

Improving Outcomes Fund

Interim Report

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Contents

Improving Outcomes Fund: Interim Report	2
1. Executive summary	3
2. Introduction	5
2.1 Introduction to Improving Outcomes Fund (IOF).....	5
2.2 Summary of IOF-funded projects – focus and operation	6
2.3 Grantee activities.....	6
2.4 IOF-funded projects locations	8
2.5 Evaluation and learning partnership with NPC.....	9
3. Methodology.....	10
3.1. Focus Groups	11
3.2. April learning event.....	12
3.3. Monitoring report forms	12
4. Findings.....	14
4.1. What drives people towards gambling, and what are the repercussions?	14
4.2. What barriers are preventing people from seeking support?	19
4.3. How are organisations tailoring their support to address these?	24
6. Conclusion	28
Implications.....	29
Looking ahead	31

1. Executive summary

The Improving Outcomes Fund (IOF) was launched to reduce gambling harm inequalities among women and minority ethnic and religious communities across Great Britain. The fund awarded grants to 24 projects covering the period April 2024 to March 2026. IOF-funded projects focus on groups who are more likely to face gambling harms and typically experience barriers in accessing support, often due to stigma, discrimination and mistrust. Many funded projects are led by people with lived experience or involve people with lived experience in the development of the project. As a result, projects are tailored to the unique needs of women and minority communities. New Philanthropy Capital (NPC), who were commissioned by GambleAware as the learning and evaluation partner for this fund, conducted focus groups and learning workshops with funded projects and analysed monitoring reports to gather insights on how funded projects are community-led and shaping their practice in direct response to communities' experiences of gambling harm.

This report represents a synthesis of our findings to date and draws together insights on:

- The drivers of gambling harms for women and minority communities
- The barriers these groups face in seeking support
- How IOF-funded projects are responding with tailored approaches
- How grantee organisations are working within the current gambling harm system to drive change and broaden approaches to working with people from different communities

Overall, the findings present a complex picture of gambling harms for women and minority communities, one that is tied up in stigma and feelings of shame. In terms of what drives people to engage in gambling we have found the main drivers for women and minority communities to be:

- Social factors such as cultural and social isolation
- Financial factors such as financial hardship
- Gambling as a coping mechanism and a way to escape cultural/gendered pressures (e.g. of maintaining family units, responsibility for childcare), and experiences of discrimination
- With the above being enabled by the ease of access to gambling in modern society e.g. in late night betting shops or online gambling)

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

- Stigma and shame
- Mistrust in services
- Lack of awareness about gambling related harms
- Lack of culturally appropriate treatment and support services
- Lack of awareness or buy-in to the need for support in professionals, e.g. healthcare professionals

We have also identified successful approaches and adaptations IOF-funded projects are undertaking to address and overcome these barriers to receiving support. Based on these, we recommend future initiatives consider the following:

- Embedding gambling support into broader topics (e.g. running sessions on debt and financial advice, and building in themes around gambling harms)
- Creating accessible tools for discreet and informal engagement (e.g. QR codes on leaflets)
- Co-creating culturally and gender sensitive approaches to support with communities
- Building trust through involving members of communities and people with lived experience (e.g. community champions models)
- Bringing support to communities on the ground and in local spaces (e.g. GP surgeries, religious buildings such as mosques and churches).

The IOF-funded projects have invested thoroughly in building relationships with communities and have a deep understanding of the challenges facing the communities they work with. To effectively break down the barriers for people to access support for gambling-related harms, organisations should be trusted and empowered to take forward approaches that are most likely to work in the communities they know best. This is important learning for the gambling support system at large, and NPC will be building on this in our subsequent engagements with IOF-funded projects to explore more about how funded projects have tailored their approaches and how the wider system can learn from and adapt to align with the work of IOF-funded projects.

The interim findings highlight the importance of culturally responsive and community-led approaches in addressing gambling harms among women and minority communities, with services that are trauma-informed, trust-based, and integrated into wider social and public health issues.

There is an opportunity to further amplify the impact of this work by showcasing the programme's funding and evaluation model, which has focussed on centring lived experience and has gained sector-wide attention. For future commissioners, the findings point to the need to embed culturally tailored interventions which help to reduce the stigma around gambling. The findings also highlight the need for healthcare professionals to include gambling harms screening within routine care. By integrating gambling harms into broader strategies on health inequalities, cost-of-living, and safeguarding, future commissioners can ensure that there is sustainable funding reaching the gambling harms sector. By sharing these learnings widely, GambleAware can help to inform future commissioning practices across both the gambling harms sector and the wider social support system.

2. Introduction

2.1 Introduction to Improving Outcomes Fund (IOF)

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

The £4.3 million funding programme was developed in response to three key pieces of GambleAware's research¹. Their research with minority groups demonstrated they experience more gambling harm and have low awareness and uptake of services which address gambling harm. Their research into women's gambling found that women experience gambling in different ways from men, specifically in relation to the types of gambling they participate in and their motivations for doing so.

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

Key findings from GambleAware:

- Minority groups are less likely to gamble, but experience more gambling harms, than White British people.
- Experiences of racism and discrimination are linked to higher gambling harm and stigma around gambling is stronger in minority communities.
- There is low awareness and use of gambling support services amongst minority groups, with stigma being a key barrier to accessing help.
- Women's participation in gambling and experiencing a gambling disorder is increasing more quickly than men
- Womens engagement in gambling is closely linked with positive, nostalgic experiences of gambling in childhood and social interactions in adulthood.

Grants worth between £150,000 – £300,000 were awarded to 24 organisations in 2024, operating across Great Britain, and grants lasted for up to 24 months (April 2024 – March 2026). Following the initial grant-making process, a smaller development award of £75,000 was awarded to an additional organisation over a 9-month period. The funded projects are categorised by focus and operation, activity type, and geography (see figure 3 below).

2.2 Summary of IOF-funded projects – focus and operation

GambleAware's [research](#) highlighted significant disparities in accessing support for gambling harms among women and people from minority religious and ethnic communities, and yet experiences of systemic discrimination are linked to higher gambling harm. These groups face unique structural barriers that hinder their awareness of and access to appropriate help. The findings informed the scope and focus of the IOF to be on women and minority communities and emphasised the need for targeted and innovative interventions to address these issues and promote equitable support systems. A key part of this is the lived experience element of many of the funded projects: several funded projects have employed staff with their own direct experiences of gambling harms, and at least two funded projects were founded by people with direct lived experience of gambling harms.

2.3 Grantee activities

IOF-funded projects share a common goal, to reduce the inequalities which exist relating to gambling harms for women and minority groups, but do this through a diverse range of activities.

Funded projects have shared that the biggest barriers to support for minority communities are stigma and lack of awareness. A lack of trust in external organisations, specifically health care services, leads to low awareness and use of gambling-specific support, and stigma prevents individuals from seeking informal support, making minority communities less likely to discuss gambling concerns with friends and family. Most projects aim to raise awareness of gambling harms, often targeting wider communities as well as those directly affected by gambling harms, alongside professionals providing other aspects of support, such as health or financial, or community leaders who can enable referrals.

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

Support delivery also varies across IOF-funded projects: several projects deliver training for professionals, e.g. healthcare professionals, on identifying gambling harms, others offer one-to-one support for people experiencing gambling harms through counselling, or group counselling for people experiencing gambling harms or affected others. Several funded projects also use other activities such as Pilates or wellness sessions as vehicles to build trust and relationships with people as a basis for engaging with gambling harm support. Some projects use a combination of approaches. These approaches are explored in more detail in Section 4.

Figure 2. Summary of no. of IOF-funded projects taking specific activity approaches

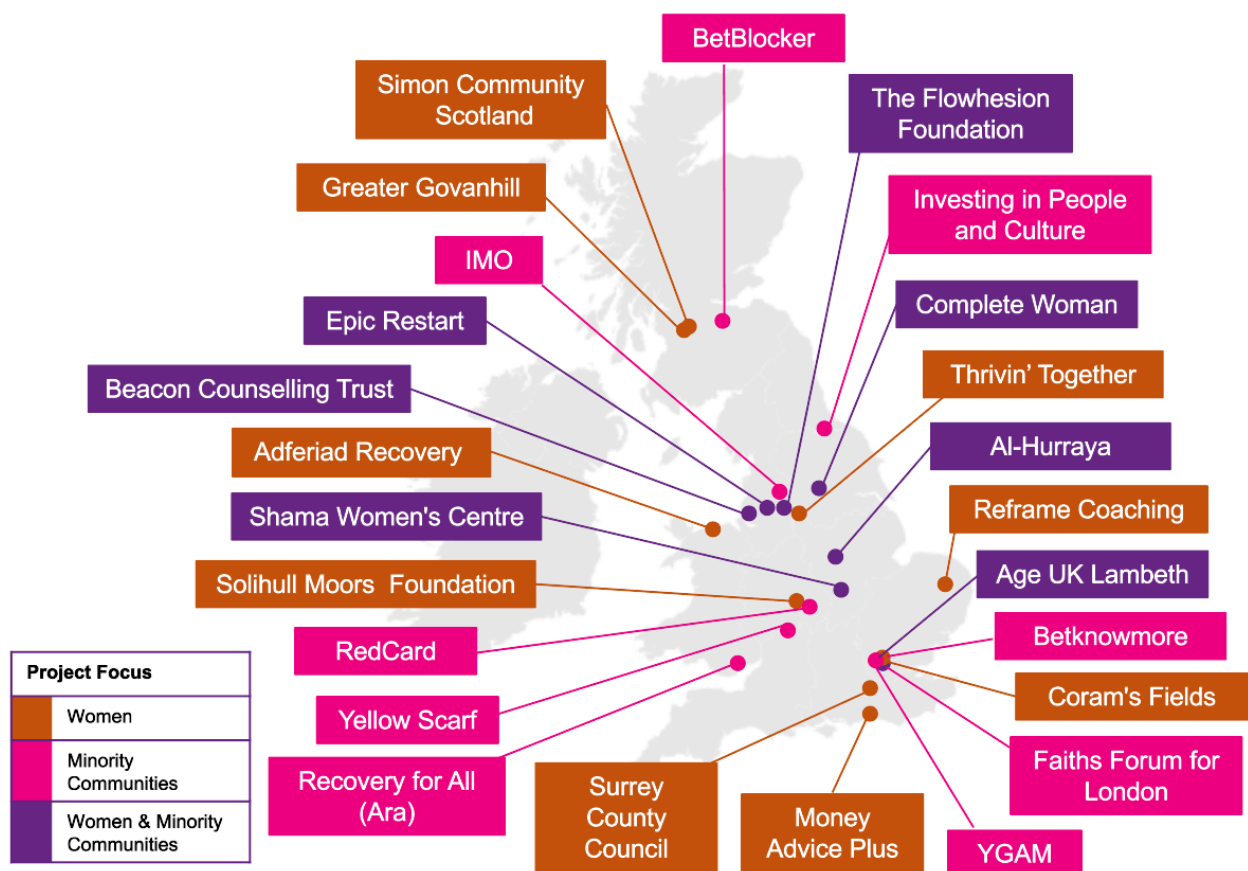


2.4 IOF-funded projects locations

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

Key regions where projects are based tend to have ethnically diverse and multicultural populations. Projects are taking place-based approaches to recognise and respond to the diverse needs within local communities.

Figure 3. IOF-funded projects by location and project focus



2.5 Evaluation and learning partnership with NPC

In 2024, NPC was commissioned by GambleAware to be the learning and evaluation partner for the IOF. The aim of the partnership is based on the following three key elements:

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

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

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

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

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

The [scoping report](#) was completed in January 2025 and included a set of ten learning questions which were refined together with GambleAware and shared with funded projects for feedback during the first learning event on 28th November 2024:

Table 1. Learning questions from scoping report

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

These learning questions form the basis of NPC's evaluation. In the remainder of this report, we will first discuss the methodology of the research, followed by our findings, looking ahead and conclusion.

3. Methodology

To explore the key learning questions and themes uncovered by GambleAware's research and NPC's scoping report, we have engaged in a range of activities with funded projects throughout the

period of February – June 2025. These have included familiarisation calls, an online learning event, two online workshops with funded projects (on theory of change and measurement), and focus groups with select groups of funded projects.

3.1. Focus Groups

NPC conducted two focus group sessions with a selection of IOF-funded projects to understand how projects are adapting their practices and resources to ensure they are culturally relevant and accessible for women and minority communities.

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

- We gave priority to those projects not involved in GambleAware's Community Resilience Fund², in order to include perspectives from organisations that have not previously participated in evaluation activities and so have not had the opportunity to contribute to discussions on these themes.
- We selected organisations that represented a range of approaches and models, for example, early intervention, awareness raising, community champions, counselling/therapeutic support, culturally and gender-aware support, group support, holistic support, training for professionals, and those specifically working with partner organisations to deliver support for domestic abuse survivor-victims.
- We selected both specialist and non-specialist gambling harm organisations.
- We spoke to half of all funded projects through the focus group sessions, in order to gather a representative range of perspectives.

Focus group 1: The first focus group was held on 13th May 2025 and involved a selection of six funded projects who are working with people from ethnic and religious minority groups.

² Launched in 2022, The Community Resilience Fund (CRF) is GambleAware's first grant-making programme, created to support community-based organisations in raising awareness and providing early intervention for gambling harms, especially among deprived, marginalised, and ethnic minority communities most affected by the cost-of-living crisis.

Focus group 2: The second focus group was held on 14th May 2025 and involved a selection of six funded projects who are working with women.

The focus groups explored how gambling harms are experienced differently among women and religious and ethnic minority communities. Key discussion themes centred on the cultural and gendered dynamics which influence their experience of gambling harms, and the approaches that funded projects are taking to adapt their services or delivery methods in order to be more gender and/or culturally informed.

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

3.2. April 2025 learning event

On 2nd April 2025, NPC hosted a one-hour online learning event with 14 IOF-funded projects via Teams. NPC consulted with the Partners in Learning and sounding board to develop the theme for the event, and focused this on exploring what's working and what needs to be done when it comes to adapting gambling harm support provision. The aim for this session was to generate additional learning and insight on how projects are adapting, and the successes and challenges associated with this.

The learning event was an interactive session in which NPC facilitators shared emerging learnings on the impact of gambling harms across different communities and outlined how projects are adapting to meet the specific needs of their participants and communities. The workshop participants then discussed and validated these emerging learnings, providing more depth and perspective on the issues.

3.3. Monitoring report forms

NPC received funded projects' 12-month monitoring report forms which were developed by GambleAware and submitted on a 6-monthly basis. These reports include an overview from projects on their performance against their activity targets, including any challenges or successes that contributed to their progress during the previous period. The interim reports covered the period from 1st April 2024 – 31st March 2025. The reports were analysed by grouping the information

according to the learning questions. We pulled out the key thematic areas from the data which has been applied and embedded into this report, together with data collected from the focus groups and learning events.

4. Findings

The findings draw together insights from the grantee monitoring forms, focus groups with grantees, and the April online learning event to highlight the experiences women and individuals from ethnic and religious minority communities affected by gambling harms. A key theme emerging from this research is the significant overlap, and intersectionality, between the experiences of women and those from minority communities. This includes how gender, ethnicity, religion and cultural expectations interact to shape individuals' experiences of gambling harms and access to support.

Embedded within this research is the acknowledgement that, as one grantee commented: *“there is no single ethnic minority community experience”* and similarly, there is no single experience of gambling harms for women. Instead, the findings below bring to light the *shared experiences* that both groups face, as well as the distinct challenges and experiences that are unique to women and individuals from minority communities in isolation. This is to build a more nuanced understanding of the types of support that are most effective and culturally appropriate for different communities.

The analysis supported many findings from [previous GambleAware research](#) and uncovered a complex interplay of social, cultural, and structural factors driving gambling behaviours among women and minority ethnic groups, requiring a tailored approach to support. These factors include social and financial pressures, an increased risk of loneliness and isolation among these groups and an increasing need for escapism and connection, with gambling being seen as a relatively easy and accessible activity. Grantees highlighted that the consequences of engaging in gambling behaviours can be complex, including financial instability, family and relationship issues (including domestic and financial abuse), as well as decreases in overall wellbeing.

Accessing treatment and support for gambling can be difficult for individuals from these communities due to a shared feeling of stigma and shame, which is often associated with gambling. This is particularly true for communities whose religious beliefs condemn gambling, making it harder for individuals to speak openly about their struggles for fear of being judged. Additionally, gender-specific issues emerged - particularly for women with multiple caring responsibilities who find it difficult to prioritise seeking support or treatment for themselves.

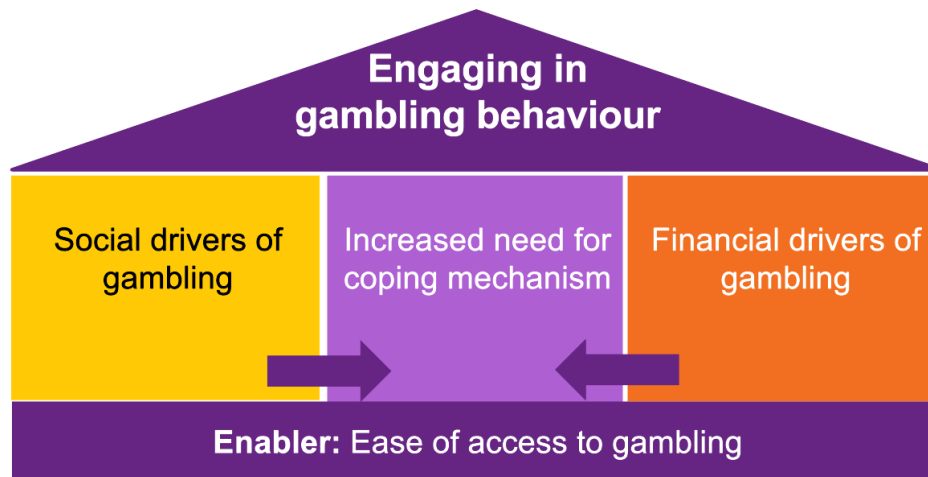
4.1. What drives people towards gambling, and what are the repercussions?

We identified the following key drivers of gambling behaviours:

- **Social drivers:** Social or cultural isolation in which gambling is used as a coping mechanism and a means to connect with others

- **Financial drivers:** Using gambling to generate income

Figure 4. Key drivers of gambling harms



The use of gambling as a means of escape from some of these social and financial drivers was also discussed. This is also facilitated by key enablers such as the sheer accessibility of gambling in modern society, for example, gambling being an online activity and gambling outlets on the high street being one of the few places open in the late hours.

Social and cultural isolation

A shared experience of women and people from minority communities that drives them towards gambling is loneliness, isolation and a need for connection. For many people in disenfranchised communities, this becomes especially pronounced in the late hours, when many other community spaces and services are closed. As one grantee shared in a focus group: *“After a certain hour, you can’t access healthy food, you can’t find a quiet space to read or relax, but you can grab a beer or head to the bookies.”* This lack of alternative spaces for social connection, coupled with the fact that adult gaming centres can open late at night, and many casino and betting shops operate 24 hours a day, makes gambling an appealing escape for distraction and/or connection for both women and ethnic and religious minority communities (see below: gambling as a coping mechanism and means of escape).

As for women, experiences of isolation are often linked to experiences of domestic abuse and being trapped in harmful situations in their own homes which can drive them to gambling, as one focus group participant shared, *“we certainly see [isolation] with the women that access our service who are the gambler...as part of domestic abuse, they’ve been isolated and this kind of online community invariably is their outlet as their only source of support.”* Isolation

is a particularly harmful driver of gambling behaviours because gambling addictions reinforce and increase an individual's isolation and loneliness. It drives wedges between people and their loved ones and distances them from meaningful connections.

“Gambling isolates people even more, even when you’re in recovery, you might not have people around you left, your recovery capital is really small. Gambling is about chasing your losses, but people lose themselves in gambling.”

Focus group participant

Financial pressures

Another common driver of gambling for women and minority communities is financial hardship. Grantee organisations working with minority communities reported that these communities may experience financial difficulties due to additional financial pressures like the cost of supporting extended families, or for first and second-generation immigrants, families back home. Disenfranchisement of these communities can leave people with fewer opportunities to find a stable and secure income, which can drive people to gambling to try and make money.

Organisations working with refugee and asylum-seeker communities specifically highlighted that the opportunity to earn money is a central factor in driving gambling behaviours. For these communities, this might be their first encounter with licensed gambling, which may pique people's interest even more so: ***“For refugees in particular, this might be their first encounter with licensed gambling and the pull of that when they might not be able to work [or gain other income] might seem like an easy way to make money.”*** This was also highlighted for international students coming to the UK for the first time, who were seen as being at higher risk of developing gambling harms due to having limited previous exposure to gambling, being financially independent for the first time and experiencing loneliness: ***“International students in particular haven’t seen gambling advertised before... this may be the first time they see something like that and it can be alluring... the loneliness is certainly a factor and they’re experiencing financial independence for the first time which could put them at higher risk as well.”***

Focus group participant

Similarly, for women experiencing financial hardship and gambling-related harms, particularly single mothers, grantee organisations often see women who are desperately trying to make ends meet to support their families: ***“Lots of single mothers came forward to get support as they were having to gamble to pay for food or pay for their children to have new clothes.”***

Gambling as a coping mechanism or means of escape

A common driver of gambling harms amongst women and minority communities which emerged during focus group sessions is coping and escapism. We heard from funded projects that gambling is often used as a coping mechanism and a way to escape the pressures, responsibilities, and injustices experienced day-to-day in the lives of the people they support. Grantee organisations working with ethnic minority communities have found that the racial discrimination these people face in their everyday lives takes a significant toll on their overall health and wellbeing. It is recognised and evidenced that minority communities in the UK experience disproportionate gambling harms. Racism and discrimination are significant contributing factors to these harms, and these experiences negatively impact mental health and wellbeing.³ Grantee organisations note that these negative impacts on health and wellbeing lead to a desire to escape this in some way, in this case, through gambling.

“For Black communities in London, there’s a variety of different factors [that lead to gambling harms]. One thing we point to in our workshops is the experience of racial discrimination in the public sphere, leading to using gambling as a coping mechanism, escapism from the life challenges and difficulties that are related to experiences of being Black.”

Focus group participant

Participants in the women’s group echoed elements of discrimination, but in relation to the everyday experiences and pressures associated with being a woman. A result of the systemic misogyny and sexism that exists throughout society today is that women typically take on the role of the “caretaker” in household and family dynamics⁴. In many cases, particularly for women from minority communities, women will have multiple caring responsibilities: children, elderly parents, and partners, not to mention themselves. For example, one focus group participant shared this is especially common amongst the African community of women they work with, *“where it’s a woman’s responsibility to protect the home... the husband and to protect the family”*. Grantee organisations see women in these situations engage in gambling behaviours, particularly online, because it provides entertainment and a way to escape the numerous responsibilities and demands on them.

³ As evidenced in the Gambleaware research [minority-communities-final-report_0.pdf](#)

⁴ [Understanding Misogyny | Definition and Impact in 2025](#)

“The general pressures of being a woman, being the responsible person, the one that is always there for everybody else, but never for themselves. No one is supporting them. I’m not sure if it’s conscious, but [gambling] is a way of coping. It feels very much like, you know, ‘a bit of me-time’, a need to escape.”

Focus group participant

Ease of access to gambling as an enabler

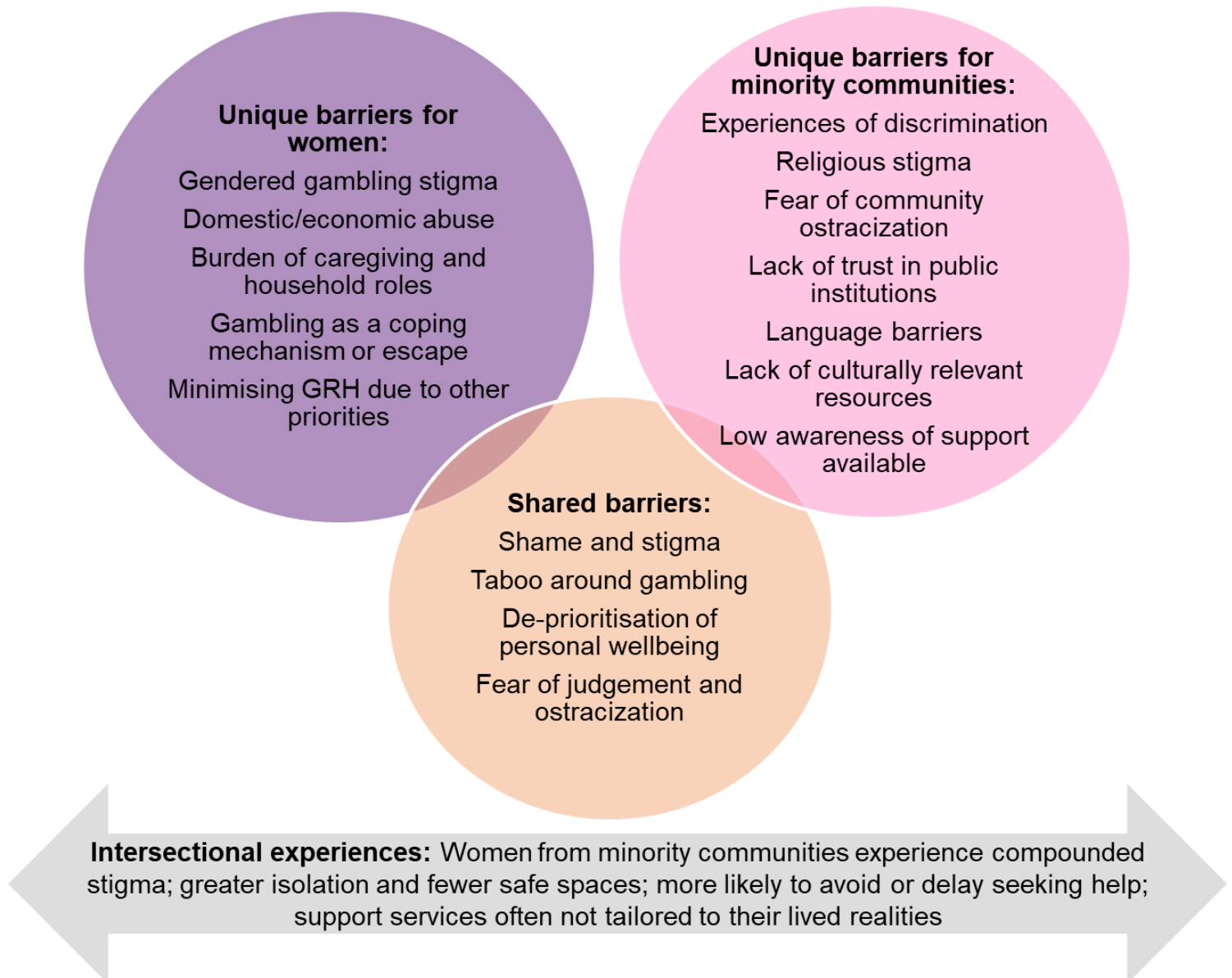
As noted above, in our modern society it is easier than ever for people to access gambling through gambling-specific websites, in-app gambling through games as well as the availability of physical gambling and betting shops. Many casinos and betting shops for example are open late into the night and located on high streets or in town centres. Conversations during learning events and focus groups also discussed that the prevalence of online gambling nowadays increases the ease and immediacy with which gambling spaces can be accessed, at anytime from anywhere.

The gamification of online gambling through apps and video games can also make it more difficult for people to recognise the difference between harmful gambling and just simply gaming.

4.2. What barriers are preventing people from seeking support?

For women and minority communities, accessing support for gambling related harms can be extremely difficult due to a range of complex and interconnected barriers. Below, we discuss the most significant barriers we found throughout our research so far.

Figure 1. Unique and shared barriers to accessing support for gambling



Stigma and shame

The stigma and shame associated with gambling harms were highlighted as the most significant barrier for both women and ethnic minority communities which prevents them from accessing support. This surfaced as a key discussion theme at the April learning event, where discussions focussed on the highly gendered stigma around gambling for women, particularly those who have

been experiencing domestic or financial abuse. Funded projects highlighted that there can be a total denial of the existence of gambling within communities, due to people being embarrassed to discuss their gambling or the gambling of a family member: ***“Stigma has been the main thing I've come across. There is a total denial of it existing as an issue within the communities as they feel far too embarrassed to talk about it, embarrassed to seek help”.***

Within this, funded projects particularly emphasised the level of stigma and shame that women from Muslim communities face either due to their own or their partner's gambling. This is driven by the fact that gambling is a prohibited activity in Islam and as such community members feel unable to access gambling support due to the fear of being ostracised from their community or religious groups. Muslim women can therefore feel a deep aversion to coming forward to disclose gambling-related harms and seek support:

“In some Muslim communities gambling is partly forbidden and there is big, deep-rooted stigma. People don't speak up about it and women who are affected by someone else's gambling feel they can't speak up about it because they would be committing a sin”.

Focus group participant

While stigma and shame are significant barriers for many women and ethnic minority groups to access support, these barriers are not universal. In other communities gambling is not only accepted but is an embedded social and/or cultural practice. For Roma and Czech Traveller communities, gambling is widely normalised: ***“in the Roma, Czech Traveller community, there is no stigma at all... in fact, it is completely normalised and everybody does it; all the family go together.”*** This normalisation presents a unique challenge for organisations. Rather than confronting barriers of silence or shame, organisations need to try and engage communities appropriately where gambling is viewed as a routine or even a family-oriented activity. As one grantee reflected, ***“with some of the travelling communities it's difficult because it is culturally acceptable and something that young people are engaging with, often led by others within the community. When you're trying to have a conversation that there is risk and harm, that's not always well received.”***

These contrasting experiences demonstrate the importance of culturally responsive approaches. A one-size-fits-all model is unlikely to be effective. Instead, organisations in the wider gambling harm sector should seek to adapt their engagement strategies to reflect each community's specific cultural attitudes, norms, and lived realities by codesigning these with people with lived experience, organisations can ensure they achieve engagement. As one grantee summarised: ***“how you tackle the subject has to be really different for each group... understanding the variances across culture, religion, and recognising that these don't operate in silo.”***

Unique experiences of religious and ethnic minority communities

Grantee organisations highlighted that a lack of trust in public institutions is a significant barrier for ethnic minority communities in accessing support: *“It was really difficult to engage with the Muslim community due to the lack of trust.”* Grantees noted that this lack of trust is often rooted in communities’ experiences of systemic racism and/or discrimination within public services, and specifically health care services. Funded projects reflected that while support services may be available and visible, this does not always translate into engagement if trust has not been built, for example: *“Whether the healthcare providers are there or not... it’s one thing, and people being aware of them is another, but the bigger issue is whether there’s trust between communities and those organisations. That’s going to be a barrier to access for a variety of reasons.”*

One organisation reflected that their outreach work with ethnic minority communities had initially been met with caution, as gambling is often considered a taboo subject. They observed that some of the communities they work with *“already feel targeted, underrepresented and looked down upon”*. Therefore, introducing the topic of gambling, particularly when discussing higher levels of harm within those communities, risked reinforcing feelings of stigmatisation and shame. Instead, organisations found that embedding gambling into other topics helped to ease initial barriers – this is discussed in further detail in section 4.3.

Funded projects also noted that there is a significant lack of awareness within some ethnic and religious communities of the support and services available for gambling harms. This was particularly highlighted in the North-East of the UK where one local service had not engaged a single individual from refugee or new migrant communities in over 20 years; one focus group participant suggested this was due to limited awareness of the service within these communities and language barriers which had prevented community members from accessing support.

Language also emerged as a significant barrier for ethnic minority communities in accessing gambling harm support and services. Organisations report difficulties not only in translating materials but also in ensuring that support is culturally appropriate and resonates with community values. Funded projects noted that even interpreters can struggle with specialist terminology, and many organisations lack the resources to provide tailored, multilingual services. As one grantee noted, *“Language is the issue that we face, even interpreters [are] finding it difficult to translate some of the professional gambling-related work.”* Another grantee highlighted the challenge of catering to multiple languages with limited budget and resources: *“There are so many languages to consider... that’s a barrier in itself for an organisation. How do we do that successfully and fully with limited funding? That’s the challenge.”*

Relationship and trust-building

At the April learning event, funded projects acknowledged that trust-building is a long-term process and that disclosure of gambling harms as an issue is rarely immediate; organisations reported that multiple engagements were required before individuals were comfortable enough to open up about their gambling. Overall, a pattern we saw in many of the recent six-monthly reports is of organisations rethinking and adjusting their initial expectations around outcome targets due to underestimating the time necessary for organisations to build trust and meaningfully embed themselves within the communities they are seeking to support.

An important learning to take from this when considering future interventions is the common experience amongst funded projects that project outcomes (especially referral rates – i.e. the number of individuals being referred to gambling-related support or treatment) have been reached far lower so far than anticipated. We would therefore recommend for future initiatives that ample time and budget is built into the early relationship-building phase for projects in order to build the crucial relationships needed to be effective.

Lack of engagement and support from social/ health services

We have heard from funded projects doing outreach work that many practitioners, including GPs and frontline health workers, lack awareness of gambling harms or do not view it as a priority area for support, representing a critical barrier to early intervention and support for those at risk. Projects made specific mention of the need for greater awareness of gambling harms among health professionals, as a key opportunity for screening and early intervention. Currently, grantees who have been engaging in outreach work have noted a significant lack of awareness among frontline professionals of gambling harms, which further compounds the issue of people accessing support. As one grantee commented: ***“Many professionals don’t see the need for support. This lack of understanding contributes to low 1-2-1 referral numbers”***. NICE guidelines⁵ on gambling harm have acknowledged that gambling harm is a public health issue and when health professionals don’t understand risks or see the relevance of support, a key engagement moment and support mechanism is missed.

This represents an opportunity for the IOF as a whole to work together towards shifting how gambling harms is understood and addressed, both in terms of public health practice and in policy. This shift could move gambling from the margins into the mainstream of public health, community support, and safeguarding practice, drawing recognition of gambling harms as an issue which

⁵ [Identification, assessment, and management of gambling-related harms: summary of NICE guideline | The BMJ](#)

requires attention, funding, and integration into routine service delivery. A key step for this will be to explore the pathways for systemic change that raise awareness at a national level. Government and future system commissioners have a key role in embedding gambling harms into mainstream health and safeguarding systems. This includes recognising gambling as a public health priority in national policy and ensuring it is integrated into routine screening and workforce training. For example, several funded projects observed that despite the recent inclusion of gambling in NICE guidelines, it is still not widely acknowledged as a public health issue. This gap between policy and practice means that potential opportunities for early detection and intervention in medical settings are being missed. Therefore, normalising gambling harms (as part of routine conversations with GPs during health checks) could help to empower organisations to raise the issue with clients, making interventions easier and more effective.

For example, several funded projects observed that despite the recent inclusion of gambling in NICE guidelines, it is still not widely acknowledged or consistently implemented as a public health issue. This gap between policy and practice means opportunities for early intervention are being missed. Normalising gambling harms as part of routine conversations — such as GP health checks — could empower more organisations to raise the issue with clients, making interventions easier and more effective

Unique experiences and pressures faced by women

As mentioned in section 4.1, grantee organisations highlighted some unique and complex ways that women specifically experience gambling harms. This is shaped by their gender roles, responsibilities and other intersecting issues. For example, funded projects noted that many of the women accessing gambling harm support are also navigating difficult experiences at home, such as domestic abuse or economic control in some instances. Caring responsibilities for children and elderly relatives were also a factor that place additional burden on women. This can make it increasingly difficult for women to prioritise addressing their gambling or accessing gambling-related support: *“All those things are in play at one time... and sometimes the gambling issue can be lower down in the priorities for people, and particularly for some clients, having the capacity to deal with that is a separate issue”*. Funded projects noted that for many women, gambling is not always identified as the primary concern, particularly where it is entangled with experiences of domestic abuse or financial hardship. *“They’re coming because they’re dealing with the domestic abuse as the main thing, and the gambling is a side thing.”*

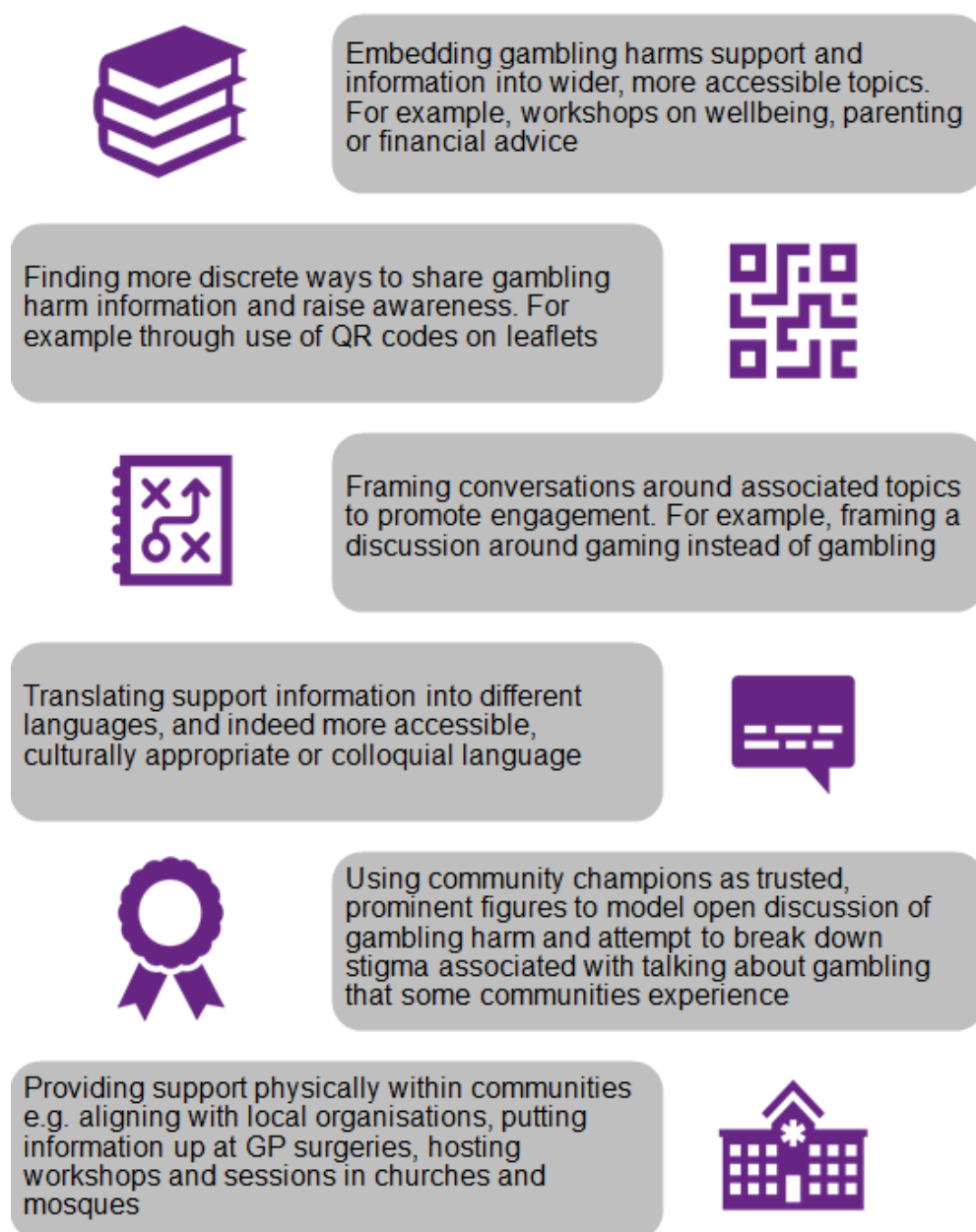
In these scenarios, women are frequently known to be placing the needs of others ahead of their own, de-prioritising their own wellbeing and delaying seeking support. They are often trying to protect their family and those around them, whether they are the person gambling or affected by a

partner or someone else's gambling: ***"They're trying to keep it together... there's that mindset of 'I'm going to pull this back, it's going to be alright.'"*** Funded projects noted that in these situations, gambling may be one of the few ways women carve out space for themselves, making it even more difficult to give up, even when it becomes harmful.

4.3. How are organisations tailoring their support to address these?

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

Figure 5. How organisations are tailoring support to address barriers



Below, we discuss the key approaches being taken by IOF-funded projects to enable their target groups to access and receive the support they need.

Embedding gambling support into other topics

One way that funded projects have been addressing the issues of stigma and shame in accessing gambling harm support is by embedding support and information into wider, more accessible topics. Rather than leading with gambling as the primary topic for sessions, many organisations have instead integrated conversations around gambling harms into workshops or services centred on other topics, such as mental health and wellbeing or debt and financial advice. This has been found to improve access to support for people who might otherwise have avoided gambling-specific support:

“We’ve lead sessions on the back of debt and advice or discrimination support or hate crime support to try and normalise these conversations a bit more and find better ways of reaching people and providing that support. So rather than just going in there as a gambling harms service, it’s on the back of something else. We’ve found that particularly effective”

Focus group participant

In addition, organisations are finding ways to make their outreach more discreet and accessible. One grantee has been using QR codes on leaflets, allowing people to discreetly access resources without drawing attention to their gambling concerns. This has been particularly useful in settings like GP surgeries, where people from ethnic minority communities, especially those less comfortable with direct discussions about gambling, can scan a code for further support: *“We put the QR code where people who are more tech-savvy can just scan it, and it’s a very discreet service. They can be directed to somewhere they can talk about gambling without feeling exposed.”* During the April learning event, several projects described the use of visual aids such as discreet flashcards and role-play exercises to initiate non-threatening, indirect conversations about gambling. Funded projects have found that these tools can create emotional distance, which has helped people to feel safer and more reflective in these spaces.

Discreet approaches have also been important for organisations working with women. Funded projects noted that women often prefer confidential, one-to-one support, and are less likely to attend public events or group sessions explicitly about gambling. For these organisations, they have framed workshops around broader wellbeing themes, for example, integrating gambling awareness into sessions on parenting, food parcel distribution, and even exercise classes:

“Women weren’t coming to sessions because they didn’t want to be seen attending a gambling-related session. So making it a Pilates class has helped massively.”

Finally, funded projects described how discussing topics like gaming or in-game purchases has proven to be a helpful way of opening up the discussion of gambling in youth settings. This has often been found to lead into conversations about gambling-related risks: *“We realised early on that running a programme just focused on gambling wouldn’t attract engagement... so we framed the conversation around gaming, and then it led naturally into gambling. People were really engaged, we’ve actually been asked to come back and run more sessions, in Arabic and English.”* Funded projects have also found this to be a useful approach in opening up the conversations with parents to engage in the risks of gaming related gambling harms for this children and young people *“We also did some parenting workshops and got to speak about gaming, looking at loot boxes in game purchases, etcetera. There was a lot of interest.”*

These integrated, indirect approaches are helping outreach organisations normalise community conversations around gambling harms and reach people in ways that feel safer, more relevant, and less stigmatising.

Language and co-creation

A key approach that organisations have been using to make their outreach efforts more effective and culturally relevant for ethnic minority communities is by translating their resources and information into different languages: *“We make sure other leaflets and workshops are in different languages”* in order to engage communities for whom English is not their first language. Funded projects have found it important to utilise translators and translate into multiple languages in order to drive engagement: *“We’ve been utilising translators, so most recently we delivered a workshop in Mandarin to a group of women, which went down really well. We had really good feedback on that. It’s something we’re going to continue trailing.”*

Funded projects also highlight the importance of tailoring their outreach leaflets to the *terminology* used by the communities they are seeking to reach, ensuring the information is culturally appropriate and framed in ways that resonate with community members. Funded projects have been actively working with community members to do this:

“We established a sounding board of individuals with lived experience from Muslim and ethnic minority backgrounds who helped shape our content and review materials to not only ensure that they are culturally sensitive but also framed in language and concepts that the community can relate to”.

Focus group participant

“We worked with a girls’ group to make sure the games we were referring to were known and relevant to that group”

Focus group participant

Organisations have also been involving service users in the review and refinement of their resources, such as training slides or informational materials to ensure that content is appropriate and to highlight any barriers in accessing support: *“We are involving service users by reviewing training slides and getting feedback on how to raise more awareness and whether people face any barriers around accessing treatment.”*

Community champions

Funded projects are also utilising “community champions” - typically trusted, prominent role models from within the communities - to try and break down the stigma associated with gambling harms. These champions are typically faith leaders or other respected figures who use their influence to normalise the conversation around gambling and share their own personal experiences, thus encouraging others to seek support. Funded projects noted that this approach has been effective in breaking down the barriers of shame and silence that often surround gambling harms, particularly in communities where the topic of gambling is taboo:

“It’s that issue of people not beginning and not wanting to open up about gambling and talk about it. I think the fact that a Reverend Minister, myself and one of the ladies we’re working with - she’s got quite a prominent position within the Islam community, when we go in and we share our lived experience it helps break those barriers and we’ve found women being more open in those workshops.”

Focus group participant

Taking the support to people

Organisations are increasingly recognising the need to meet people *“where they are and not expecting them to come to us”*, which represents a clear distinction from requiring people who are in need of support to come to a service or centre. This shift has meant organisations have been able to critically consider the needs of the communities they are engaging with and tailor their support to improve access, particularly for individuals who might feel overwhelmed or excluded by traditional service delivery methods.

For example, at the April 2025 learning event funded projects highlighted several key partnerships they had made with existing local social support services which had helped to spread awareness among women. Funded projects also mentioned implementing regular drop-in sessions at GP practices for community members to walk-in and seek support without the need for prior appointments or stigma associated with traditional service settings: *“We do a weekly stand-up*

session at a local GP surgery where we distribute leaflets and information”. Other organisations are catering to the needs of women by integrating gambling support into child drop-off times, as one grantee shared: *“We conduct coffee mornings where women can drop their kids off at 9:00 and just have a chat. It’s not necessarily about gambling, but it’s a normal, relaxed space to talk, and we use that to navigate them to other services we offer.”*

In addition, funded projects have been delivering sessions in mosques to help spread awareness of gambling-related harms, with the support of faith leaders: *“Being community-led and adaptable in their approach has helped them deliver sessions in meaningful settings like mosques. Familiar and trusted environments, particularly when supported by faith leaders, help break down stigmas.”*

6. Conclusion

The findings from the interim report highlight that gambling harms among women and ethnic minority communities is complex and multi-faceted. Organisations acknowledge that *“there is no single ethnic minority community experience”* and highlight the challenge in being able to truly provide culturally relevant support in the context of limited funds and resources. Grantee organisations highlight the importance of listening to the needs of community members and tailoring their resources appropriately in order to drive engagement.

Initial explorations, which align with recent GambleAware-funded research⁶, have shown that the drivers towards gambling are embedded in broader societal challenges, including the cost-of-living crisis and associated financial hardship, racial discrimination, gendered expectations, loneliness, and isolation. For many individuals, gambling turns into a coping mechanism, whether to escape the pressures of everyday life or as a response to deep-rooted emotional or social struggles. Women, particularly those from minority backgrounds, face unique pressures in their personal lives that exacerbate their vulnerability to gambling-related harms. These pressures include the burden of multiple caregiving roles and a heightened perception of stigma surrounding gambling within their communities - especially in the context of cultural and religious beliefs that discourage open discussion and hinder access to support. Additionally, for those communities experiencing poverty or financial instability, gambling can be seen as an accessible, though risky, way to try to improve someone’s circumstances.

⁶ [Gambling Harms in Minority Communities: Lived Experience](#)

Implications

Implications for the wider gambling harms sector

For gambling harm services to support women and minority communities more effectively, the interim findings suggest that organisations should engage directly with members of these communities through developing an advisory board or lived experience panel to create tailored, culturally responsive approaches to addressing gambling harms. Organisations who have been effective in this area have found that ‘meeting people where they are’ has been the most effective way to drive engagement and awareness - through their presence in community spaces, translating their resources into other languages and offering discreet outreach methods, or leveraging trusted community figures. Findings highlight that organisations should seek to adapt their services to reflect the diverse needs of these groups and engage them in ways that resonate with their lived experiences.

Implications for grantee projects

Findings showed that by embedding gambling harm support within broader, less stigmatising topics, such as debt advice, gaming or even exercise classes, organisations can help to create safe spaces for people to open up and access support for gambling harm. Similarly, by working with community champions and using prominent community leaders to help normalise discussion about gambling harms, organisations can help to reduce the shame and stigma attached to gambling. This helped to create an environment where those affected feel comfortable seeking help and starting their recovery journey.

Implications for GambleAware

With the managed closure of GambleAware and the introduction of a new gambling commissioner due to take place in April 2026, GambleAware can maintain receptivity towards grant-holders of the Improving Outcomes Fund through clear communications on the timeline and appointing a dedicated point of contact for any queries from grantees (i.e. grant managers). GambleAware could consider helping projects prepare for this by signposting grant-holders to alternative funding opportunities, offering guidance on sustainability, and providing endorsements or references. Additionally, the final October learning event presents an opportunity for GambleAware to continue to facilitate collaboration between projects, fostering knowledge-sharing between organisations to strengthen networks and capture valuable lessons that can be taken forward.

Where possible, we would also recommend GambleAware to continue to profile the learnings from this programme to others in the sector. We have observed that GambleAware’s trust-based funding and evaluation model - which prioritises embedding lived experience as an innovative

approach - has been gathering attention of those in the sector (e.g. through GambleAWARE's presence at recent conferences including with the Charity Evaluation Working Group and at the UK Evaluation Society conference). We believe there is value in harnessing this where possible to showcase the Improving Outcomes Fund programme and share learnings across the wider gambling harms support sector.

Implications for the gambling harms sector

The findings from the evaluation highlight the need for a more nuanced approach in the gambling harms sector. Prevention and treatment strategies need to be tailored to meet the distinct needs of these communities, ensuring that interventions are culturally sensitive, trust-based, and integrated with broader public health and social issues. The evaluation highlights several key implications for effective commissioning by OHID and NHSE. To address gambling-related harms among women and ethnic minority communities' services need to be culturally tailored, trauma-informed, and community-led. A one-size-fits-all model is likely to be less effective, instead services should be commissioned to prioritise trust-building with communities, using multilingual and discreet outreach approaches, and forming partnerships with trusted local figures and faith leaders. Where possible, services should integrate gambling support into broader issues such as mental health, financial hardship, and domestic abuse to reduce stigma and increase engagement. Workforce gambling harms training is also key, ensuring that health professionals recognise gambling as a public health issue and incorporate screening into routine care. Finally, gambling harms should be embedded into wider strategies to address inequality and cost-of-living pressures, with government and future system commissioners providing sustainable funding so that effective treatment and support become part of standard practice.

Looking ahead

Looking ahead we will be working closely with GambleAware, the Partners in Learning and funded projects to take forward the learnings from this interim stage into the final phase of the project. As outlined at the start of this report, the learning and evaluation partnership has identified a list of key learning questions. Ahead of the final report, we will be focussing on answering the remaining questions in our engagements with funded partners:

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

We will also seek to understand how this evaluation can inform the future system of gambling harms and assess the effectiveness of the support provided by both GambleAware and NPC throughout the programme. A particular focus will be placed on identifying opportunities to influence systemic change in order to shift gambling harms from the margins to the mainstream of public health and community support. Building on the findings in this report, we have identified some key interim findings that warrant a more in-depth focus. This includes focusing on the following:

- Highlighting the **benefits of organisational partnerships/networks** and how these have facilitated an increase in access for these groups
- Exploring more around the **economic/ financial experiences of women** and their interaction with GRH, including how projects are adapting support to respond to this
- More detail on **how relationships with community champions and religious leaders** are built, maintained and employed, and the successes and challenges
- More detail on **how trust is built at a community level** and with community organisations, and the successes and challenges
- More nuanced insight into **how organisations approach embedding gambling harm support into wider topics or engagements** and how these sessions are delivered.

We will work closely with GambleAware and the Partners in Learning to build on the findings from this report and explore the remaining learning questions in greater depth.