaming-specific training sessions: 91% agreed they were knowledgeable about gambling and its associated harms (up from 59%) and 95% agreed they understood how gaming can include gambling-like features (up from 61%).

There were no significant differences between different types of practitioners of their perceived knowledge of gambling and gambling harms, or the extent to which children and young people are recognised as an at-risk group. However, there were differences in understanding how gaming can include gambling-like features and possibly lead to gambling harms: practitioners from health organisations (including the NHS) were less likely than practitioners from other types of organisations to agree that they understood this (90% compared with 95%).

A recurring view amongst interviewed practitioners was that the training and – for those that accessed it – the Toolkit, helped them strengthen their understanding of gambling risks. For example, a practitioner who worked in a school explained that the training helped connect what young people had said to them in the past with possible signs of gambling harm.

“Gambling is something that has never been part of my life and never thought it could be an issue for children until the training. Then I realised the meaning of what some of the children had said to me. The penny dropped during the training – realising what children had been saying to me was about gambling.”

Formal education, Glasgow City

The practitioner interviews also provided insight into what activities and resources of the Hub supported this improved knowledge. The training and the Toolkit were the most cited, with practitioners highlighting the presentation of features of youth gambling that can lead to gambling harms, how young people could be drawn into gambling and the signs of this behaviour, and the role of gaming in gambling as particularly useful. This information helped practitioners to understand what to look out for with the young people and adults they support and informed how best to approach a conversation about gambling. A practitioner explained how a young person they were working with mentioned they spent a lot of time gaming. The practitioner knew this was a possible sign of gambling harm and a good opportunity to start a conversation about gambling harm from the CPD training session and Toolkit:



"I thought I knew what to be on the lookout for when engaging with young adults, but the training helped gather the right techniques and enhanced my ability to impact young people more positively."

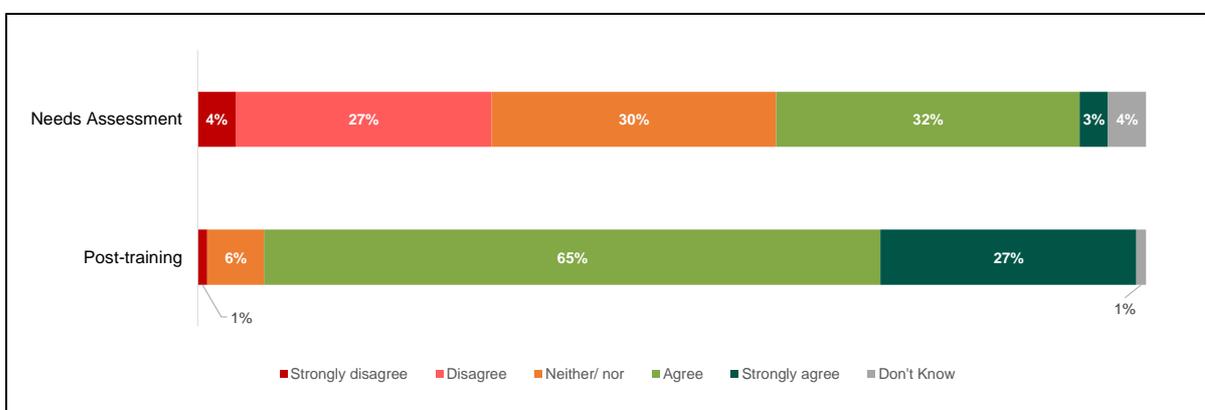
Training and employability services, West Lothian

Improved ability to identify gambling risks amongst young people

Practitioners' ability to recognise the signs of gambling risks among young people is crucial to seeing the relevance of the training to their work and to signpost young people and their families to relevant support. In short, they need to know what to look out for to know when to act.

Figure 4.2 shows a nearly threefold increase in the number of practitioners that felt confident in their ability to identify and recognise the signs of gambling harms after taking part in training sessions: 35% felt capable of doing this before training sessions, and this rose to 92% once trained. Only 1% of practitioners came away from training not feeling confident.

Figure 4.2 Identification and recognition of the signs of gambling harms



Survey: Gambling Needs Assessment Survey & Practitioner Post-training Survey Question: Q9-16. 'I am confident that I can identify and recognise the signs of gambling harms' Base: All practitioners (377/349).

The COVID-19 pandemic has meant that opportunity for practitioners to identify gambling risks in practice have been restricted, with services often closed, running at reduced capacity and having less or no face-to-face contact. Still, interviews revealed evidence of how practitioners identified gambling risks for the people they support. For example, how, following interaction with the Hub, practitioners now recognised features in games as gambling risks.

"Children do not see that online game purchases are the beginning of a gambling addiction. So, it has helped to see how and why this can lead to problems."

Organisation that provides support to children and young people, Fife

"I work with young people aged 16-26 and it was interesting to hear about the common links between gambling and gaming. I have come across a few young people already who would appear to have a gaming addiction and it is highly possible that some of the young people I support may have a gambling addiction too."

Organisation that provides support to children and young people, Aberdeen

Improved awareness of available support and brief interventions, and how to access them

Overall, the evidence gathered for this evaluation suggests the Hub helped improve practitioner awareness of available support and brief interventions, and how to access them. Six months after attending CPD training sessions around eight in ten practitioners (78%) said that the training had



supported them by making them aware of gambling education support. Similarly, seven in ten (70%) said the training had supported them by improving their awareness of gambling education resources. Combined, nearing nine in ten (89%) practitioners were more aware of support or resources for gambling.

Awareness of available support and how to access it was a key practitioner takeaway from engagements with the Hub, particularly CPD training sessions and the Gambling Education Toolkit. The breadth of the Toolkit's resources was particularly useful to practitioners that used it.

"[The Toolkit] gave you so many different links... you can just access so much stuff... things we have never come across in terms of gambling... we thought that was really good because there is such a different variety on the list."

Informal education and youth work, Moray

"Information on signposting will definitely be useful. I will very likely be using the Toolkit discussed in the training with supported people and sharing this with colleagues."

Organisation that provides social care to children and young people, Aberdeen

A key component of this intended short-term outcome is to improve practitioner awareness of brief interventions. A brief intervention is defined as: "a short, purposeful, non-confrontational, personalised conversation with a person about an issue related to gambling".³ Findings from surveys and in-depth interviews indicated that the Hub helped to equip practitioners with the knowledge and skills required to be able to have such conversations. This was attributed to the development of a more nuanced understanding of the gambling risks present for young people and a better grasp of the language to use when discussing gambling, particularly in relation to games.

"I work with students aged 16-25. [It's] useful to be armed with the knowledge to have proactive conversations and resources to help anyone who may be worried about their gambling."

A further education college, Aberdeen

"I would have been unsure to broach gambling addiction prior to this training and would have been unsure what support to offer or recommend but now feel much more prepared to have this type of conversation."

Youth and adult employability organisation, North Lanarkshire

However, stakeholders expressed concern about the use of the term 'brief interventions'. They felt that the term was specialist, familiar to health practitioners, and so thought that there was risk that it could cause confusion amongst practitioners working outside the health sector. Indeed, some stakeholders were unfamiliar with the term.

Improved confidence to signpost to support

Linked to the improvement in awareness of available support and brief interventions, and how to access them, practitioners that engaged with the Hub displayed an improvement in their confidence in signposting to support.

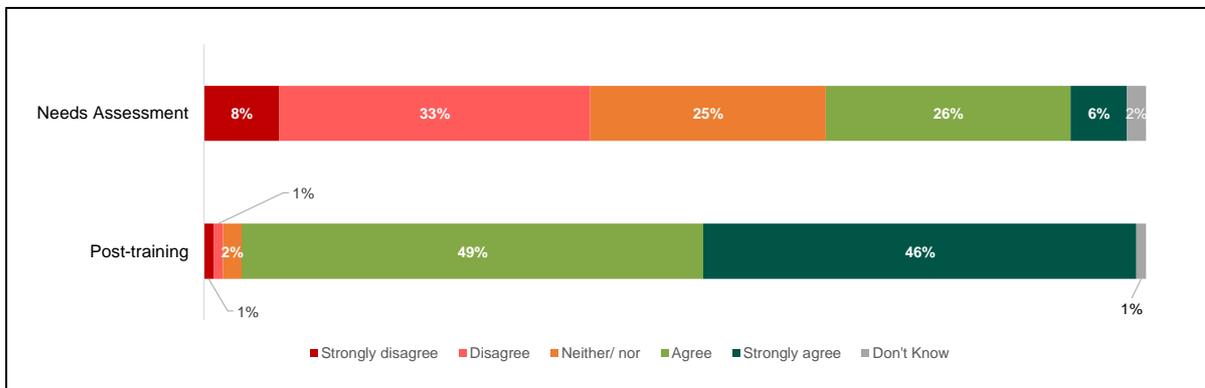
Figure 4.3 shows the threefold increase in the number of practitioners that felt confident in their ability to signpost young people to gambling support services. Prior to receiving training, a third (32%) of practitioners agree that they were confident. Following training, this rose to 95% with more than two-

³ [GambleAware, 2017. Brief Intervention Guide: Addressing risk and harm related to gambling.](#)



fifths (46%) strongly agreeing that they were confident in signposting. Only 2% of practitioners left CPD training sessions not feeling confident in signposting.

Figure 4.3 Confidence in signposting to support



Survey: Gaming Needs Assessment Survey & Gaming Post-training Survey. Question: Q9-16. How would you rate your level of agreement with the following statements: 'I am confident in signposting young people to gambling support service if they required them', 'I am confident in signposting young people to gambling support services if they needed them, including in relation to gaming' Base: All practitioners (375/336).

The improvement in practitioner confidence with signposting young people to support was echoed during in-depth interviews. Practitioners praised the varied information and resources captured in training and the Toolkit for clarifying how, when and where to signpost at-risk young people when required. Improved confidence in this regard was closely aligned to improved awareness of available support and brief interventions, and how to access them.

"[My team] feel more confident now about being able to talk about gambling and have those conversations with young people... you came out [of CPD training] feeling like 'I've got the knowledge; I can sit down with a young person and speak to them about gambling on their level.'"

Informal education and youth work, Highland

"A lot of our work is signposting. Because we deal with a range of issues, and we can't be an expert in all of them. So, it's raised our awareness of the signs of gambling and where to signpost people to available support."

Service supporting parents and carers, Stirling

Medium-term outcomes

Increase in signposting young people and families to gambling harm support

Although practitioners reported an improvement in their awareness of available support and in their confidence to signpost young people to such support following involvement with the Hub, there were mixed results to the extent this translated into the intended practitioner behaviour.

Practitioners' signposting behaviors six months after attending training fell short of their intentions immediately after training. Only one in eight (13%) had signposted the people they support to gambling support compared with over half (56%) intending to when surveyed after training. The reasons for this discrepancy were explored during practitioner depth interviews. Many explained that this was a consequence of having not yet encountered young people in need of signposting. This is perhaps unsurprising given that the number of young people classified as at-risk gamblers is known



to be relatively low (2.7%).⁴ The lack of signposting opportunities has also likely been intensified by the COVID-19 pandemic, with restrictions on the number of face-to-face interactions with young people, and the associated disruptions to frontline services.

“I now have more awareness of the issues to look out for and where to signpost for support or advice if required. I just haven't come across any families since the I attended the training where I have been aware of any gambling issues or concerns.”

Organisation that provides support to children and young people, Glasgow

“I have knowledge when a student presents difficulty with gambling. At the moment none of my students have indicated this as an issue.”

Formal Education, West Lothian

Even so, practitioners shared signposting experiences. Signposting came in different formats, including group or one-to-one discussions with young people about available support, disseminating posters and adding details of support organisations to their service materials. For example, a practitioner trained by the Hub identified the signs of risk in a member of their sports team and the practitioner referred the individual to specialist treatment after discussions with the individual.

“The audience is quite small, but already were aware that they had an issue with gambling... I was able to signpost them onto resources.”

Health and wellbeing organisation, Edinburgh

“I printed out posters and they are on display in the pastoral care classrooms. I have them in the school as well in certain areas. That's so when I'm not there the message is constantly going out to children – if you realise someone does have a problem you can contact this telephone number.”

Formal Education, Glasgow City

A less common view shared by practitioners and stakeholders was whether signposting to support was always appropriate for the audiences they worked with. While they recognised the value of signposting, they felt that this would not be appropriate when a young person is unlikely to engage with support and when a young person shows serious risk of gambling harm. Under these circumstances, participants wanted more guidance on how to respond, beyond signposting to services, and wanted information on providing appropriate treatment. For example, a practitioner was a psychiatrist and wanted to be trained to deliver gambling addiction support to young people.

Services embed youth gambling education in their work

Practitioners used and shared Hub resources but often stopped short of embedding these resources in their organisation's work. Six months after attending a CPD training session a third (33%) of practitioners had spoken about gambling harms with the people they support, and half (50%) had shared activities and resources with colleagues. But only 12% felt they had embedded gambling education into their programmes or services.

Where efforts had been made to integrate gambling education into their work, the most common step taken by practitioners was building the topic into lessons and activities with service users. For example, covering gambling education in Personal, Social, Health and Economic (PSHE) curriculum, employability classes and sports training sessions, and integrating the topic alongside subjects like internet safety, risk taking and addiction.

⁴ [UK Gambling Commission, 2019. Young people and gambling survey 2019: A research study among 11–16 year olds in Great Britain](#)



"It has inspired me to think about how I can involve gambling into the talks already delivered to the high school pupils and how I can mention it within subjects we already deliver such as internet safety, risk taking, addiction and also mental health to raise awareness."

Formal education, City of Edinburgh

"We are in process of updating our substance misuse peer education programme for age 20 to 29 years gambling and gaming will feature within this using the Toolkit provided by Fast Forward."

Organisation that provides social care to children and young people, Aberdeen

A practitioner used the scenario-based activities in the Toolkit to facilitate discussion among 12 to 18-year-olds in a youth club setting:

"The scenario-based ones that got them talking, it was the 12 to 18-year-olds that did this and it really opened up conversations. Did an example of a friend using all their pocket money in the arcade and was interesting to see how they thought it could be an issue."

Informal education and youth work, Glasgow City

Another common way practitioners had begun to embed gambling education was incorporating Hub resources into internal and external-facing policies and guidance documents. For example, a social worker added gambling addiction and harms content to the toolkit used by carers and social workers, including adding questions to screeners used with carers, to identify whether they may be at risk or experiencing gambling harms. Other examples included updating safeguarding policies to include gambling.

"The training was relevant without a doubt, I work with complex groups, with complex needs and accessing Hub resources introduced us to a variety of safeguarding measures needed to ensure these vulnerable adults don't fall prey to this new arena of addictive practices."

Informal education and youth work, Dumfries & Galloway

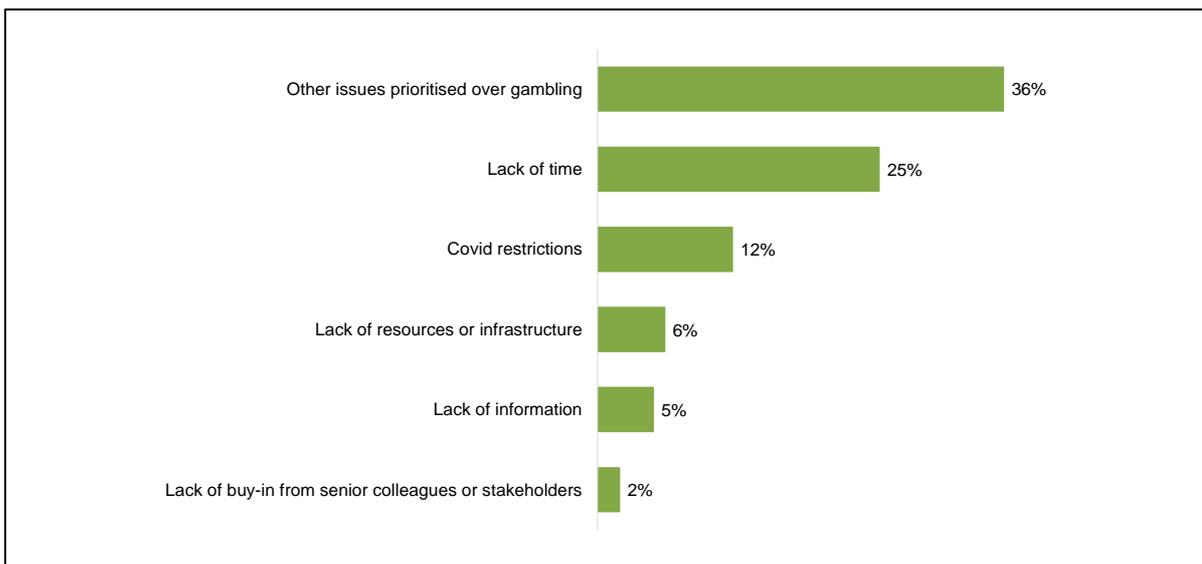
Other practitioners made progress with embedding gambling education by sharing and recommending Hub resources and activities to their peers and management. For example, a practitioner had used Hub resources to deliver internal training on gambling and its connection with vulnerability and abuse, and another had added the topic to the standing agenda for department meetings.

"Having a workforce that is gambling aware feeds into all the work we do. For my colleagues when we are discussing caseloads or the people, we are working with we would be able to say, 'have you thought of this or that?' You can support one another's practice which ultimately leads to a better service for the people who are accessing our organisation."

Organisation supporting young people and families, Edinburgh

Barriers to embedding gambling education included different issues being prioritised over gambling education, time constraints and COVID-19 restrictions (see Figure 4.4). Given that, for many practitioners, their involvement with the Hub was their first involvement with gambling education, it is likely that embedded youth gambling education will take time to be realised.

Figure 4.4 Barriers to making use of gambling education training



Survey: Practitioner Post-training Survey. Question: Q8 'What, if any, are the top three barriers that you or your organisation have faced in making use of the session you attended?' (125)

Health, education and employability services work together on gambling education policy

An expected mid-term outcome for practitioners was the facilitation of collaborative work to embed gambling education in policy. This outcome is evidenced by the performance of the Scottish Gambling Education Network (SGEN) and Fast Forward's wider work to bring together cross-sector stakeholders and services to enable them to collaborate on topics related to gambling education.

Over the three years the SGEN has been operational, 176 practitioners have attended networking events. These events have covered a wide variety of topics including the convergence of gaming and gambling, digital youth work and online safety, and Black, Asian and Minority Ethnic perspectives on gambling. Fast Forward have organised and contributed to several events, including Glasgow City Council's Gambling Harms Summit, National Rural Mental Health Forum, Children in Scotland Annual Conference and the University of Stirling's Children and Young People's Mental Health and Wellbeing Conference.

Although the performance of the SGEN and Fast Forward's contribution to other events provides evidence of youth services working together on gambling education policy, findings from surveys and qualitative interviews with practitioners suggest that there is room for greater collaboration.

Collaborating with a different organisation on gambling education may not be within the remit of a trained practitioner or an organisation that has engaged with the Hub; it is not expected that all organisations that engage with the Hub go on to collaborate with other organisations. So, it is unsurprising that 6% of practitioners that took part in a follow-up survey six months after attending a CPD training session said they had collaborated with a different organisation on gambling education. Though uncommon, surveys and in-depth interviews highlighted a variety of different forms of collaborative work at play. This included a Higher Education provider working with other institutions, a health and wellbeing organisation contributing to a national consultation and a council working with local youth groups.



"I work with community groups and organisations. As a council we run a few youth groups in my area as well as building relationships with the school. I can see how gambling education could be relevant to all those aspects."

Organisation that provides support to children and young people, North Ayrshire

NHS practitioners collaborated with Fast Forward in 2021 to develop further specialist training for practitioners exploring the links between trauma and gambling. These sessions have seen demand outstripping supply, as attendees from previous training re-engage with these new training opportunities.

Practice implications

- Most practitioners the Hub engaged already recognised youth gambling was an issue in Scotland. This means Fast Forward was 'knocking on an open door' and the Hub's activities and resources can help to translate that awareness into appetite for organisations to develop their practice, embedding youth gambling education into their work. It may also suggest that there are untapped audiences the Hub could target efforts to engage; those practitioners that are unaware youth gambling is an issue.
- 'Brief interventions' is a term commonly understood in the health sector that refers to a specific type of intervention. Practitioners and stakeholders working in other sectors were unfamiliar with this term and viewed it as potentially confusing. Minimising its use outside of the health sector and instead using a less specialist term may be more appropriate. For example, use instead 'conversations about preventing gambling harm'. For health practitioners, an example of this activity might be brief intervention. Where the term is covered in Hub resources, like the Toolkit and CPD training sessions, we recommend using it as an example to illustrate the broader point about encouraging practitioners to have conversations about gambling harms and preventing them amongst their clients, and acknowledge it is a sector-specific term.
- The evaluation captured low rates of signposting young people and families to youth gambling support, for various reasons. A way to overcome the barrier of low to no direct contact with young people in need is for the Hub to encourage more passive signposting. For example, encourage practitioners to embed awareness raising within their services, like including reference to gambling harms in safeguarding policy; including reference to gambling education in staff onboarding; and signposting to gambling treatment and advice with posters on organisation websites and in offices.
- The most common barriers practitioners shared to embedding gambling education in their work were that other business issues were prioritised, and they lacked time. These barriers are unlikely to change, so the Hub might want to consider ways of sharing knowledge and skills that speak directly to the challenges time-poor practitioners face. For example, 'gambling education bites' could be short leaflets or videos covering one or two issues and tips to overcome these, drawn from the Toolkit, or framing some of its resources around the financial case for implementing them, to help speak to some of the known reasons gambling education is not prioritised over other work.
- Practitioners accessing the Hub believe the Hub can provide advice on practitioners delivering interventions themselves. This is outside the remit of the Hub and while the Hub's training and resources communicate it is not a treatment organisation, this is likely to be a



request going forward. Supporting practitioners with how to respond in unlikely scenarios where a young person has shared information that they are at risk of harm in relation to their gambling, is something Fast Forward can consider in its CPD training sessions and Toolkit materials. For example, principles for practitioners to follow when responding, example phrases to use and any follow-up steps the practitioner should take.



5 Young people outcomes

Fast Forward intended to impact the attitudes, knowledge and behaviours of young people through their engagement with practitioners involved in their lives, and through gambling education workshops with young people. Most young people outcomes were expected to come about because of practitioner outcomes achieved.

This chapter discusses the extent to which intended outcomes for young people have been achieved, and the factors influencing progress. Findings related to all young people outcomes are based on surveys with young people who took part in a gambling education workshop, and the perceptions of practitioners, either captured through surveys or interviews.

There is evidence to suggest that, through practitioner engagement with activities and resources, there has been improvement in the number of young people understanding and acknowledging gambling risks and being aware of available support.

There was, however, less evidence of their improved ability to critically assess risk and make more informed decisions around gambling. The reasons for this are threefold: incidence of gambling harm among young people is relatively low, meaning there is less opportunity in their day-to-day work for a practitioner to encounter a young person in need; the different types of practitioners engaging with the Hub, including managers with less direct contact with young people; and social distancing measures due to the pandemic. Limited interaction with young people reduced the opportunities for practitioners to assess their ability to critically assess risk and make more informed decisions around gambling, and thus limited the evidence available for this evaluation. Regardless of the pandemic, practitioners felt that the benefits for young people are likely to take time to cascade from practitioners to young people.

Short-term outcomes

Improved knowledge of youth gambling risks

From receiving scratch-cards as birthday gifts, to social betting at races and casinos, young people were able to develop a more nuanced understanding of the different forms of gambling that exist, and how to distinguish between them because of the workshops.

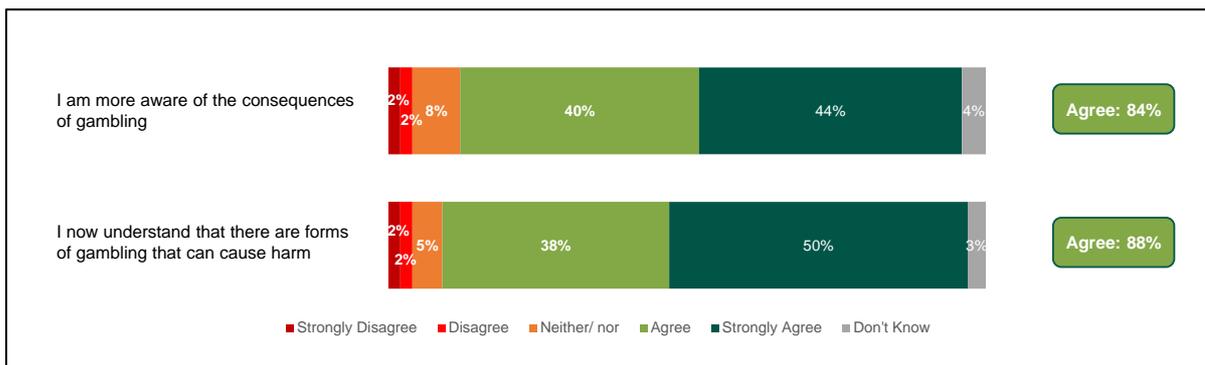
“There are many forms of gambling, not just on betting sites and casinos.”

Young person

Figure 5.1 shows the benefits workshops had on young people's understanding about the different forms of gambling and gambling harms: following workshops, most young people were aware of the consequences of gambling and understood gambling can cause harm.



Figure 5.1 Improved understanding of youth gambling



Survey: Young People Post Workshop Survey: Question: Q6. To what extent do you agree... 'I now understand that there are forms of gambling that can cause harm', 'I am more aware of the consequences of gambling' & Q7. How do you think the audiences you work with have benefited from the session you attended, if at all? Base: all young people (129).

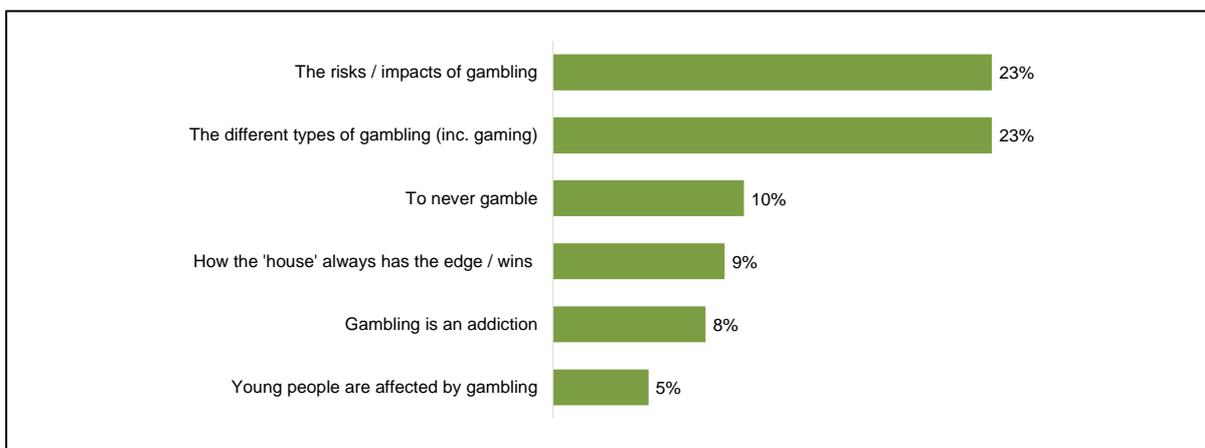
For example, loot boxes are a form of gambling that can cause harm and young people were able to understand that better after attending the sessions.

"A lot of young people revealed that they never realised how loot boxes could be a type of gambling."

Stakeholder, Fast Forward

Figure 5.2 shows gambling risks and the impacts of harmful gambling, and different types of gambling, were the most common learning for young people who attended the sessions, with almost a quarter (23%) identifying these learning outcomes.

Figure 5.2 Improved knowledge of youth gambling risks



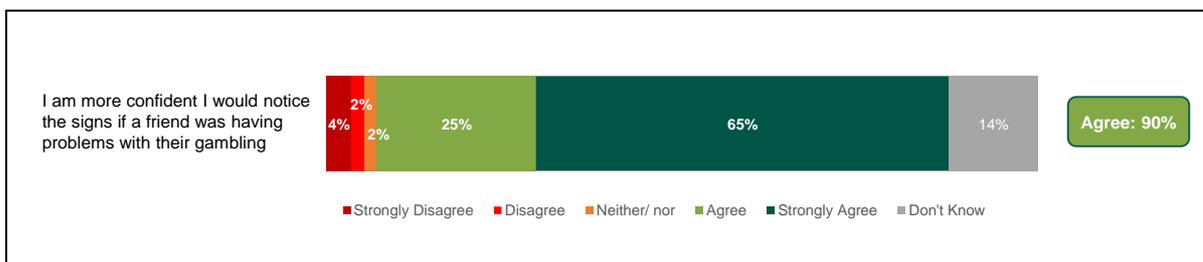
Survey: Young People Post Workshop Survey. Question: Q7. Please tell us one thing you learned from the session. Base: all young people (129).

Acknowledge risks of gambling in self and other young people

Acknowledgement of risks of gambling goes hand in hand with improved understanding of gambling. When practitioners were asked how young people had benefitted from the training, almost half of practitioners (48%) reported they had witnessed an improvement in the awareness of gambling harms amongst the young people they worked with, suggesting that the learnings of practitioners had been trickling down to young people. As referenced in practitioner outcomes, these 'trickled down' learnings were from embedding youth gambling by building the topics into lessons and practice for young people.

These findings were further strengthened when nine in ten (90%) young people said that they felt more confident in their ability to identify signs of gambling harms among their friends following this interaction with the Hub. Figure 5.3 captures how most young people (65%) strongly agreed.

Figure 5.3 Acknowledge risks of gambling in self and other young people



Survey: Young People Post Workshop Survey: Q6. To what extent do you agree... 'I am more confident I would notice the signs if a friend was having problems with their gambling'. Base: all young people (129).

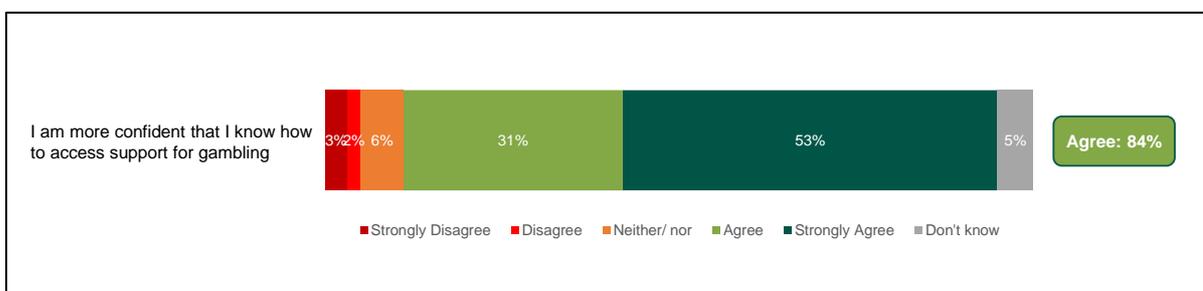
Improved awareness of available support resources and services

More than eight in ten (84%) young people that participated in a Hub workshop came away from the session confident about how to access support if needed (see Figure 5.4). Amongst practitioners, one in three (31%) reported that the young people they work with had received directions on where to get support for gambling. These were typically achieved more through one-on-one discussions, presentations and posters instead of brief interventions during a crisis.

"I never knew there are online support websites that can be easily accessed."

Young person

Figure 5.4 Improved awareness of available support for gambling



Survey: Young People Post Workshop Survey: Question: Q6. To what extent do you agree... 'I am more confident that I know how to access support for gambling' Base: all young people (129).

Practitioners felt they played a crucial role in identifying those in need of support and encouraging those in need to engage with resources and services. This role reinforces improved awareness among young people of available gambling support resources and services.

"A lot of the time they brush things under the carpet. An important skill is being able to provide support and knowing they can talk to us. We might not have the answers but that is actually something we could do together – we could look at x resource or y together."

Youth justice and criminal justice organisation, North Lanarkshire

Improved ability to critically assess risk

There was no evidence for this outcome from any of the data sources available for this evaluation. This points to the need to reconsider what mechanisms are required to observe and evidence the improved ability for young people to critically assess risk.



Mid-term outcomes

Talking with peers and family members about gambling harms and making more informed decisions around gambling

When practitioners were asked how the young people they work with had benefitted from engaging with the training, a third of practitioners (33%) mentioned that young people had conversations with peers and family about gambling harms and responses. This was supported by two fifths of young people (38%) who said they told a friend or family member where they could find information about gambling risks. The sessions also helped around one in six young people feel confident in being able to talk to their peers about gambling risks (16%).

“A lot of young people showed keenness to share the knowledge from the training sessions with their friends.”

Youth employability organisation, Highland

One in three practitioners (30%) mentioned in the survey that they felt that young people were able to make more informed decisions about gambling but caveated in qualitative interviews that the benefits from the sessions are likely to take time to cascade from practitioners to them.

“I think it’s that learning that you might not value at that time. It’s the same with drugs and alcohol, you can talk to them all the time, but it might not be until they’re 23 that the penny drops... it takes a long time for that learning to be valued by them.”

Informal education and youth work, Highland

It was difficult to evidence to what extent young people were able to make informed decisions about gambling due to the limited interaction practitioners had with them. While factors relating to the pandemic played an obvious part in this limited interaction (i.e., due to social distancing and services running at reduced capacity with little to no face-to-face contact with young people) the differing levels of direct contact between various practitioner roles and young people – even under normal operating circumstances – may also be a factor here, and something to consider going forward in terms of how else to evidence this outcome.

Practice implications

- Young people are mainly expected to benefit from the Hub through practitioner engagement with Hub activities and resources, with these gains cascading down from practitioners to the young people they support. Two of the Hub’s activities that intended to work directly with young people – the social media campaigns in Further and Higher Education institutions and the Gambling Education Youth Fund – were not delivered as intended, in part because of the pandemic. Driving forward these activities may help to better bring about young people outcomes.
- The young people who do engage directly with the Hub, like young people on youth employability programmes attending the Hub’s gambling education workshops, show marked improvements in their awareness of youth gambling risks, and support. Where feasible, the Hub should increase its offer of workshops delivered directly to youth.
- It is recommended that GambleAware consider conducting research focused specifically on the Hub’s effect on young people that have engaged with the Hub. Qualitative interviews with this audience will be the most effective way to evaluate the improved ability for young people to critically assess risk and the extent to which young people are able to make informed decisions about gambling.



6 Conclusions and implications

Conclusions

The Scottish Gambling Education Hub ultimately aims to improve the capabilities and capacity of practitioners that work with young people in Scotland so they can provide gambling harm education and prevention support, and reduce the harm caused by problem gambling behaviors among young people.

Chapter 3 discussed the Hub's implementation of resources and the support it believes would contribute to target outcomes that in turn will achieve this vision. Despite the challenges posed by the COVID-19 pandemic, the Hub delivered all its intended activities and generally performed well in relation to the targets set at its inception. The online Toolkit and CPD training sessions continue to be the most developed, and the drama performances were viewed by stakeholders as the most innovative aspect of the Hub's offer. The Hub surpassed the targets set for CPD training sessions and was very close to achieving those set for theatrical performances and the Scottish Gambling Education Network (SGEN). However, it fell short of targets related to social media campaigns from Further and Higher Education Institutions and the Gambling Education Youth Fund.

Chapter 4 discussed the Hub's achievements with outcomes for practitioners these resources and support were expected to lead to. Based on the evaluation evidence, the Hub has achieved all short-term outcomes with practitioners, including improved acknowledgement that youth gambling is a problem in Scotland, recognition of the relevance of youth gambling education to their role, knowledge of youth gambling risks, ability to identify gambling risks, awareness of available support and confidence to signpost to support.

There was some evidence of increased signposting of young people and families to gambling support and embedding youth gambling education into their work (both mid-term outcomes). However, both these outcomes were limited by social distancing restrictions and service prioritisation due to the pandemic, and few interactions between practitioners and people at risk of or experiencing gambling harm. Furthermore, the performance of the Scottish Gambling Education Network (SGEN) indicated that the Hub is facilitating cross-sector collaboration around gambling education.

Chapter 5 discussed the Hub's achievements with outcomes for young people expected to come about once the practitioner outcomes were achieved. Based on the evaluation evidence, the Hub has helped improve young people's acknowledgement and understanding of gambling risks and available support. There was less evidence of their improved ability to critically assess risk and make more informed decisions around gambling. Both these outcomes are likely to take a while to emerge and are harder to evidence because the Hub mostly works directly with practitioners rather than young people.

Implications for the Hub's delivery

What changes to the Hub model should be made to improve practitioner and young people outcomes?

The evaluation findings highlight features of the model necessary for achieving practitioner and young people outcomes. These relate to the scope, content, delivery and engagement with the Hub's activities and resources.



Scope

The Hub's offer currently involves seven core resources and activities. The seven activities and resources are: Continuing Professional Development (CPD) training sessions, Gambling Education Toolkit, peer-based theatre performances, Scottish Gambling Education Network, policy guidance, support with online gambling harm messages for Further and Higher Education Institutions, and the Gambling Education Youth Fund (previously the Small Action Fund). Collectively, these seek to make it possible for every young person in Scotland to have access to gambling education and prevention opportunities. Practice-based CPD training sessions, the Gambling Education Toolkit and the theatrical performances were key mechanisms in achieving this, engaging diverse groups of practitioners (the latter targeting teachers specifically) and enabling knowledge outcomes for practitioners and young people to emerge.

Once practitioners engaged with these components, they were more likely to engage with other features of the Hub. The Scottish Gambling Education Network (SGEN) was important for raising the visibility and credibility of the Hub and, in turn, drawing practitioners and other key stakeholders to engage with gambling education and the other Hub activities. The Network also facilitated short-term outcomes for practitioners' knowledge and the mid-term outcome of youth services working together on gambling education policy.

Two Hub components had low take-up and despite this the Hub still achieved most of its intended outcomes: The Gambling Education Youth Fund (previously the Small Action Fund) and support with online gambling harm messages for Further and Higher Education Institutions .

Hub staff and stakeholders felt the online gambling harm messages strand of work was the least developed component of the Hub's work for two reasons. First, work related to social media campaigns in Further and Higher Education Institutions were put on hold because of the pandemic and associated lockdown which caused stakeholders in Further and Higher Education Institutions to prioritise other work. Second, strategic stakeholders recognised Further and Higher Education Institutions were particularly difficult to establish relationships with. Before the pandemic the Hub tended to approach stakeholders in pastoral or wellbeing roles at these institutions; the Hub may wish to consider engaging communication teams in the institutions alongside other contacts since these are the teams that will ultimately lead on any gambling education social media campaigns. Further research is needed with Further and Higher Education Institution stakeholders about the barriers to implementing social media campaigns and the opportunities for the Hub to overcome these.

Content

The content of the Hub's activities and resources was highly commended by stakeholders, practitioners, and young people throughout the evaluation. The topics included in Hub outputs and the pitch and tone in which they are covered was felt to be important in making gambling education accessible and relatable. The gaming offer was commended as an accessible means to relate to youth gambling by training participants, so keeping that and considering expanding it would be a good way to continue to reach diverse audiences. Fast Forward's efforts to refine materials continually to reflect the latest best practice, research and insight and accepted terminology has been successful in widening access to its work among its diverse audiences.

The evaluation identified two areas of content that Fast Forward should reflect on: incorporating more tailoring of content to those working with young people in a non-professional capacity, alongside existing content, and revisiting the use of the term 'brief intervention'. Though the Hub primarily targets professionals, it also attracts non-professional audiences, and its professional audiences often

work with adults. To support non-professional adults to engage with its activities and resources, Fast Forward may want to consider incorporating language a parent or carer might use with young people and include scenarios or examples in training and the Toolkit that speak to the circumstances of parents and carers.

Relatedly, the term 'brief intervention' was more familiar to practitioners working in healthcare and viewed as potentially confusing to other types of professionals and non-professionals. Minimising its use and instead using a less specialist term may be more appropriate. For example, 'conversations about preventing gambling harm'.

Delivery

The Hub intended to deliver its CPD sessions, SGEN quarterly meetings and theatrical performances fully in-person. These moved online in response to the social distancing restrictions because of the pandemic. We recommend Fast Forward retains a hybrid delivery model to leverage the strengths of both modes and help to maximise the number and diversity of practitioners engaging with the Hub. Digital channels carry the advantage of removing travel time and associated costs, while in-person channels carry the advantage of greater participation and collaboration.

Based on the qualitative research, there are mixed views on how accessible Hub resources are on mobile phones. If it has not done this yet, Fast Forward may wish to test its resources across different devices (e.g., Android and Apple mobiles; different browsers and operating systems) to check how user friendly the materials are; it may suggest need for reformatting or restructuring some resources. Given the increased move of services to online delivery during the pandemic, we recommend any new resources launched by English and Welsh hubs have multi-device accessibility. We recommend downloadable resources have offline accessibility.

A key feature of the Hub model is its adaptability and on-going innovation in the face of changing circumstances and needs. That agility is supported by the terms of Fast Forward's grant agreement with GambleAware and the collaborative spirit of that working relationship, and the team involved in delivering the Hub. The team includes people with lived experience of gambling and gambling harm and youth trainers who bring knowledge of existing evidence and good practice around harm reduction and substance misuse, and relationships with partners.

Engagement

The topics the Hub features in its activities and resources were well received by practitioners and resonated well with their needs. Yet often practitioners were less aware of the Hub's full suite of activities and resources, beyond the CPD training sessions and the Gambling Education Toolkit. We recommend Fast Forward builds on its successes engaging practitioners and develop the way it communicates its fuller offer to practitioners who have engaged with one or more of its offerings.

The evaluation identified opportunities for the Hub to engage better with specific audiences in its resources, including:

- Engage non-professional audiences, like parents and carers, who are involved in the lives of young people and thus also likely to support young people's knowledge of gambling and gambling harms. For example, this may be through helping professionals who work with parents and carers to include gambling education in their policies, and supporting the professionals who work with parents and carers to be aware of gambling and gambling harms among young people, for example through their staff induction;



- Engage with policy stakeholders more through personal stories, referencing local area and schools, and reducing harm and cost savings; and
- Engage communication teams in universities alongside other contacts since these are the teams that will ultimately lead on any gambling education social media campaigns.

Implications for the Hub's future evaluation

How can monitoring and evaluation of the Hub be improved?

The nature of the Hub's preventative and multi-faceted design bring with it inevitable challenges regarding the monitoring and evaluation of its work, particularly due to the absence of population-wide benchmarks of existing levels of gambling and gambling harms amongst young people. However, there are some considerations for improving how the Hub monitors and evaluates its work.

Understanding the effect of the Hub on young people

We recommend future research to explore whether and how the Hub's seven activities directly and indirectly impact young people, capturing young people's experiences first-hand. This could be focussed on the theatrical performances, Youth Education Fund and social media messages; all Hub activities directly involving young people that this evaluation was unable to go into more detail on. These all have high potential for impact, and of transferability to other contexts.

Focus and prioritise outcomes

We recommend Fast Forward continues to tie their ongoing monitoring and evaluation work back to the programme Logic Model; this is a good way to make sure it is not spending time collecting information it does not need, or that is not as good as other intelligence at explaining the Hub's impact journey. Practically, this means ensuring there are KPIs attached to all activities and outcomes in the Logic Model. For example, adding one for the Hub's advice and advocacy work. This way the KPIs will be specific and clear, and Fast Forward will know what targets have been achieved, are on track to be achieved or may fall short of achieving. There is also room to introduce new outcomes. For example, one of the activities of the Hub is the provision of advice and advocacy to organisations and individuals. At present there is not a corresponding outcome for this activity and so it is not possible to monitor and evaluate progress in this regard.

Maintain focussed and pragmatic evaluation tools

In early 2021, IFF Research helped Fast Forward to refine the evaluation mechanisms in place, condensing around 30 surveys into six surveys with a greater emphasis on outcomes. It is recommended that Fast Forward maintain streamlined evaluation mechanisms and avoid the introduction of additional surveys where possible. A small set of evaluation tools helps to provide continuity in data collection, which facilitates an improved ability to monitor and evaluate the Hub over time.

There is potentially room to take the streamlining of evaluation mechanisms further. The longitudinal approach to surveys (e.g., Needs Assessment, Post-training, and Follow-up) is still advocated. However, the existing suite of practitioner surveys could perhaps be boiled down into one universal strand. For example, removing the gaming and gambling specific surveys and incorporating the activity into the more general CPD training survey. One universal strand of surveys would provide a more robust base size for analysis and would likely reduce burden for participants and Fast Forward.



Maximising young people responses

To maximise the engagement of young people with evaluation surveys it is recommended that Fast Forward look to introduce incentives. Incentives can take many forms, but from experience IFF Research would recommend gift vouchers.

Fast Forward should also consider opportunities for the 'gamification' of the evaluation mechanisms aimed at young people. Possible ways of achieving this include the introduction of more interactive tasks (e.g., drag and drop activities and sliding scales), more visual elements (e.g., pictures and videos), participant rewards (e.g., points and achievements upon completion) and repackaging surveys as quizzes.

What changes are needed to the Logic Model?

To ensure the evaluation measured the right things in the right way, IFF Research developed a Logic Model for the Hub, building on work Fast Forward had undertaken. The aim of the Logic Model was to provide a simplification of the relationship between the delivery of the Hub and the assumptions that underpin its operation, the resources committed and the expected results for practitioners, and young people.

Reflecting upon the findings from this evaluation, the Logic Model developed at the outset broadly remains fit for purpose. However, there are some refinements recommended to better reflect how the Hub operates in practice and to improve the chances of achieving outcomes for practitioners and young people.

Assumptions

One of the assumptions of the original Logic Model was that *'all young people in Scotland can be reached and supported through health, education and employability practitioners'*. However, in reality, individual practitioners do not always have consistent direct contact with young people. Rather, it is the organisations that practitioners work for that have consistent direct contact. Reaching 'all' young people, while aspirational, as a stretch. It is therefore suggested that this assumption is refined slightly to *'most young people in Scotland can be reached and supported through health, education and employability organisations'*. This also helps, conceptually, to shift the focus from individual practitioners and onto organisations, highlighting the responsibility of ensuring young people are gambling safely is not solely the responsibility of a practitioner.

Another assumption which requires refining is: *'Practitioners have the skills/capacity needed to apply information and resources in their work'*. While practitioners self-reported the knowledge and skills necessary to provide gambling education, many faced challenges in terms of capacity. Practitioners who engaged with the Hub before the COVID-19 pandemic often had limited capacity to engage with all activities and resources, and to put them into practice, because of competing priorities and pressures on their time. This was exacerbated by the pandemic and ensuing lockdowns, when services were closed, running at reduced volume, and having less or no face-to-face contact with young people. It is therefore recommended that this assumption is split into two: *'Practitioners have the skills needed to apply information and resources in their work'* and *'Practitioners have the capacity to deliver gambling education around other responsibilities'*. This will highlight the need for Fast Forward to pay equal attention to helping practitioners to maximise their capacity to engage with their resources, as well as aiming to improve their knowledge and skills.

Activities and outputs

In considering what aspects of the Hub's design are essential for the successful achievement of its outcomes, it is necessary to explore whether the current set of activities and outputs included in the Logic Model are necessary and appropriate. Above we noted the importance of four of the seven components of the Hub's provision. Thus, we recommend reorganising the activities to present those four first in the model, indicating their importance.

It is also recommended that a new output is added to the Logic Model: *'Workshops/sessions with unemployed young people'*. This is an existing output of the Hub but is not included in the current Logic Model.

Outcomes

It is recommended that two short-term practitioner outcomes included in the original Logic Model are re-phrased and, in one instance, split into two. The first is the short-term outcome for practitioners to develop *'improved awareness of available support and brief interventions and how to access them'*. The evaluation found that the term brief interventions was not widely understood and so it is suggested that the use of this term is reconsidered. Furthermore, it is felt that the outcome currently conflates two slightly different concepts. It is therefore recommended that the outcome be changed to 1) *'Improved awareness of available support and how to access it'* and 2) *'Improved confidence in having conversations about an issue related to gambling'*.

The other short-term practitioner outcome which requires refinement is: *'Health, education and employability services work together on gambling education policy'*. The inclusion of the term policy at this outcome has caused the intended meaning to be lost. Rather than practitioner organisations working together around gambling policy, the outcome is meant to relate to collaborative work between organisations on gambling education. It is therefore recommended that the outcome is re-worded to: *'Health, education and employability services collaborate to include gambling education in their work'*.

It is recommended that a new output be added the Logic Model to reflect existing activities. One of the activities of the Hub is the provision of gambling education advice and advocacy to organisations and individuals (i.e., non-professionals). At present there are no corresponding outputs for this activity. It is recommended that a new output is added to the Logic Model: *'Advice and advocacy delivered to X organisations and individuals'*.

Summary of changes to the Logic Model:

- Refine the assumption 'all young people in Scotland can be reached and supported through health, education and employability practitioners' to 'most young people in Scotland can be reached and supported through health, education and employability organisations'.
- The assumption 'Practitioners have the skills/capacity needed to apply information and resources in their work' is refined and divided into the following two assumptions: 'Practitioners have the skills needed to apply information and resources in their work' and 'Practitioners have the capacity to deliver gambling education around other responsibilities'.
- Re-order the Hub activities, in order of importance, and drawing focus on the first four main activities.



- Add a new output to the Logic Model to reflect it as an existing output: 'Workshops/sessions with unemployed young people'.
- Change the existing short-term outcome for practitioners 'Improved awareness of available support and brief interventions and how to access them' to two separate outcomes as follows: 1) 'Improved awareness of available support and how to access it' and 2) 'Improved confidence in having conversations about an issue related to gambling'.
- Re-word short-term practitioner outcome from 'Health, education and employability services work together on gambling education policy' to 'Health, education and employability services collaborate to include gambling education in their work'.
- New output added so that the existing outcome of the provision of gambling education advice and advocacy to organisations and individuals can be measured.

An updated Logic Model is presented below. Any future changes to the Hub model should be reflected in a revised logic model.

Figure 6.1 Updated Scottish Gambling Education Hub Logic Model

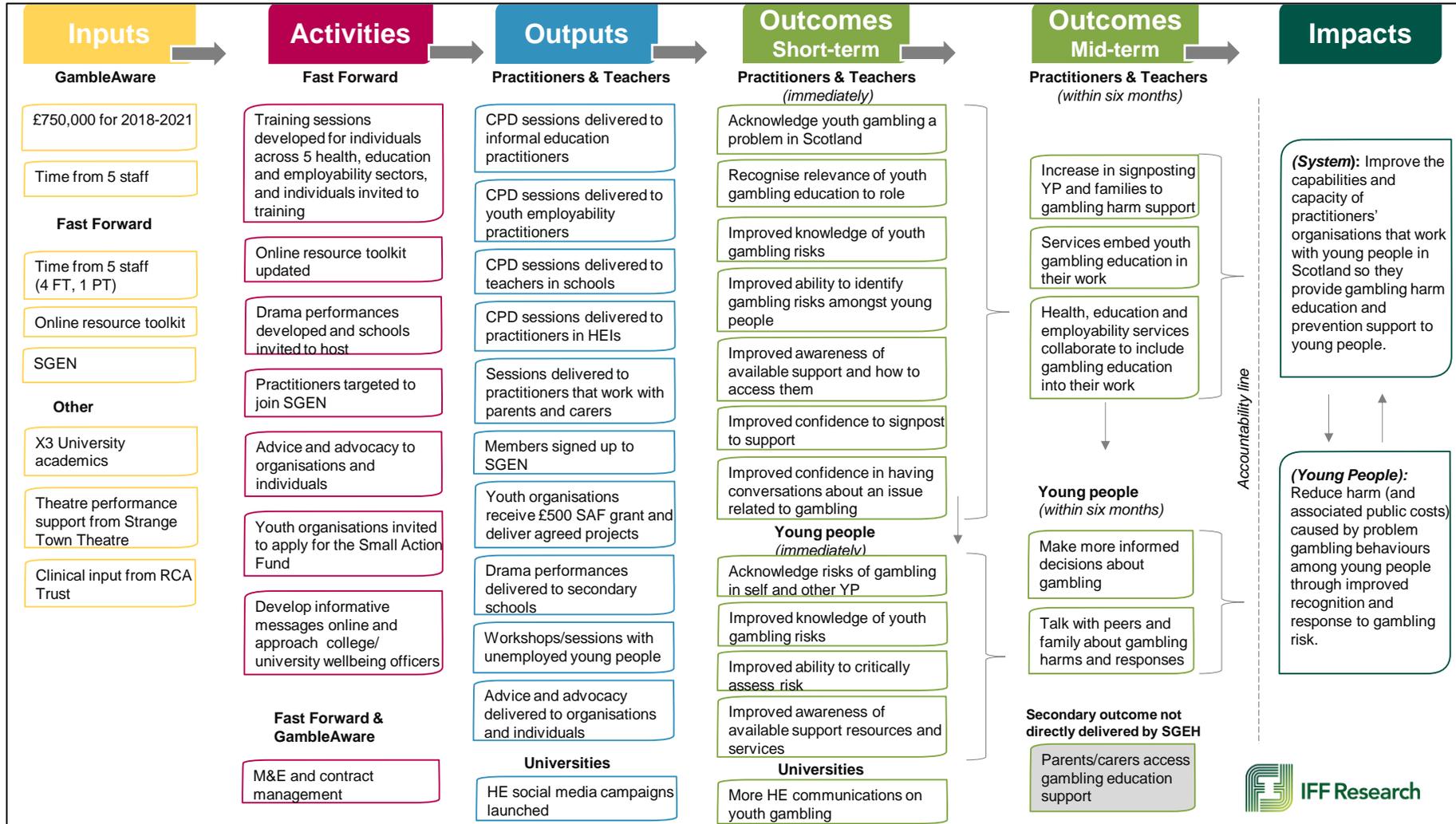


Figure 6.2 Updated Logic Model: assumptions



7 Appendices

Appendix A: Achieved sample for qualitative interviews with practitioners, by sector and Local Authority

	Formal education	Informal education and youth work	Services supporting parents and carers	Training and employability services	Total
Aberdeen City		1			1
City of Edinburgh		3			3
Dumfries and Galloway		1			1
Fife		1	1		2
Glasgow City	1	3		1	5
Highland		1			1
Moray	1	1		1	3
North Lanarkshire				1	1
Stirling		1	1		2
West Lothian				1	1
Total	2	12	2	4	20

Appendix B: Achieved sample for qualitative interviews with stakeholders, by research phase and organisation type

	Scoping Interviews	Follow-up Interviews	Total
Fast Forward	4	4	8
GambleAware	3	2	5
Local / National Government	2	1	3
Informal education and youth work	1	0	1
Formal education	1	1	2
Treatment services	0	1	1
Total	11	9	20

Appendix C: Achieved sample for quantitative surveys

Survey	Sample Size
<u>Practitioner Surveys</u>	<u>Total number of responses</u>
Gambling Needs Assessment	377
Gambling Post Training	349
Gambling 6-Month Follow-Up	127
Gaming Needs Assessment	84
Gaming Post Training	91
<u>Young People Surveys</u>	<u>Total number of responses</u>
Young People Post Training	129
Young People 3-Month Follow-Up	8



A Interview purpose and principles

- A1 This guide is for use with x8 one-to-one and paired depth interviews with strategic and operational SGEH stakeholders. Interviews will take place between 2nd – 24th July 2020. Insight from these discussions will provide contextual information about the design and delivery of the Hub to inform the programme logic model and evaluation design, and early impressions of the added value of the Hub.
- A2 The research objectives and questions relevant for this stage of the evaluation are:

N°	Evaluation objectives	Research questions
1	Provide formative and summative feedback on the implementation of the Hub and its seven activities (Process evaluation)	<ul style="list-style-type: none"> a) How was the Hub designed and set-up, including remit, governance, structure, partnership working and performance monitoring? b) How are the Hub’s seven activities managed and organised? c) What changes have been made to Hub delivery since 1 Nov 2018, and the reasons for this?
2	Explore the added value of the Hub (Impact evaluation) – <i>to a less extent in these interviews</i>	<ul style="list-style-type: none"> d) How have stakeholders and activity participants, including young people, experienced the seven Hub activities? e) What features of the Hub and its activities add value or undermine the Hub’s ability to achieve its seven outcomes? f) What do stakeholders and activity participants, including young people, think about the effect the Hub and its activities has?

- A3 This guide is intended to be used with a mix of individuals with varying characteristics and backgrounds. As such, it does not contain pre-set questions, but rather lists the key themes and sub-themes to be explored with participants in each interview. Words or short phrases are instead used to indicate the study issues and allows the researcher to determine the formulation of questions and how to follow up. This encourages the researcher to be responsive to the situation and most crucially to the terms, concepts, language and behaviours used by the participants.
- A4 It does not include follow-up questions like ‘why’, ‘when’, ‘how’, etc. as participants’ contributions will be fully explored in response to what they tell us throughout in order to understand how and why views and experiences have arisen. The order in which issues are addressed and the amount of time spent on different themes will vary between interviews but the key areas for discussion are the same.



- A5 Questioning and probing will be framed to ensure we understand participants' situations as they view them. Researchers will adapt the approach, as much as possible, to suit the needs of each participant. The prompts provided are not exhaustive, but rather indicate the types of content we would expect to be covered – this may vary across participants with different characteristics.

- A6 The themes in this guide are intended to be covered across the stakeholders taking part in this stage, rather than in detail in every interview.



B Researcher introduction (c.3 mins)

- B1 **Thanks & Introduction:** Introduce yourself and IFF Research – independent research agency
- B2 **About the client:** GambleAware, funding Fast Forward to deliver the Hub
- B3 **About the research and purpose of the interview:** Commissioned to identify learnings from the implementation of the Hub, and the added value of the Hub. Interview will explore the design and delivery of the Hub from their perspective, to inform the evaluation design and insights.
- B4 **Anonymity and confidentiality:** Please be assured that anything you say during the interview will be treated in the strictest confidence and results will be anonymised in any reporting so that they cannot be linked back to you.
- B5 **How their information will be used:** IFF Research operates under the strict guidelines of the Market Research Society's Code of Conduct. Only the core members of the research team will have access to any of your details. We will not pass any of your personal details on to the client or any other companies and all the information we collect will be kept in the strictest confidence and used for research purposes only.
- B6 **Right to data:** You have the right to have a copy of your data, change your data, or withdraw from the research at any point. You can find out more information about your rights under the new data protection regulations by going to iffresearch.com/gdpr. We can also email this to you if you'd like.
- B7 **If multiple individuals involved in the discussion:** Ask individuals to respect each other's confidence and not to share outside this discussion, what individuals contributed within it.
- B8 **Reassurances:** No right or wrong answers - we are simply asking for people's views and opinions; you may not know or have a view on something – just let me know and we can move on; comfort – let me know if you'd like a break at any time.
- B9 **Reassurances to Fast Forward:** We want to help them learn what is going well and opportunities for development and we will work together across the evaluation to answer our evaluation questions with minimal burden to them.
- B10 **Duration:** 45 - 60 minutes
- B11 **Reminder about audio recording:** the discussion will be recorded so that we can accurately capture their views, and so researchers can listen back when analysing the data. The recorder is encrypted and only the research team will have access to the recordings.
- B12 **Confirm happy to proceed** on this basis of recording.
- B13 **Any questions/concerns?**
- B14 **Start recording:** acknowledge consent for being recorded



C Participant introduction (c.5 mins)

ASK BOTH

C1 Roles and responsibilities

- About their **role**, incl. responsibilities
- **Role/responsibilities** in relation to **SGEH**

D Understanding of SGEH (c.15 mins)

ASK BOTH

D1 Understanding of SGEH

- What is it **trying to achieve and with who?**
- What is **being done to achieve that**. *Explore each element on the Hub, as relevant to the participant.*
 - CPD training
 - Consultation, resources and policy guidance
 - The Scottish Gambling Education Network, or SGEN
 - education toolkit and advice booklets
 - support with online gambling harm messages for Further and Higher Education Institutions
 - the Small Action Fund
 - delivery of theatrical performances to secondary school pupils
- What do you think is particularly **new or innovative about SGEH?**
- How SGEH **fits with existing youth gambling education provision** in Scotland e.g., fills a gap, increases delivery capacity etc. *Explore in full.*

ASK Jane

- **Overall, how transferable is SGEH to the Welsh/English context?**
 - Features of SGEH more/less transferable to Wales and England
 - Features of the Scottish context influencing SGEH delivery or impact e.g., policy, education system, public will, stakeholder's buy-in

E Monitoring impacts and learnings (c.10 - 15 mins)

ASK both

E1 Impact of SGEH

- **Expected benefits of SGEH**
 - Immediate benefits and expected timescales
 - Longer term benefits and expected timescales
 - For whom
 - Reasons
- Whether any **impacts identified** to date



- What and for whom, Whether and how this is a result of SGEH
- Evidence for their views – *prompt for specific examples*

ASK both

- Approach to **monitoring impacts and learnings**
 - Priority measures
 - Additional measures
 - Method for tracking and reviewing impacts and learnings
 - Successes with methods
 - Challenges with methods
 - Lessons learned

F Delivery to date of SGEH (c. 5 - 15 mins)

ASK BOTH

F1 Working in partnership

- How is SGEH **governed**
- Who has **ultimate accountability**?
- Who are the **main partners and their role**?
 - any additional partners

ASK BOTH

- **Experience of working with SGEH/partners** to date
 - Successes
 - Challenges
 - Lessons learned (strategic and operational)

ASK Both

F2 Current operations of SGEH

- **Overview of delivery** to date
 - Successes
 - Challenges
- Any **changes to delivery** since they began operations
 - Reasons
 - How changes are progressing
- **Lessons learned**



G Final comments and wrap-up (c. 2 - 5 mins)

G1 What they **want from the evaluation** – to know, learn, prove etc.

G2 **Final comments**

G3 Check if they are happy to **take part in another discussion** in Summer 2021

G4 Thanks, and reminder of **confidentiality and anonymity** and that they can **get in touch** if they think of anything else that is important to the Hub's learnings



Needs assessment

S Your details

ASK ALL ONLINE

Welcome to Fast Forward’s needs assessment ahead of the gambling education training.

The needs assessment will take just a few minutes to complete and will help us to assess the needs of those attending the session so that we can tailor the session appropriately.

Your responses will be treated in the strictest confidence. Your answers will not be reported in any way that would allow you to be identified unless you give us explicit permission to do so.

Under data protection law you have the right to have a copy of your data, change your data, or withdraw from the research at any point. If you’d like to do this, or find out more, you can contact [REDACTED]

Please select ‘Next’ if you are happy to continue with the survey on this basis.

INSERT ‘NEXT’ BUTTON HERE

ASK ALL

S1 **Please input your details in the boxes below**

Name	WRITE IN
Surname	WRITE IN
Job title	WRITE IN
Organisation name	WRITE IN
Organisation postcode	WRITE IN
Local Authority your organisation is based in	Aberdeen City
	Aberdeenshire
	Angus
	Argyll and Bute
	Clackmannanshire
	Dumfries and Galloway
	Dundee
	East Ayrshire
	East Lothian
	Fife
Highland	
Etc.	
Date of session you signed up for	WRITE IN
Email address	WRITE IN
Phone number	WRITE IN



ASK ALL

S2 **So that we can help you to get the most out of the session, please tell us about any additional support needs you have.**

WRITE IN		
No additional support needs	1	

ASK ALL

S3 **What are your reasons for coming on the training?**

For example, general interest, specific future plans, ongoing Continuing Professional Development (CPD)

WRITE IN

ASK ALL

S4 **What are your key objectives for the day?**

For example, gaining new knowledge/information, opportunity for discussion with other practitioners, seeing/using new resources etc.

WRITE IN

ASK ALL

S5 **How did you hear about this session?**

WRITE IN

ASK ALL

S6 **Does your organisation have a referral system in place for young people who experience gambling harms?**

PLEASE SELECT ONE OPTION ONLY

Yes	1	
No	2	
Don't know	3	

Thank you for your time.



Practitioner post-training questionnaire

T Your details

ASK ALL ONLINE

Welcome to Fast Forward’s gambling education training survey. By taking part you help us to understand what’s going well, and what’s not, so we can take steps to better support you and others like you.

We are really interested in hearing what you have to say, and we would appreciate if you could take part. However, this survey is voluntary which means that it is up to you if you want to take part.

The survey will take around 8 minutes to complete.

Your responses will be treated in the strictest confidence. Your answers will not be reported in any way that would allow you to be identified unless you give us explicit permission to do so.

This survey is part of a wider evaluation that IFF Research (an independent research agency) is undertaking on behalf of Fast Forward. Anonymised data will be securely shared with IFF Research to inform their evaluation and a report on the findings from the evaluation will be published on our website in late 2021.

Under data protection law you have the right to have a copy of your data, change your data, or withdraw from the research at any point. If you’d like to do this, or find out more, you can contact REDACTED.

Please select ‘Next’ if you are happy to continue with the survey on this basis.

INSERT ‘NEXT’ BUTTON HERE

ASK ALL

S1 Please input your details in the boxes below

Name	WRITE IN
Surname	WRITE IN
Job title	WRITE IN
Organisation name	WRITE IN
Organisation postcode	WRITE IN
Local Authority your organisation is based in	Aberdeen City
	Aberdeenshire
	Angus
	Argyll and Bute
	Clackmannanshire
	Dumfries and Galloway
	Dundee
	East Ayrshire



	East Lothian
	Fife
	Highland
	Etc.
Date of session attended	WRITE IN

ASK ALL

S2 How was the training session that you attended delivered?

PLEASE SELECT ONE OPTION ONLY

In-person	1	
Online	2	

ASK ALL

S3 What type of organisation do you represent?

PLEASE SELECT ONE OPTION ONLY

A school	1	
A further education college	2	
A university or other higher education provider	3	
A youth employability organisation	4	
A health organisation that works with children and young people (including the NHS)	5	
An organisation that provides social care to children and young people	6	
A youth justice and criminal justice organisation, or the police	7	
Any other organisation that provides support to children and young people	8	
An organisation that supports parents and carers	9	
Other (please specify)	10	



SECTOR DUMMY VARIABLE, DO NOT ASK

School	1	S3=1
Further education	2	S3=2 OR S3=3
Youth employability	3	S3=4
Informal education	4	S3=5-8
Parents and carers	5	S3=9
Unknown	6	S3=10

S4 **How often have you provided support on gambling or gambling harms to (*Text fill: young people aged 11-25 or parents and carers*) in the last 12 months? By support we mean provided gambling education and signposted to gambling support services.**

PLEASE SELECT ONE OPTION ONLY

Never	1	
Once	2	
2-5 times	3	
More than 5 times	4	
Not applicable to me	5	

A TRAINING DELIVERY

ASK ALL

A1 **How would you rate the usefulness of the training to your work?**

PLEASE SELECT ONE OPTION ONLY

Not at all useful	1	
Not very useful	2	
Fairly useful	3	
Very useful	4	
Don't know	5	

ASK ALL

A2 **To what extent do you agree or disagree that...**

PLEASE SELECT ONE OPTION ONLY FOR EACH (RANDOMISE THE ORDER THESE SHOW UP)

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree	Don't Know
_1 the information in the session was clearly presented.	1	2	3	4	5	6
_2 the facilitator was well prepared and familiar with the materials.	1	2	3	4	5	6
_3 the type of teaching methods supported my learning (e.g., facts, group activities)	1	2	3	4	5	6

ASK ALL

A3 **Would you prefer there to be more or less of the following elements of the session...**

PLEASE SELECT ONE OPTION ONLY FOR EACH

	Significantly less	Less	The amount was about right	More	Significantly more	Don't Know
_1 Whole group discussion	1	2	3	4	5	6
_2 Presentation of information	1	2	3	4	5	6
_3 Small group activities	1	2	3	4	5	6

ASK ALL

A4 **Do you have any other feedback on ways that you would change the content or delivery of the session to make them more relevant to you?**

WRITE IN		
Nothing to add	1	

B TRAINING IMPACT

ASK ALL

- B1 **To what extent do you agree or disagree that, as a result of the training, you are better equipped to deliver gambling education and prevention activities with the audiences you work with?**

PLEASE SELECT ONE OPTION ONLY

Strongly agree	1	
Agree	2	
Neither agree nor disagree	3	
Disagree	4	
Strongly disagree	5	
Don't know	6	

ASK ALL

- B2 **Thinking back to BEFORE you attended the training, how would rate your level of agreement with the following statements...**

PLEASE SELECT ONE OPTION ONLY FOR EACH (RANDOMISE THE ORDER THESE SHOW UP)

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree	Don't know
_1 Youth gambling is relevant to my work.	1	2	3	4	5	6
_2 Children and young people are an at-risk group for gambling harms.	1	2	3	4	5	6
_3 Gambling harms among children and young people is an issue in Scotland.	1	2	3	4	5	6
_4 I am confident that I can identify and recognise the signs of gambling harms.	1	2	3	4	5	6
_5 I am confident in signposting young people to gambling support services if they required them.	1	2	3	4	5	6
_6 I understand how gaming can lead to gambling harms.	1	2	3	4	5	6

ASK ALL

- B3 **As a result of attending the training, how would rate your level of agreement with the following statements...?**

PLEASE SELECT ONE OPTION ONLY FOR EACH (RANDOMISE THE ORDER THESE SHOW UP)

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree	Don't know
_1 Youth gambling is relevant to my work.	1	2	3	4	5	6
_2 Children and young people are an at-risk group for gambling harms.	1	2	3	4	5	6
_3 Gambling harms among children and young people is an issue in Scotland.	1	2	3	4	5	6
_4 I am confident that I can identify and recognise the signs of gambling harms.	1	2	3	4	5	6
_5 I am confident in signposting young people to gambling support services if they required them.	1	2	3	4	5	6
_6 I understand how gaming can lead to gambling harms.	1	2	3	4	5	6

ASK ALL

B4 After this session, which of the following are the top three practices that you are most likely to take forward in your work?

PLEASE SELECT UP TO THREE PRACTICES (RANDOMISE THE ORDER THAT THEY APPEAR)

Speak about gambling related harm with a young person or parent/carer	1	
Signpost a student, young person or parent/carer to gambling support services	2	
Contribute to a gambling awareness social media campaign	3	
Use the Gambling Education Toolkit	4	
Share the training with colleagues	5	
Incorporate gambling education into your existing programmes with children and young people	6	
Create a new course/programme about gambling education for children and young people	7	
[IF IN SCHOOL SECTOR (SECTORDUM=1): Incorporate gambling into the curriculum (e.g., PSE lessons)]	8	
Other (please specify)	9	
I am not likely to take any of these practices forwards in my work.	10	EXCLUSIVE CODE

ASK ALL

B5 Would you like to receive future information about the Gambling Education Hub? This would include receiving our e-newsletter, information about the online Toolkit and other training opportunities.

PLEASE SELECT ONE OPTION ONLY

Yes	1	
No	2	

ASK ALL

B6 We at Fast Forward would like to know the longer-term impact of our work. We would like to get in touch in around six months to ask you about whether and how you are using what you learned in the session in your work. Would you be willing for us to contact you via email to invite you to take part in a short, follow-up survey?

PLEASE SELECT ONE OPTION ONLY

Yes	1	
No	2	

B7 Our research partner, IFF Research, would like to explore your experiences of accessing support from the Gambling Education Hub in more detail, in a short telephone discussion. Would you be willing for us to contact you via email to invite you to take part in a short telephone discussion?

PLEASE SELECT ONE OPTION ONLY

Yes	1	
No	2	

ASK IF AGREED TO BE RE-CONTACTED (B5=1 OR B6=1 OR B7=1)

B8 [IF B6=1 OR B7=1: Thank you for agreeing to participate in our follow-up research.] In order to ensure that we are able to contact you, please could you provide the best email address [IF B6=1 OR B7=1: and phone number] to contact you on.

Email address	WRITE IN	
[IF B6=1 or B7=1: Phone number]	WRITE IN	
I do not agree to provide my personal contact details	1	

ASK ALL

B9 Do you have any further comments?

WRITE IN		
Nothing to add	1	

Thank you for your time.

“

IFF Research illuminates the world for organisations businesses and individuals helping them to make better-informed decisions.”

Our Values:

1. Being human first:

Whether employer or employee, client or collaborator, we are all humans first and foremost. Recognising this essential humanity is central to how we conduct our business, and how we lead our lives. We respect and accommodate each individual's way of thinking, working and communicating, mindful of the fact that each has their own story and means of telling it.

2. Impartiality and independence:

IFF is a research-led organisation which believes in letting the evidence do the talking. We don't undertake projects with a preconception of what "the answer" is, and we don't hide from the truths that research reveals. We are independent, in the research we conduct, of political flavour or dogma. We are open-minded, imaginative and intellectually rigorous.

3. Making a difference:

At IFF, we want to make a difference to the clients we work with, and we work with clients who share our ambition for positive change. We expect all IFF staff to take personal responsibility for everything they do at work, which should always be the best they can deliver.



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