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The logo for Gamble Aware, featuring the words "Gamble" and "Aware" stacked vertically in white text on an orange square background.

**Gamble  
Aware**

# **Evaluation of the Gambling Support Service (GSS) Scotland**

Final Evaluation Report

November 2022

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# Executive Summary

## Introduction

### GSS Scotland

Gambling Support Service (GSS) Scotland has been delivered by Citizens Advice Scotland (CAS) in partnership with GambleAware since April 2020. GSS Scotland was designed as a two-year pilot project, and its initial aims were to:

- promote a public health approach to the identification and treatment of gambling harm.<sup>1</sup>
- reduce gambling harms and improve client outcomes by increasing opportunities for early identification and intervention.
- increase awareness of gambling harm prevention services among frontline service providers and the general public in Scotland, and develop a stronger evidence base about gambling harm in Scotland.

In April 2022 an extension to the project was confirmed for a further three years.

### Evaluation and method

GambleAware commissioned Kantar Public to conduct a process and impact evaluation to capture learnings from the two-year pilot of GSS Scotland. Primary qualitative methods and secondary project data analyses were used to capture the experiences and views of those involved in the project and assess the project's impact.

The evaluation comprised: scoping interviews with Citizens Advice Bureau (CAB) senior managers; logic model workshops with GambleAware and Citizens Advice Scotland; case study interviews with key stakeholders in each delivery region, including recipients of GSS training; impact reflection workshops; and data scoping and collection activities.

### Delivery

GSS Scotland is delivered through four Training and Engagement Officers (TEOs) based within four local Citizen Advice Bureau (CAB) offices, in Airdrie, South West Aberdeenshire, West Lothian, and, Inverness, Badenoch and Strathspey.

Each TEO is responsible for delivering GSS Scotland in one of four regions (North East, South East, West and South West Scotland, and the Highlands and Islands). TEOs are supported by CAB line managers, Citizens Advice Scotland, and GambleAware.

GSS Scotland activities fall into three 'strands':

- training
- awareness raising and engagement
- client advice.

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<sup>1</sup> The Gambling Commission defined 'gambling harms' as "the adverse impacts from gambling on the health and wellbeing of individuals, families, communities and society" in their 2018 research (<https://www.gamblingcommission.gov.uk/news/article/new-report-takes-significant-step-forward-in-measuring-the-impact-of>).

## Training

Training is available to CAB advisors (both paid and volunteer advisors) and frontline workers in wider organisations working in settings where they may encounter individuals experiencing, or at risk of experiencing, gambling harms. Training has had a wide reach, with 247 sessions delivered to 2,183 trainees.

Training includes workshop sessions and e-learning modules (e-learning is only available to CAB advisors). The training aims to: increase capacity for early identification of those impacted by gambling harm; increase delivery of advice in relation to gambling harm; increase awareness of specialist resources available; and improve signposting to appropriate services (such as GamCare).

Training is the project strand that TEOs have focused on most. TEOs felt positive about the impact of the sessions and believed the training to have been well received by trainees.

Trainees, specifically frontline workers<sup>2</sup>, felt training was useful as it gave information that was informative and relevant to their work, as well as giving actionable insight to help them assist those experiencing gambling harm. Trainees felt that since training they have more actively looked for signs of gambling harm, and feel better able to identify those experiencing it. Some trainees reported using the screening tool (see Appendix F) with clients to explore relationships with gambling. Evidence of using learning around providing direct advice to clients is more limited and trainees said they have not often had the opportunity to draw on learning as gambling harms are low within the general population.

TEOs often found recruiting trainees challenging and time-consuming, impacting on time available for other project activities. A large part of recruitment was sending cold emails to organisations (as in-person opportunities to recruit were minimal due to Covid-19 restrictions), with low response rates. TEOs felt this was because frontline organisations had reprioritised their areas of focus and were busy (e.g., “*firefighting*” due to the negative social impacts of Covid-19), or did not see the training as sufficiently relevant to their work. They also thought cold emails were easily ignored in comparison to in-person recruitment.

## Awareness raising and engagement

Awareness raising and engagement activity is designed to expand the reach of GSS Scotland and raise awareness of gambling harm. This is done through sharing accessible and easy to understand information, attendance and presentations at local and national conferences and events, and other awareness raising activities such as local media coverage. Activities also seek to raise awareness of CABs as a provider of advice on gambling harms and where to get specialist support. Overall, TEOs attended 33 engagement events and delivered 28 awareness raising presentations.

Awareness raising was considered an important part of the project by TEOs and CAB senior managers, however they recognised that most TEOs had so far focused on awareness raising activities much less than training. They explained that awareness raising activities had often been focused on less to date, as they had felt it was important for the project to build frontline client advice skills through training before growing public awareness of gambling. High KPI targets for training, in comparison to awareness raising and engagement, may have also led to a reduced focus on this strand.

## Client advice

A key focus of GSS Scotland is to improve advice for individuals at risk of or experiencing gambling harm, including signposting to specialist support (such as GamCare). Over the course of the GSS Scotland project, 183 CAB clients were recorded as having received advice on gambling from advisors, with 31 of these clients receiving support from TEOs directly.

TEOs and GSS Scotland trainees felt that GSS Scotland played a valuable role in improving client advice and reducing gambling harm in Scotland. Through training, frontline workers learnt about how to better identify and support those experiencing gambling harm, including how to use a screening tool to identify

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<sup>2</sup> Frontline workers refers to frontline CAB workers (advisors, both paid and voluntary) and those at different organisations.

harmful gambling behaviour<sup>3</sup>. Further, GSS Scotland helped improve client advice by giving CAB advisors the opportunity to refer clients to TEOs to gain support on reducing gambling harms where they feel unconfident to provide support on gambling harms themselves, or where cases require more specialist support.

However, TEOs and CAB senior managers felt few clients had been referred to TEOs. TEOs hoped that referrals were low because frontline workers were happy advising clients themselves after receiving GSS Scotland training; KPI data on number of clients advised on gambling harms suggests that this is likely the case.

Additionally, TEOs and CAB senior managers and advisors voiced various concerns about the appropriateness of the screening tool and felt that it was not being widely used, affecting the ability of frontline workers to identify those experiencing gambling harm.

## Lessons learned and implications for project delivery

Seven key lessons emerged from the evaluation.

### Identification of gambling harms and the screening tool

The screening tool GSS proposed be used by frontline workers, to assist with identification of those experiencing gambling harm, was felt by frontline workers to be inappropriate to administer with *all* clients, as well as being too formal, too direct, not conducive to natural conversation and therefore a barrier to building rapport.

To increase the use of the screening tool and make it more appropriate for use by frontline staff, consideration should be given to:

- **Producing clear guidance for frontline workers** explaining why gambling could be a problem for clients seeking assistance on a wide range of issues, and how to weave screening questions into conversations. This could help increase comfort levels towards asking screening questions to a greater number of clients, and increase use of the screening tool by showing how the screening questions can be used in a way that frontline workers might feel is more sensitive.
- **Redesigning the screening tool** so that instead of prescriptive questions, it is a guide with discussion points to explore. This would be more acceptable to frontline workers who stress the importance of building client relationships through sensitive and unintrusive questions and conversations.
- **Continuing to promote the importance of the screening tool and negative impact of gambling** to increase the confidence of frontline workers using the tool and understanding of its importance.

### Client advice work

Current training was felt to go “*only so far*” in preparing frontline workers to have conversations with clients about gambling, affecting the extent to which GSS Scotland can improve client advice in relation to gambling harm. Given that client discussions about gambling can be challenging, the evaluation identified scope for additional training around ‘soft skills’ for having sensitive client conversations that build good client-worker rapport.

There was also a view that refresher training would help to sustain frontline workers’ knowledge of how to support clients experiencing gambling harm, and to keep gambling harm front of mind, ensuring frontline workers continue to identify and support those experiencing gambling harm.

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<sup>3</sup> A tool designed collaboratively by GambleAware and a range of treatment and prevention partners, which can be used by frontline workers to identify client gambling behaviour. See Appendix F.

To further develop the training strand of GSS, so that it is better able to improve client advice, consideration should be given to:

- **Creating training materials and session plans that TEOs can use** to deliver more and different types of training sessions, such as refresher training packs.
- **Developing additional soft skills training** to build skills and confidence needed to have sensitive conversations with clients which gathers information frontline workers need to be able to offer advice to clients about gambling harms.

### **Awareness raising and events**

Several challenges were faced in relation to awareness raising and events, which impacted the success of this strand of activity. TEOs were primarily not engaging in a wide range of awareness raising activities and were largely conducting awareness raising through presentation sessions. Additionally, TEOs did not share a consistent understanding of the difference between the training and awareness raising presentation KPIs. Further, TEOs were sent limited numbers of promotional leaflets and posters which they thought were important to support awareness raising efforts. They further wanted to advertise GSS Scotland on social media but felt there were barriers to doing so.

To assist delivery of and diversify awareness raising activities, consideration should be given to:

- **Exploring collaboratively with TEOs the range of awareness raising activities they could be involved in**, such as drawing attention to examples of different activities or producing a guidance document, to give TEOs insight into the opportunities available for diversifying the range of awareness raising and engagement activities delivered.
- **Broadening KPIs** so they capture a wider range of activities such as TEO appearances on local radio and press to ensure KPIs are not barriers to diverse TEO awareness raising activities.
- **Adding to the KPI descriptions** to further explain the types of activities each KPI refers to. This would also help ensure a shared understanding of the difference between the training and awareness raising presentation KPIs.
- **Developing an effective system that allows TEOs to access and order promotional materials**, and giving TEOs a clear briefing on this.
- **Thinking about how to enable TEOs to use social media more easily for promotion purposes.**

### **CAS' role in GSS Scotland**

It was felt that more top-down guidance and management from CAS would be beneficial and give the project more structure and consistency.

Further, TEOs wanted CAS to help with day-to-day project activities. They wanted CAS to assist with recruiting those to attend training and awareness raising presentations, by networking and forming relationships with national organisations. TEOs also felt CAS could help encourage greater uptake of e-learning by promoting it and conducting greater internal awareness raising of GSS Scotland to CABs.

To help consolidate the project, consideration should be given to:

- **Encouraging CAS to lead the project more visibly**, to assist TEOs and their managers, and to set the direction of activities.
- **Considering whether responsibility should be given to CAS to form national contacts and carry out greater internal awareness raising across CABs.**

### **Embedding GSS Scotland activities**

Going forward with the project, CAB senior managers expressed the importance of “*embedding*” project activities so that client advice on gambling harms becomes routine across the Citizens Advice Scotland network.

To ensure long-lasting project impacts, consideration should be given to:

- **Including gambling harm support training in routine CAB advisor training.** This would help ensure CAB advisors continue to be trained after the GSS project ends.
- **How to help reinforce training and familiarity with the topic** (such as through providing refresher session training materials) to ensure that CAB advisors have strong knowledge and skills that allow them to routinely support clients.
- **Ensuring CAB advisors are recording gambling harms cases within CASTLE<sup>4</sup> accurately and consistently** using the Data Entry Instructions. This might be achieved by sharing information about when and how it should be used. This is important since TEOs were unsure if the 'gambling harm' CASTLE flag<sup>5</sup> was being used uniformly by CAB advisors.

### TEO skill set

The need for TEOs to run activities across all three project strands requires a diverse skill set to deliver the project successfully. The necessary skill set has made it difficult to find suitable candidates in some cases. The absence of systematic onboarding was seen to compound this challenge.

To support the diverse skill set TEOs need, consideration should be given to:

- **Producing standardised GSS Scotland induction packs and comprehensive onboarding for TEOs.** This would help ensure TEOs, regardless of their previous workplace experiences, can run all parts of the project well.
- **Reviewing the TEO job description,** to ensure it contains appropriate levels of detail about the skills required for the role, so that applications are made by those with the required experience.
- **Consider TEO role sharing if any future TEO recruitment is undertaken** to help ensure each region has the right TEO skill sets. Primarily one TEO has been employed for each region, however in one region the TEO role has been split between two TEOs, which has allowed each TEO to specialise in activities they have specific skills in.

### Data collection

Several data collection challenges affected the evaluation, and the project's ability to measure and demonstrate impact. For example:

- TEOs were unsure if CAB advisors were recording gambling harms cases within CASTLE accurately and consistently.
- CAB advisors were not routinely following up with clients to explore outcomes or impacts of advice.
- TEOs did not routinely recontact external organisations who had received training to assess its impact towards client advice on gambling harm. Trainee and client feedback forms, as well as client mental health impact forms (that are collected immediately after clients have received advice about gambling harms) are not systematically completed and collected.

As a result, evidence on how many clients have received support, client outcomes, and additional data that could add to the evidence base about gambling harms in Scotland (such as the proportion of CAB clients receiving or seeking support for gambling) is limited, which makes evaluating project impact and building an evidence base difficult.

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<sup>4</sup> CASTLE is CAS's client management database where information about clients is entered. Advisors select information 'flags' that reflect what has happened in conversations with clients and record specific conversation details.

To improve data collection, consideration should be given to:

- **Providing clear advice on CASTLE data collection** to all CAB advisors to ensure CASTLE data is more reliably recorded and can be used to identify project impact and build an evidence base about gambling harms in Scotland.
- **How data could be collected to evidence client outcomes**, such as how beneficial referrals are. This could be done through TEOs following up with a certain number of clients who are signposted by CAB advisors to external organisations that offer specialist support (such as GamCare) to see if they contacted the organisation and how helpful the support was (within the parameters of GDPR compliance). Similarly, TEOs could follow up with trainees from external organisations to see how training content has impacted client advice given about gambling harms.
- **Improving completion and collection of trainee and client feedback forms**, for example by sending reminder emails or having reminders and clear instructions in the Data Entry Instructions.

# 1 Introduction

## 1.1 The Gambling Support Service

### 1.1.1 Gambling in Scotland and support

In 2017, the Health Survey for Scotland indicated that 63% of adults aged over 16 had participated in gambling in the past year, with 2.7% categorised as 'low-risk gamblers', 0.9% 'moderate-risk', and almost one in 100 (0.8%) identified as 'problem gamblers'<sup>6,7</sup>.

Support for those experiencing gambling harm<sup>8</sup> in Scotland is provided by a variety of organisations, such as Fast Forward, GamCare (including through the National Gambling Helpline), GamAnon, and Citizens Advice Scotland (CAS), and the Scottish Government has gambling action plans, policies, and strategies in place to address gambling in Scotland. However, it has been found that staff in frontline roles often lack awareness of the pathways to support and treatment. Public Health Scotland found that only 2% of people thought to be problem gamblers enter treatment<sup>9</sup>. Further, gambling and betting are reserved matters in the UK, meaning they remain the responsibility of the UK Parliament, and are not devolved to Scottish authorities. Responsibility for gambling lies with the Department of Culture, Media & Sport (DCMS).

### 1.1.2 GSS Scotland

GSS Scotland has been run by Citizens Advice Scotland in partnership with GambleAware since April 2020. Following a pilot in Citizens Advice Newport, Wales (2015-2018) and rollout across Citizens Advice England and Wales (GSS E&W) (2018-2021), the GSS E&W model, materials, and service design have been adapted to be appropriate for delivery in Scotland.

GSS Scotland was designed as a two-year pilot project, and its initial aims were to:

- promote a public health approach to the identification and treatment of gambling harm<sup>10</sup>
- reduce gambling harms and improve client outcomes by increasing opportunities for early identification and intervention
- increase awareness of gambling harm prevention services among frontline service providers and the general public in Scotland
- develop a stronger evidence base about gambling harm in Scotland.

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<sup>6</sup> 2017 is the most recent data collected in Scotland looking at gambling behaviour.

<sup>7</sup> The term 'problem gambler' is a classification used in the Problem Gambling Severity Index (PGSI). PGSI is a widely used measure of risk behaviour in gambling, which results in people being classified as 'non-problem gambler', 'low-risk gambler', 'moderate-risk', or 'problem gambler'. However, the term 'problem gambler' can contribute to narratives that construct people who experience gambling harms as *being* a problem, rather than *having* a problem or illness. GambleAware commissioned research has emphasised that the term 'problem gambler' is stigmatising and should only be used in direct relation to the PGSI, and elsewhere, first-person language should be used.

<sup>8</sup> The Gambling Commission defined 'gambling harms' as "the adverse impacts from gambling on the health and wellbeing of individuals, families, communities and society" in their 2018 research (<https://www.gamblingcommission.gov.uk/news/article/new-report-takes-significant-step-forward-in-measuring-the-impact-of>).

<sup>9</sup> [https://www.scotphn.net/wp-content/uploads/2019/11/v1\\_Gambling-harms-policy-review\\_0175.pdf](https://www.scotphn.net/wp-content/uploads/2019/11/v1_Gambling-harms-policy-review_0175.pdf)

GSS Scotland is delivered across Scotland by four local Citizen Advice Bureaux, (Airdrie, South West Aberdeenshire, West Lothian, and Inverness, Badenoch and Strathspey), by four Training and Engagement Officers (TEOs). Each TEO has oversight of project delivery across a region. Figure 1 shows the regions each TEO is responsible for.

**Figure 1: TEO's CAB and their oversight region**



GSS Scotland activities fall into three 'strands':

- **Training** for Citizens Advice Bureau advisors (both paid and volunteer advisors) and frontline workers in wider organisations working in settings where they may encounter individuals experiencing, or at risk of experiencing, gambling harms. Training aims to: increase capacity for early identification of those impacted by gambling harm; increase delivery of advice in relation to gambling harm; increase awareness of specialist resources available; and improve signposting to appropriate services (such as GamCare). Training includes workshop sessions and e-learning modules (e-learning is only available to CAB advisors).
- **Awareness raising and engagement** to expand the reach of GSS Scotland and raise awareness of gambling harm by sharing accessible and easy to understand information, through attendance and presentations at local and national conferences and events, and other awareness raising activities such as local media coverage. Activities also seek to raise awareness of CABs as a provider of advice on gambling harms.
- **Client advice** for individuals at risk of or experiencing gambling harm, including signposting to specialist support (such as GamCare).

KPIs (key performance indicators) and KPI targets for the project were agreed by CAS and GambleAware and monitored through monthly project progress meetings, quarterly progress reports, and annual reviews involving CAS and GambleAware. KPIs are shown in Appendix E.

GSS Scotland was designed as a two-year project, concluding in March 2022. In April 2022, an extension of the project was confirmed for a further three years. It is important to note that much of the first two years of the project happened during the Covid-19 pandemic and resulting restrictions, including lockdowns.

## 1.2 Evaluation aims and objectives

GambleAware commissioned Kantar Public to conduct an independent process and impact evaluation of GSS. The specific aims of the evaluation were to:

- Assess the effectiveness and early outcomes of the GSS Scotland project
- Identify lessons learned and make clear recommendations for areas of service delivery improvement for GSS Scotland.

The underlying evaluation research questions, alongside the data collection methods used to answer these questions can be found in section 2.1.

### 1.3 Report terminology

Figure 2 is a list of definitions to help readers navigate the report.

**Figure 2: List of definitions**

CAB	Citizens Advice Bureau are local, independent charities offering free and confidential advice about a range of topics that meet the needs of the community including: housing, government benefits, debt and consumer rights.
CAB advisor	Voluntary or paid staff working in CABs, providing free information and advice to members of the public.
CAB CEOs	Chief Executive Officer for CABs.
CAB managers	Senior staff in CABs, some of whom manage TEOs
CAB staff	Those working for CABs which the evaluation interviewed (TEOs, advisors, CEOs and senior managers)
CAS	Citizens Advice Scotland, a registered charity and membership organisation which provides support and expertise to Scottish CABs in areas such as management and fundraising, as well as IT support and training.
CASTLE	CAS' client management database where information about clients is entered. CAB advisors can select project flags and record advice codes to reflect what has happened in conversations with clients, and record specific conversation details.
External organisations	Organisations other than CAS or CABs that are involved in the project.
Frontline workers	Those in public facing roles providing an essential advice-giving service; this includes CAB advisors and those from other organisations.
Gambling harms	The adverse impacts from gambling on the health and wellbeing of individuals, families, communities, and society.
KPI	Key performance indicator.
Screening tool	A tool designed by GambleAware, in collaboration with a range of treatment and prevention partners, which can be used by frontline workers to identify client gambling behaviour (see Appendix F).
Support organisations	Organisations (other than CABs) that provide advice, support and guidance on gambling harm (e.g. GamCare).
TEO	Training and Engagement Officer, responsible for delivering GSS Scotland in one of four regions.
Trainees	Recipients of GSS Scotland training.

# 2 Research Approach

## 2.1 Process and Impact evaluation

Primary qualitative methods and secondary project data analyses were used to capture the views and experiences of those implementing and involved in the project, and assess project impact. Figures 3 and 4 illustrate the key evaluation research questions alongside the methods used to answer them.

The research consisted of three phases: the scoping phase (March – June 2021), the formative process and preliminary impact phase (August 2021 – February 2022), and the final process and impact phase (February – August 2022).

**Figure 3: Process Evaluation research questions**

Process evaluation research question	Source of data
What did Citizens Advice Scotland offices need to achieve prior to receiving project resources from GambleAware?	<ul style="list-style-type: none"> <li>• Logic model workshops</li> <li>• Scoping interviews with regional CEOs</li> </ul>
What has been achieved since the GSS Scotland resources were rolled out?	<ul style="list-style-type: none"> <li>• Scoping interviews with regional CEOs</li> <li>• Regional case study interviews</li> <li>• Secondary analysis of administrative data and data collection tool</li> <li>• CAB senior manager and TEO impact reflection workshop</li> </ul>
What work was planned but not done? Why?	<ul style="list-style-type: none"> <li>• Regional case study interviews</li> <li>• Secondary analysis of administrative data and data collection tool</li> <li>• CAB senior manager and TEO impact reflection workshop</li> <li>• TEO impact reflection workshop</li> </ul>
What challenges have been encountered in the rollout of the GSS Scotland intervention and how were they addressed (if at all)?	<ul style="list-style-type: none"> <li>• Scoping interviews with regional CEOs</li> <li>• Secondary analysis of administrative data and data collection tool</li> <li>• Regional case study interviews</li> <li>• CAB senior manager and TEO impact reflection workshop</li> </ul>
What opportunities have been identified?	<ul style="list-style-type: none"> <li>• Scoping interviews with regional CEOs</li> <li>• Regional case study interviews</li> <li>• CAB senior manager and TEO impact reflection workshop</li> </ul>

What are the lessons or considerations for the remainder of the project in order to achieve intended outcomes?	<ul style="list-style-type: none"> <li>• Regional case study interviews</li> <li>• Secondary analysis of administrative data and data collection tool</li> <li>• CAB senior manager and TEO impact reflection workshop</li> </ul>
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**Figure 4: Impact Evaluation research questions**

Impact evaluation research question	Source of data
To what extent has the project delivered its overall objectives and specific outcomes?	<ul style="list-style-type: none"> <li>• Scoping interviews with regional CEOs</li> <li>• Secondary analysis of administrative data / MI data collection tool</li> <li>• CAB senior manager and TEO impact reflection workshop</li> </ul>
What are the recommended changes, resources, and/or adjustments which need to be made in order to achieve the outcomes?	<ul style="list-style-type: none"> <li>• Regional case study interviews</li> <li>• CAB senior manager and TEO impact reflection workshop</li> </ul>
Do any changes need to be made to the logic model? If so, what?	<ul style="list-style-type: none"> <li>• Logic model workshops</li> <li>• Regional case study interviews</li> <li>• CAB senior manager and TEO impact reflection workshop</li> </ul>
Were there any changes to the broader context which have had consequences for the delivery/impact of the initiatives?	<ul style="list-style-type: none"> <li>• Scoping interviews with regional CEOs</li> <li>• Secondary analysis of administrative data / MI data collection tool</li> <li>• Regional case study interviews</li> <li>• Client Impact Journeys</li> <li>• CAB senior manager and TEO impact reflection workshop</li> </ul>

## 2.2 Phase 1: Scoping

The scoping phase laid the groundwork for both the process and impact evaluation by developing the logic model, gathering and reviewing existing evidence, consulting with the main project stakeholders, and identifying project data that was being collected that could help the evaluation.

At the close of Phase 1, Kantar Public delivered an online presentation to GambleAware to share findings, the developed logic model, and recommendations for data collection in Phase 2.

### 2.2.1 Logic model workshop

Two online logic model workshops were run and moderated by Kantar Public researchers to explore project inputs, activities, outputs, outcomes, and impacts, as well as project assumptions and risks. The first workshop comprised core stakeholders from GambleAware and CAS, and the second the core GSS delivery team (TEOs and their line managers). The Kantar Public team prepared detailed stimulus and content to make the workshops interactive, including a draft logic model to share with attendees. The workshops included breakout group work around specific parts of the draft logic model.

Kantar Public used the proceedings of the workshops to produce a logic model (Appendix A) that informed the review of existing data and scoping interviews, as well as the design of research materials for both process and impact evaluation.

### 2.2.2 Review of existing data

Kantar Public ran a data scoping activity, including conducting two informal interviews with CAS staff, to identify project data being collected as part of GSS Scotland that could be used to assist the evaluation. This information informed the development of the data collection tool in Phase 2 (section 2.3.2). Data identified is shown in Figure 5 and includes KPI data, which is listed in full in Appendix E.

**Figure 5: Project data identified**

<p><b>Training</b></p>	<p>KPI data:</p> <ul style="list-style-type: none"> <li>• number of training sessions delivered by TEOs</li> <li>• number of trainees attending sessions</li> <li>• % knowledge shift and satisfaction rate gathered from the training feedback questionnaire, completed by trainees directly after training is received</li> <li>• number of CAB advisors accessing e-learning module</li> <li>• number of CAB advisors completing e-learning module</li> <li>• number of national debt advisor training courses delivered by TEOs</li> <li>• number of national debt advisors attending sessions</li> </ul> <p>Quarterly reports produced by CAS for GambleAware, including names or organisations trained and information about how training is perceived to have gone by CAS</p> <p>Training feedback questionnaires completed by trainees, including any open-end survey responses</p>
<p><b>Awareness Raising</b></p>	<p>KPI data:</p> <ul style="list-style-type: none"> <li>• number of awareness raising events attended by TEOs</li> <li>• number of awareness raising presentations delivered by TEOs</li> </ul> <p>Quarterly reports produced by CAS for GambleAware, including details of events ran or involved with, and information about how awareness raising is perceived to have gone by CAS</p>
<p><b>Client Advice</b></p>	<p>KPI data:</p> <ul style="list-style-type: none"> <li>• number of CAB clients advised on gambling harms</li> <li>• number of CAB clients referred to TEOs</li> <li>• number of CAB clients referred to the National Gambling Treatment Service</li> <li>• CAB client “satisfaction rate” towards advice received, calculated from questions from a client satisfaction survey completed by clients directly after advice is received</li> <li>• % CAB clients reporting improvements to mental health following referral to TEOs, calculated from questions from a client mental wellbeing survey completed by clients directly after advice is received</li> </ul> <p>Information on CASTLE (which includes a gambling harms related advice code that CAB advisors can select, and information about client conversations)</p> <p>Client mental wellbeing questionnaire completed by clients directly after receiving advice on gambling from TEOs</p> <p>Client satisfaction survey completed by clients directly after advice is received.</p> <p>Quarterly reports produced by CAS for GambleAware, including details of client advice received.</p>

### 2.2.3 Scoping interviews with regional senior CAB managers

Kantar conducted a 30-minute telephone interview with a CAB senior manager in each of the four CABs delivering GSS Scotland. These interviews helped build a contextual understanding of the regions in advance of the case study research conducted in Phase 2 of the evaluation. The interviews covered key information about the demographics of CAB clients for the region, high-level reflections on the activities and

outputs of each of the three project strands, successes and key challenges of the project to date, previous CAB knowledge of gambling, and client advice offered before the introduction of GSS Scotland.

### 2.3 Phase 2: Formative process and preliminary impact

The formative process and preliminary impact phase sought to develop insight into the experiences of those involved in project delivery and impacts that had been achieved mid-way through the two-year project. It further aimed to identify barriers and enablers to project success that could support the development of GSS Scotland. Kantar Public shared the findings of Phase 2 with GambleAware and CAS through a presentation and report.

#### 2.3.1 Qualitative regional case studies

Four case studies were conducted, one for each of the GSS Scotland delivery regions. The case studies each consisted of 60-minute telephone interviews with TEOs, other CAB staff (TEO line managers and CAB advisors who had received GSS Scotland training from TEOs), and external frontline workers who had received GSS Scotland training from TEOs. The number of interviews conducted per region was based on participant availability. Case studies were carried out to provide deep insight into how GSS Scotland is delivered, and outcomes achieved.

**Figure 6: Case study participants**

Oversight region	TEOs	Other CAB staff	External frontline workers	TOTAL
North East	1	1		2
South East	1	2	1	4
West and Southwest	2	2	1	5
Highlands and Islands	1	2	2	5
<b>TOTAL</b>	5	7	4	<b>16</b>

To conduct the case studies, Kantar developed a bespoke discussion guide tailored to each of the specific audiences engaged. The questions were structured around key themes, including awareness of gambling harm prior to the project, involvement in the three strands of project delivery, perceptions of project outcomes, and suggestions for project improvements.

Appendix D has case studies for each region, produced from these interviews. As a result, outcomes described are interviewees' perceptions of outcomes rather than being quantitatively measured.

It is worth noting that the evaluation spoke to 11 people who had received GSS Scotland training during the case study research, out of 2,183 who were trained overall as part of the programme. As a result, findings from these interviews about GSS Scotland training should be taken as indicative.

#### 2.3.2 Data collection tool and analysis of secondary data

After identifying data collected as part of the project (Figure 5), Kantar Public sought to collect and analyse the data that could assist evaluation.

Kantar Public accessed the quarterly reports produced by CAS for GambleAware. These reports contained the KPI data and additional information such as the organisations trained by CABs, and details on any changes to delivery.

Kantar Public further produced a bespoke data collection tool that was sent to each TEO. The tool asked TEOs to record additional data, that they or the CABs record relating to the project and its impacts, that are

not included in the quarterly reports. Information collected included: the names/types of external organisations that have referred clients to GSS Scotland, descriptions of events attended, and further information about the names/types of organisations trained.

Kantar Public were unable to access CASTLE data, anonymised client wellbeing survey data, client satisfaction survey data, or training feedback surveys for the purposes of this evaluation. This was due to Kantar Public experiencing difficulty assessing CAS data and data not being systematically completed and collected.

## **2.4 Phase 3: Final process and impact**

Phase 3 aimed to assess the overall project impacts, enablers, and barriers, as well as drawing together lessons learned and considerations for the continuation of the project. The findings from Phase 3 were used to update the logic model (Appendix B) and inform the final presentation and evaluation report.

### **2.4.1 Client impact journeys**

Interviews were conducted with clients who received advice from TEOs through GSS Scotland, to understand the impacts of the project on them. However, due to difficulties accessing contact details of clients, only two interviews were conducted. These consisted of a 30-minute telephone depth interview and a 30-minute follow-up interview with each interviewee, to explore client journeys through GSS Scotland. Due to the low number of interviews, it is not possible to draw generalisable findings from them, so they are presented as case studies in Appendix C.

### **2.4.2 TEO and CAB senior manager impact reflection workshops**

A 90-minute group workshop was run with the TEOs, and a second 90-minute workshop was run with CAB senior managers from the four CABs in which the TEOs were based, to get reflections of the project from those primarily responsible for delivering it, and those in CAB management roles, as GSS Scotland was reaching the end of its pilot.

The workshops explored views and experiences of GSS Scotland implementation, including achievements and challenges, and perceived opportunities for project improvements. At the workshop, Kantar Public also presented findings from Phase 2 of the evaluation and gathered feedback on whether any elements of the findings surprised participants, and whether there was anything they particularly agreed or disagreed with. TEOs' and CAB senior managers' views of the findings fed into the findings presented in this report.

## **2.5 Qualitative analysis**

All discussions across scoping interviews, case studies, client impact journeys, and workshops were audio-recorded and analysed. Analysis comprised of two elements: process-driven and interpretative. The process-driven element used a matrix mapping framework technique, in which data was coded and systematically summarised into an analytical framework organised by issue and theme. The framework was developed to reflect the research objectives, the workshop topic guides and the themes which emerged from brainstorm sessions. Through the framework, interview/workshop audio recordings were systematically documented (including verbatim quotes) according to emerging hypotheses, which enabled some comparison across areas and interviewee type (e.g. CAB and external frontline workers).

The second analysis element, which was interpretative, focused on identifying features and patterns within the data, mapping the range and nature of data, finding associations, defining concepts, creating types, and undertaking sub-group analysis. This process created descriptive accounts and explanatory data, which came not only from aggregating patterns but by weighing up the salience and dynamics of issues, and searching for structures within the data that have explanatory power. Researcher analysis sessions were used to support interpretation of the data, during which the research team came together to discuss and test emerging themes and insights.



# 3 Project context

## 3.1 CAB activities relating to gambling harm and project perceptions prior to GSS Scotland

### 3.1.1 Understanding of gambling harm and provision of advice

It was felt there was limited awareness among CAB staff of gambling and gambling harm prior to GSS Scotland. Overall, knowledge about gambling harm was perceived to be low among CAB advisors, and routine training on gambling harm was not available.

Awareness of gambling harms was strongest among CAB advisors who had first-hand experience of advising clients in relation to gambling. This was most common for CAB debt advisors who could more easily identify gambling harm as an issue when reviewing client bank statements as part of standard debt advisory processes.

*“It’s an issue that we deal with for a number of debt clients. Our money advisors were reporting to me that a number of [debt clients] have gambling issues.” (CAB senior manager)*

Similarly, provision of client advice about gambling harm was limited. Screening for negative impacts of gambling was not routinely conducted by CAB advisors and as a result, clients who received advice from CABs were limited to those who contacted a CAB to explicitly seek advice on gambling, those who were more open about sharing information about their personal lives, or those who were receiving advice from CAB debt advisors who could spot gambling spending in bank statements.

If clients were recognised as being negatively affected by gambling, CABs were able to provide some help. For example, CAB debt advisors were able to help with financial difficulties related to gambling and knew some organisations to refer clients to e.g. Gamblers Anonymous. However, CAB advisors were not specifically trained on how to provide advice about reducing gambling harm.

### 3.1.2 Perceptions of GSS

Prior to the project starting, CAB staff had positive expectations of GSS Scotland and felt that it would help them meet their goal of supporting local communities through providing advice. Despite low overall knowledge of gambling, CAB staff felt that since other addictive behaviours were common in Scotland (e.g. drug and alcohol use) gambling was likely to be an issue too. As a result, CABs anticipated that GSS Scotland would enable them to better support local communities through increasing knowledge about a lesser-known client issue and how to provide advice about it. Gambling was recognised as a potential area of priority for CABs to be able to offer advice on due to its close association with other problems (e.g. debt).

It was also anticipated that GSS Scotland could assist CABs to support their local communities through advice giving by being a source of funding that enables CABs to improve their own advice-giving practices, as well as that of other local frontline workers. One CAB senior manager described how they had recently lost council funding for non “core” work. They saw GSS Scotland as beneficial because it allowed them to fund and run a larger range of non-core services (specifically, advice on gambling harms). Another senior manager from a CAB with a TEO saw GSS Scotland as a way to better support other local CABs outside their own to deliver successful advice to better assist clients. They felt enthusiastic at this prospect as it would increase the positive community impacts of CABs.

*“We are a small bureau and we thought this could help us contribute to the local landscape that other bureaux could access.” (CAB senior manager)*

CAB staff further felt that the public awareness raising work TEOs would provide would be important. They felt that public understanding of the severity of gambling harm is limited, and stigma exists towards those experiencing gambling harm, which in turn reduces the numbers seeking advice. As a result, CAB staff felt GSS Scotland would be valuable to help improve awareness and understanding of the issue and, over time, reduce stigma.

*“Alcohol and drugs are treated more seriously than gambling addictions. Sometimes when you talk to people about gambling addiction, they have a smirk. And then you say ‘it’s serious, stop this’, but they think it’s just someone putting £10 on at Newmarket at 10 o’clock.”* (CAB senior manager)

*“People will far more readily talk about their drug and alcohol misuse than talk about gambling.”* (CAB senior manager)

As well as having such a positive expectation of GSS Scotland, CAB staff felt CABs were appropriate organisations to deliver the project. They felt that CABs are well placed to engage communities and local organisations in training and awareness raising activities, as they already hold strong local networks. Further, it was thought that CABs are well placed to identify those at risk of, or experiencing, gambling harm who might not be explicitly seeking help for it (unlike an organisation that might rely on individuals seeking out their services specifically for gambling harm advice). While people tend to approach a CAB about a specific problem, advisors can often identify additional issues that they can also provide advice on.

*“Because the CAB is a community-based organisation you will tend to find that they already have strong relationships with the community. Rather than someone brand new coming into the community to deliver the projects, we were able to use existing partnerships and referral pathways.”* (CAB senior manager)

## **3.2 Individuals and organisations involved in GSS Scotland and their activities**

### **3.2.1 TEOs**

TEOs (working 0.8 FTE per region) are the primary deliverers of GSS Scotland in each region, running activities across the three project strands (training, awareness raising and engagement activity, and client advice). One TEO has tended to be employed to run GSS project Scotland per region. TEOs are directly supported by CAB line managers and CAS. However, TEOs primarily decide how to run and deliver the project day-to-day. TEOs felt they had large amounts of autonomy, working independently to run activities.

TEOs meet with each other every other week to discuss activities and assist each other’s work. For example, TEOs have discussed successful approaches to recruiting external organisations for training sessions, shared contact details of organisations that other TEOs could use to recruit trainees, and picked up each other’s clients during periods of TEO role vacancies.

There has been a high TEO turnover (only one TEO remaining in post for the two-year duration of the project) due to a range of reasons, including struggles finding housing locally, and wanting a job with a permanent contract (the TEO position was temporary). This has resulted in lost delivery time while resulting vacancies were filled.

Successful delivery of the three strands of project activity requires TEOs to have diverse skill sets. The required skill set has made recruitment difficult.

*“[Recruitment and awareness raising] and you have to have a knowledge and an understanding of it, and then there is the training and delivery and that is a skill. So really important to ensure we have the right staff and that they are given the training and support that they need.”* (CAB senior manager)

CAB senior managers felt that over time they have developed a better understanding of the types of candidates most suited to the role, and have in turn made more sustainable appointments. In one CAB, two TEOs share the role after the previous TEO left. Both TEOs were previously CAB advisors and it was felt that splitting the role would allow each TEO to run activities that complemented their specific skill sets. This has been seen to be successful, and another CAB is considering using the same split role model.

*"We actually now have someone that we think is much more suited to the role because of course it's a lot of engagement, and that's quite different to advisor work. The role suits someone better who has worked in training and engagement."* (CAB senior manager)

*"I'm glad [my TEO] is going to split her hours and we'll advertise a part-time post and work out which bit she wants to do and what they will do, because there is an awful lot to do... We can get the right person to fit with her and that will help going forward."* (CAB senior manager)

Initially, TEOs experienced little structured onboarding when starting in the role and felt that they did not receive comprehensive introductory sessions; this gave them the impression that no standard GSS onboarding systems were in place. Subsequent TEOs reported better onboarding experiences where they started in post prior to the previous TEO leaving, as it allowed the departing TEO to handover to them and provide advice on how to run activities. For those where there was no TEO handover, new TEOs tended to spend a couple of weeks after starting their role reading up on gambling and gambling harm, and reviewing project documents (such as the training presentation and screening tool) to familiarise themselves with the project. The TEO who had been in post since GSS Scotland started also formed a key part of TEOs' onboarding experiences, organising sessions with new TEOs to share knowledge and expertise.

*"There was no real handover process, but I'm quite self-sufficient and happy to work in this independent way... Onboarding would probably have been more difficult if I were less self-sufficient."* (TEO)

*"I ...spent the first 4 weeks researching gambling on my own. No inductions or training materials."* (TEO)

### **3.2.2 CAS**

CAS primarily played an oversight and coordinator role with less direct involvement in day-to-day GSS Scotland project delivery. CAS collates reports detailing project activity for the previous quarter including: KPI data, descriptions of activities run, any risks or challenges, and views of how the project is progressing. CAS meets fortnightly with TEOs to discuss project activities and progress towards KPI targets. CAS further holds data about which advisors have completed the gambling e-learning module and have added a list of gambling support organisations which advisors can refer clients to onto advisor.net (an online reference platform for CAB advisors).

CAS also helped develop best project practices and build TEO knowledge. For example, CAS worked with Citizens Advice England and Wales at the outset of GSS Scotland to learn from their experience of providing gambling harm advice. CAS also set up meetings between TEOs and external organisations that provide support or advice on gambling harm, in order to build TEO awareness of the services the organisations offer – TEOs were able to share this knowledge in training and better tailor client advice as a result.

CAS has also provided direct support on recruitment for training and awareness raising. For example, by recruiting national organisations (such as the Army) for TEOs to train. TEOs found this helpful and would like CAS to provide this kind of ongoing help with training recruitment in the future because it allowed TEOs to spend less time on recruitment and more time on other project activities. Further, TEOs felt colleagues at CAS would have more success recruiting large national organisations as they have a greater number of contacts at these kinds of organisations. CAS has further conducted some internal awareness raising of the GSS project among CABs, such as by including information about the project in communications to CABs.

*"CAS would carry more weight if they got in touch with an organisation beforehand and told their branches to get in touch and ask for training presentations."* (TEO)

### **3.2.3 CABs**

CAB senior managers recruit and line manage TEOs. They also support TEOs by helping them think through how to resolve challenges they face and draw on their knowledge of local communities to identify potential training participants. TEO recruitment had proven challenging, and CAB senior managers reported becoming better at identifying suitable candidates and updated the job role and advert to attract people with the right skill set to apply.

CAB advisors are key beneficiaries of the training delivered by TEOs, which includes training on how to use the screening tool. After training, CAB advisors can use the screening tool and knowledge gained through training to advise clients on gambling harm.

CAB advisors further record data that can be used for project monitoring by inputting client information into CASTLE and using the project flag and advice codes where advice on gambling has been given. However, TEOs were unsure if the gambling harms related advice codes on CASTLE were being used consistently by CAB advisors and said that some advisors might be selecting it when gambling is discussed in conversations, while others might only use it when specific advice is given on gambling.

*“If someone comes into the bureau and sees a debt worker, and they have touched on the subject of gambling, they might say that they have spoken about gambling [on CASTLE] – it does not mean that we were involved, or that the gambler has agreed they have a problem or want to get extra help.” (TEO)*

### **3.2.4 External organisations**

External organisations interact and are involved in GSS Scotland in several ways. External organisations are recipients of training (see Figure 10 for list of organisations involved in training). Further, frontline workers supporting members of the public use knowledge from training to advise clients around gambling, or signpost clients to seek advice from CABs and TEOs. Training gives information about external organisations providing specialist support for gambling harms that frontline workers are then recommended to signpost clients onto to receive targeted assistance. TEOs provide a list of gambling support organisations during training sessions.

External organisations sometimes co-deliver training with TEOs, and also provide opportunities for awareness raising and engagement activities, such as running conferences or events that TEOs can run awareness raising activities through.

### **3.2.5 GambleAware**

GambleAware provide grant funding for the project, support project implementation and development, agree KPIs with CAS against which quality and impact of the project are monitored, and organise for evaluation feedback to be shared with CAS. GambleAware has also reviewed resource documents which TEOs use for project delivery, such as the training presentation deck.

# 4 Delivery Strands

## 4.1 Delivery overview

TEOs and CAB senior managers felt positive about what had been achieved so far across the three strands of GSS Scotland and were optimistic for the extension of the project. While awareness raising and client advice are recognised to be important project strands, in the first two years of the project there has been a particular focus on training, notably of CAB staff.

KPIs set for training and number of awareness raising presentations have consistently been exceeded over 2020-22. Trainees were enthusiastic about the sessions received, and felt that it would facilitate improved client advice, and TEOs and CAB senior managers felt the project had impacted on awareness of gambling harms, and how to advise those in need.

Despite the positive view held by TEOs, CAB senior managers, and trainees, little project data is being collected that can be used to successfully evidence the impact of GSS Scotland activities. KPI data primarily shows the frequency of project activities (such as how many training sessions were delivered, and how many trainees attended) rather than their outcomes or impact. Further, data that might evidence impact, such as trainee feedback forms, is often inconsistently collected and so cannot accurately be used to evidence impact. As a result, these sources of data are not included in this report. In addition, no data is collected to demonstrate the long-term impact of GSS Scotland activities such as training.

Delivery has not been consistent across the two years of the project, and in its initial stages GSS Scotland could feel unstructured to TEOs. However, after establishing approaches, TEOs felt they were able to run activities successfully. At the outset of GSS Scotland, TEOs felt there was a lack of clear guidance on how to deliver the project, which was compounded by restrictions on face-to-face work resulting from the Covid-19 pandemic. TEOs described feeling “*chucked in at the deep end*” when starting roles, and it took time to develop plans for how delivery would be approached.

However, after this initial period, TEOs felt able to deliver GSS Scotland more successfully, and established effective ways of working, such as organising their time between the three strands of project delivery, adapting training materials to cater to different audiences, and utilising existing networks for training and awareness raising opportunities.

Appendix D provides case study overviews of project delivery, challenges, lessons learned and perceived outcomes of each CAB region. These case studies were developed in Phase 2 of the evaluation.

*“It takes a long time as well for a project to become established, you have to put the foundations down and build on it, so to be able to continue this on means that coming out of Covid we should be able to put the meat on the bones.”* (TEO)

*“Obviously the first year had issues... but I think it is not about changing but developing the service, enhancing what we are doing with the CABs in our area and embedding it into our processes and the work that we do”* (Senior manager)

## 4.2 Training

### 4.2.1 Activities and impacts

TEOs have run training sessions for a range of organisations (see Figure 10), including CABs, local authority staff, and third sector organisations. As a result, training has had a wide reach, with 247 sessions delivered to 2,183 trainees.

Until the beginning of 2022, training was largely conducted online due to the Covid-19 pandemic. Moving all training online during the pandemic meant that training could continue to be delivered despite Covid-19 restrictions. Delivering training sessions online also meant that TEOs could deliver to organisations in remote areas that may not have otherwise been accessible due to the time it takes to travel there in person. This was particularly relevant for the TEO based in Inverness, and covering the Highlands and Islands, as travelling to the islands could prove difficult.

Adapting to online training delivery was an adjustment that some TEOs and trainees found challenging; like many, the move to online as a result of the Covid-19 pandemic was unfamiliar to them. Further, TEOs felt it was sometimes harder to engage audiences during online presentations and they felt it was easier for participants to be distracted by emails and other work. Additionally, some trainees did not have the technology set-up to easily facilitate online training, or were not confident using video conferencing platforms.

*“Face-to-face sessions are usually better than online sessions, as you can speak to people properly and see their reactions, with more interactivity. It is easy for somebody to hide in a video presentation.” (TEO)*

CAS provided TEOs with a training presentation deck, which TEOs felt was good, clear, and impactful. It was also seen as a good resource for new TEOs as it clearly showed how to run a GSS Scotland training session. In some instances, training materials were adapted by TEOs to cater more specifically to the needs of an organisation, and deliver information to meet their prior understanding of gambling.

*“Yes those are really good slides, a good synopsis and very useful for me as a new [TEO]!” (TEO)*

TEOs sometimes also deliver follow-up training sessions at the request of trainees, and share resources such as the presentation deck, GambleAware posters, and lists of support organisations. Training includes statistics regarding gambling prevalence and impacts of gambling, and information on how to identify those at risk of or experiencing gambling harm (including how to use the screening tool), how to have conversations about gambling, and support organisations that can offer specialist assistance. Training also provides information about GSS Scotland and how organisations can signpost clients to CAB for advice.

Training was felt to be a particularly successful strand of the project; TEOs felt positive about the impact of sessions, and training was well received by trainees. TEOs were happy with the work they delivered because they felt that training sessions raised awareness of GSS Scotland, the potential negative impacts of gambling, and how to identify and advise those impacted by gambling harm. Similarly, trainees found the training a useful source of actionable information that was relevant to their work. As a result, after receiving training, some recipients wanted to share training information with others because they thought it was so useful and relevant – for example, a CAB Prison Advisor asked to share training information with prison wardens because they felt it could help them assist prisoners.

In surveys, trainees report an average 61.5% knowledge shift from the training and a 96.5% satisfaction rate. For many trainees, the training information was hard-hitting, surprising, and interesting due to a general lack of awareness about gambling and its impacts. This meant that the information stuck with recipients and enthused them about gambling harm as an important issue. Recipients were particularly surprised to learn that gaming and bingo are forms of gambling, the size of the gambling industry, and the individual and societal impacts of gambling.

*“The harm on society is frightening and that comes through in the training.” (External frontline worker)*

*“The presentation was really quite self-explanatory...we definitely learned some stuff... where else to get help... how you can stop your gambling, I didn’t know you could put a block on your gambling especially your online gambling.”* (External frontline worker)

*“The training was really useful...we came away thinking it was very comprehensive.”* (External frontline worker)

*“All the staff have said they feel more confident talking to people about debt and where it has come from and asking those initial questions to see how they got to that point.”* (TEO)

*“It’s not something we would have trained on specifically, although we are aware of addictions...but it was mainly alcohol and drugs that it was focused on and not gambling.”* (TEO)

Trainees felt that since training they have more actively looked for signs of and feel better able to identify those experiencing gambling harm. Some trainees reported using the screening tool with clients to explore relationships with gambling. Evidence of using learning around providing direct advice to clients is more limited, and trainees said they have not often had the opportunity to draw on learning as gambling harms are low within the general population.

Despite the perceived positive impact of training, limited project data is being collected that evidences its impact. KPI data primarily evidences the number of training sessions run, rather than how impactful sessions are, and data from trainee feedback surveys is not consistently collected. Further, no data is collected on the longer-term impacts of training and TEOs did not recontact external organisations that received training to assess the impact of the sessions on client advice.

Training was also felt to be a successful strand as many recipients had been engaged in training. Training was a core focus for TEOs, who spent most of their time working on this project strand, and as a result exceeded KPI training targets for the number of sessions to deliver and trainees engaged (Figures 7 and 8).

Despite the various successes of training, TEOs often found recruitment challenging and time-consuming, TEOs spent significant time network-mapping to identify organisations, including other CABs, that would be appropriate recipients of training and sending emails to recruit trainees.

When contacting other CABs and external organisations, TEOs sought to identify named contacts and send personalised emails to increase response rates. This was achieved through various network-mapping activities including internet searches, identifying local community groups who may be interested in training, and utilising existing networks. These activities meant that TEOs engaged a wide range of organisations in training.

TEOs described how a large part of recruitment consists of sending cold emails to organisations (as in-person opportunities to recruit were minimal due to Covid-19 restrictions) with low response rates, including from other CABs. TEOs felt this was because organisations were busy (e.g. *“firefighting”* due to the negative social impacts of Covid-19), or did not see the training as sufficiently relevant to their work. They also thought cold emails were easily ignored in comparison to in-person recruitment. These difficulties meant that as well as making networking and recruitment less enjoyable for TEOs, it left them with less time to deliver training sessions and engage with other project strands. In comparison, drawing on existing relationships had better success rates and was less time consuming. For example, one TEO had strong local contacts gained from working in the CAB for several years, and was able to draw on these to help organise training sessions. Additionally, TEOs found it helpful when CAS helped to recruit large national organisations, as described in 3.2.2.

Location and population density also played a part in CABs’ abilities to recruit. TEOs and CAB senior managers felt that more urban CABs had a larger pool of potential organisations to deliver training to, and therefore higher chances of success in this area. CABs in more rural areas struggled more with recruitment and networking opportunities.

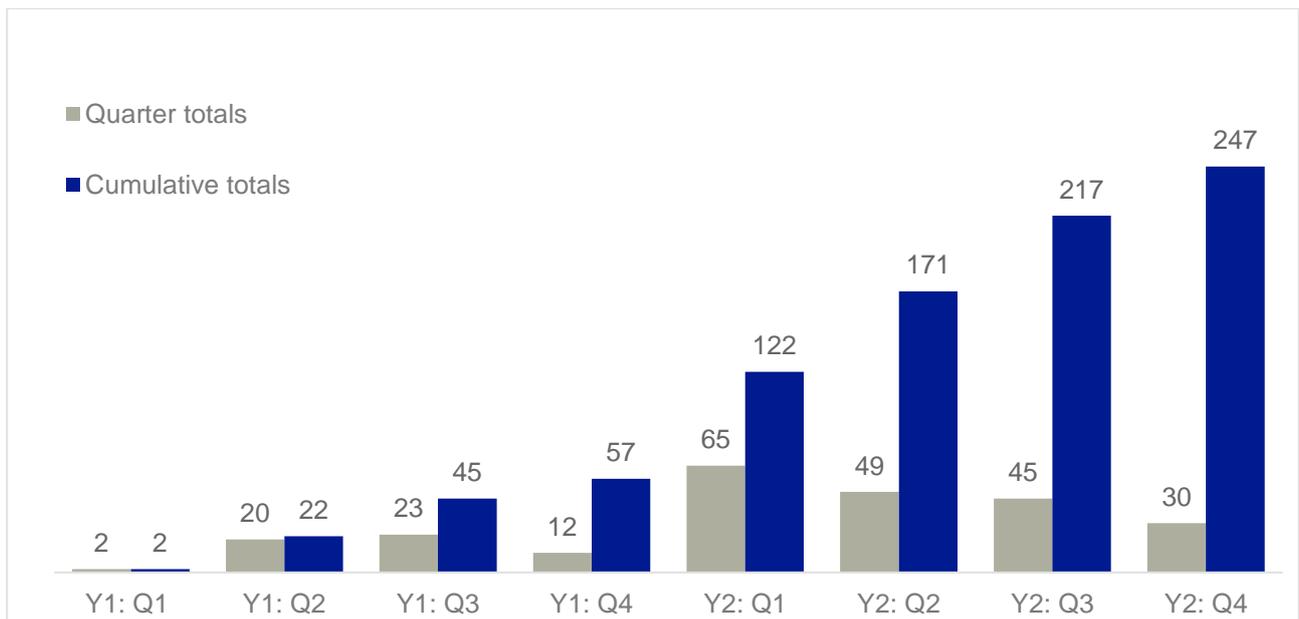
*“[Recruitment], it’s the hardest part of the job”* (TEO)

*I'll make a point of emailing them back and being persistent which doesn't always work. Sometimes they won't reply. Then I email again but it's constantly just trying to get somebody to take it up.*  
 (TEO)

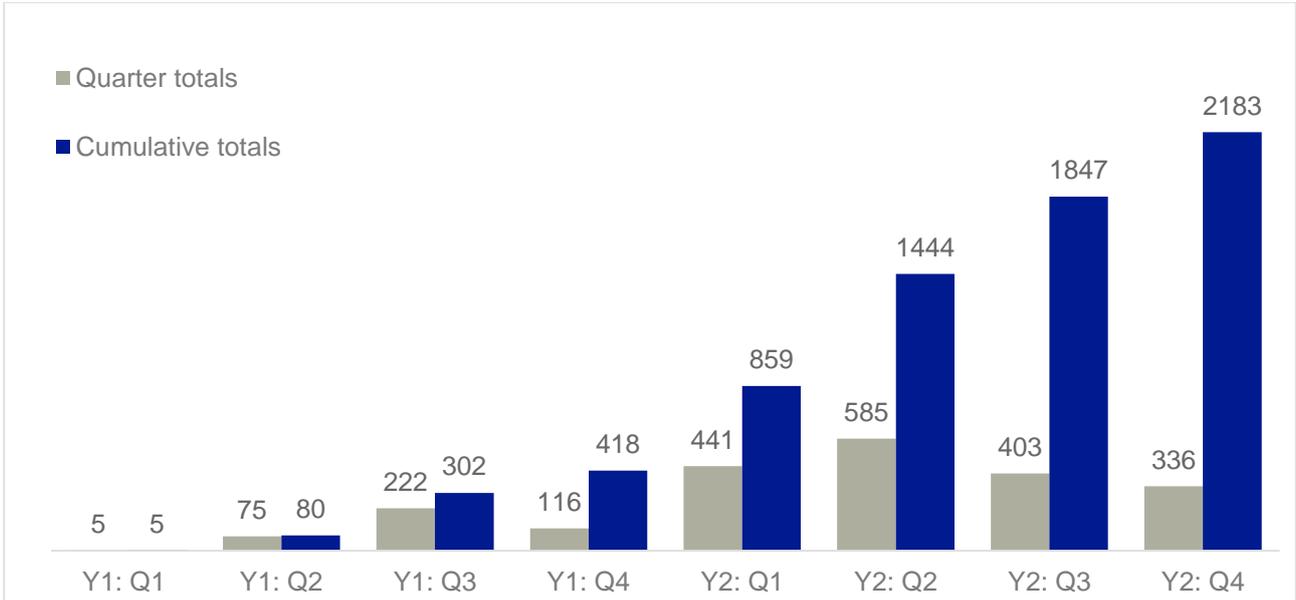
E-learning is offered internally to CAB advisors and the KPI target of 800 CAB advisors accessing the training was not achieved (see Figure 9). TEOs recommended advisors complete the e-learning before attending the TEO-led training. Those who had completed the module felt the content was interesting and practical, however completion rates were low and TEOs felt it would be useful if CAS helped to promote the module to CABs.

TEOs lacked easy access to data showing who had completed the module (this data is currently held by CAS). TEOs said this prevented them from following up with advisors who had not completed the training to encourage them to complete it, which would in turn help meet KPI targets on e-learning completions and increase CAB advisor awareness of, and skills giving advice about, gambling harms.

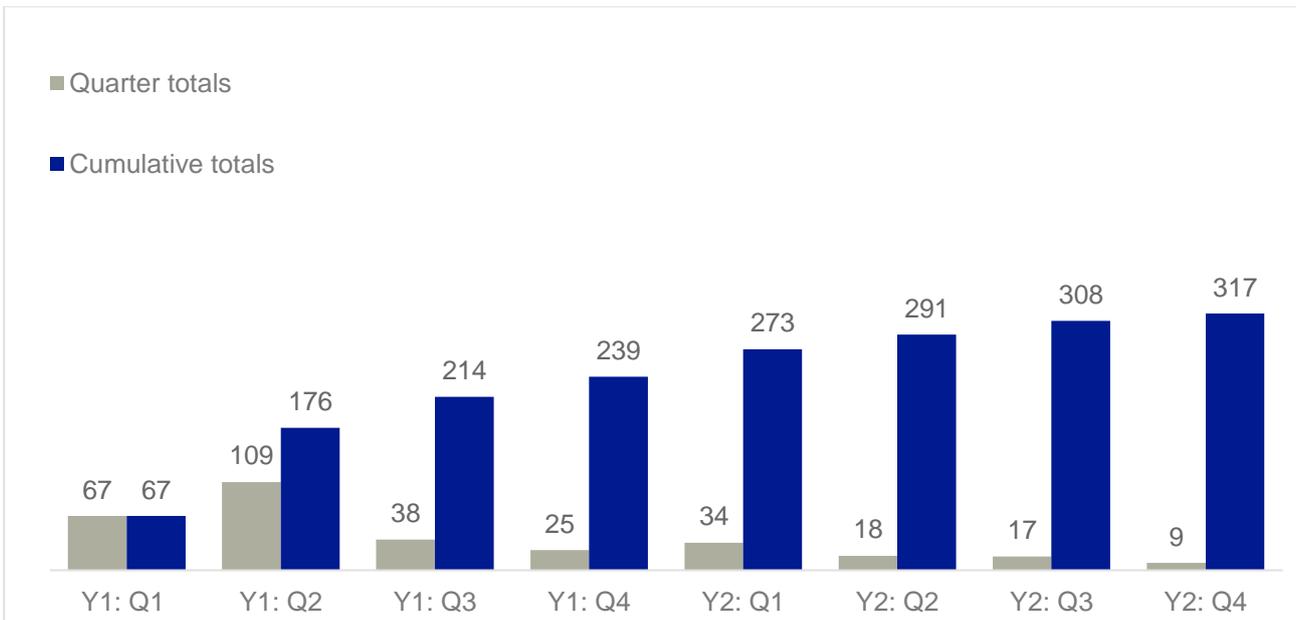
**Figure 7: Training KPI data - Number of training sessions delivered by TEOs (KPI target was 200)**



**Figure 8: Training KPI data - Number of trainees (KPI target was 1800)**



**Figure 9: Training KPI data - Number of advisors accessing e-learning (KPI target was 800)**



**Figure 10: Examples of organisations trained by TEOs** (Collected through Kantar Public’s data collection tool – see 2.3.2)

<p><b>Citizens Advice Bureaus</b></p>	<p>Airdrie, West Dunbartonshire, Cumbernauld, Coatbridge, Inverness, Nairn, Lochaber, Skye &amp; Lochalsh, East &amp; Central Sutherland, Ross &amp; Cromarty, NW Sutherland Dumfries &amp; Galloway, Dalkeith, Dundee, Stirling, Denny &amp; Dunipace, Central Borders, Penicuik, Falkirk and West Lothian CABs</p>
<p><b>Local Government and Services</b></p>	<p>East Ayrshire Council (Local Authority)  Inverclyde Health &amp; Social Care Partnership (Management Group)  Police  Social workers  Trading standards welfare rights team  Paramedics  Law Society for Scotland  Highland Council – Revenue Officers  Legal/Criminal Justice Social Work  JobcentrePlus Work Coaches  Convention of Scottish Local Authorities (COSLA)  Dumfries &amp; Galloway Council  West Lothian College  West Lothian community nursing team</p>
<p><b>Charities</b></p>	<p>Riverclyde Homes (Housing Association)  Routes to Work (Cambuslang office)  Airdrie Action Partnership (community organisations)  Voice of Experience Forum (Represents older people)  Hope for Autism (Supports families with children &amp; young adults with ASD)  Debt advice organisations  Young People Employability Support  Education &amp; Disability Support  Supported Housing Organisation  West Lothian drug advice service  JP Morgan Chase Foundation staff  Penumbra Mental health  Support in MIND  Christians against Poverty  West Lothian Credit Union  First for Fife mental health charity  Currie Explorer Scouts</p>

## 4.2.2 Enablers

Figure 11 outlines the key enablers assisting delivery of training, which are explained in more detail in 4.2.1.

### Figure 11: Training enablers

#### TEO focus on training

TEOs focus on training meant high numbers of training sessions were delivered – this could be due to high KPIs being set for training encouraging TEOs to treat this strand as a priority, or the provision of a training presentation that assisted training delivery.

#### Training content

Low prior knowledge of gambling and its associated harms facilitated the positive reception of training by trainees who found information hard-hitting and surprising, and enthused them about gambling harm being an important issue. This was facilitated by the provision of a training presentation to TEOs that was felt to contain informative and useful information, in a format that could be delivered to trainees without much adaptation.

#### Delivery

Delivering training sessions online meant that TEOs could deliver to organisations in remote areas that may not have otherwise been as easily accessible due to the time it takes to travel there in person.

#### Promotion

On occasion, CAS helped recruit national organisations for training, and TEOs found this helpful as it meant they could spend less time on recruitment and more time on other project activities.

#### Recruiting trainees

Leveraging existing relationships TEOs or CAB senior managers had with local organisations led to more successful recruitment of trainees.

## 4.2.3 Barriers

Figure 12 outlines the key barriers impacting training, which are explained in more detail in 4.2.1.

### Figure 12: Training barriers

#### Delivery

Adapting to online training delivery was an adjustment that some TEOs and trainees found challenging due to difficulties engaging audiences and limited experiences of working digitally.

#### Recruiting trainees

Difficulties recruiting trainees reduced the time TEOs had available to deliver training and focus on the other project strands.

#### E-learning

TEOs lacked easy access to data showing who had completed the e-learning module prior to attending the training session, which prevented them from following up with advisors who had not completed the training, to encourage them to complete it and help reach KPI targets on e-learning completions.

### 4.3 Awareness raising and events

#### 4.3.1 Activities and impacts

While awareness raising was considered an important aspect of the project by TEOs and CAB senior managers, they recognised that most TEOs had, to date, focused on awareness raising activities far less than training. Awareness raising was recognised to be important in several ways. TEOs and CAB senior managers described its significance to reducing public stigma associated with gambling, raising awareness of GSS Scotland support, and encouraging those negatively impacted by gambling to seek assistance.

TEOs and CAB senior managers felt that more time should be dedicated to awareness raising as the project continues. They explained that awareness raising activities had often been focused on less to date, as they had felt it was important for the project to build frontline client advice skills through training before growing public awareness of gambling.

*“What works well is if the [training] presentation is done well and correctly, then people should be much more aware about gambling and educate various organisations about what to do if they come across somebody who needs support.” (TEO)*

*“I’ve thoroughly enjoyed it...[the presentations] are so well received...I think it’s a great project, I think it’s delivering a great message and it’s something in Scotland that we really need to pick up the pace a wee bit on and come up to speed let’s say with alcohol and drugs...we need to get the word out there and make other organisations as aware as possible.” (TEO)*

Awareness raising surpassed the project target for number of presentations to be delivered, with 28 in total against a target of 20 (see Figure 14). However, targets for number of awareness raising events to be attended were not met, with a total of 33 events attended, against a target of 74 (see Figure 15).

TEOs did not routinely or regularly engage in a wide range of activities which limited the impact of this strand of work. Awareness raising activities have included running presentations for organisations, attending events and networking with attendees, raising awareness through local media, and building relationships with local relevant stakeholders and organisations. For example, one TEO spent significant time developing relationships with key figures in Glasgow to raise awareness of the project, such as local councillors and Public Health Scotland, and another TEO ran an awareness raising presentation for a local university. Further, another TEO organised a six-part series raising awareness of gambling harm and GSS Scotland with a local newspaper.

Where available, TEOs have also shared promotional materials about GSS Scotland and gambling harm, such as posters and leaflets, to further raise awareness. TEOs felt promotional materials were important because they were visual and physical resources that provided information about GSS Scotland and gambling harm, that could be displayed and left in offices and public areas to raise awareness. However, TEOs felt that they did not have easy access to promotional materials, and this was affecting their ability to raise awareness, promote the project, and send consistent messages across regions.

*“Remember it took 6 months to get a leaflet, ridiculous, and there was nothing spectacular about them for the length of time we waited. I sent them to health centres, community centres, churches, The Salvation Army, anywhere people congregated” (TEO)*

Similarly, TEOs wanted to post more on social media about GSS Scotland and gambling harms to raise awareness, but felt there were barriers to doing so, such as thinking it was a requirement to get sign off for all social media.

Examples of organisations engaged in awareness raising activities are presented in Figure 13. Despite the range of activities TEOs have engaged with, awareness raising has primarily been achieved through presentations (i.e. shorter, less detailed versions of the training presentations). This has limited the impact of the strand by limiting the types of and ways people were being engaged.

*“[I have] mainly done training sessions rather than awareness sessions.” (TEO)*

*"I look for large companies, fish factories, sewing companies – anybody who has employees." (TEO)*

*"In engagement sessions we talk about the project, the effects [of gambling?], might just have 1 or 2 slides – in training we go in with all the slides, the awareness sessions are different – we do draw a distinction." (TEO)*

However, it is worth noting that one CAB's TEO was an exception and ran numerous and diverse awareness raising activities, increasing the potential for GSS Scotland to raise public awareness. This CAB has two TEOs splitting the role. Role-sharing was felt to be beneficial as it allowed each TEO to focus on parts of the project they have specific skills and experience in. For example, one TEO has skills and previous experience in awareness raising and ran this strand of the project. Further, this TEO was also a CAB senior manager and brought more experience and seniority to the TEO role, along with a good network of relevant local contacts (such as charities and support organisations) they had built up in their career at CAB; their seniority further aided success. As a result, the TEO has successfully engaged with a wide range of events, not just presentations.

As with training (see 4.2.1), TEOs spent significant time network-mapping to identify relevant organisations, including other CABs, and awareness raising opportunities and sending emails to pursue awareness raising opportunities which were often unsuccessful. Further, fewer events were being run due to cancellations associated with Covid-19, and so networking opportunities were reduced. As a result, leveraging any existing relationships TEOs or CAB senior managers already had was key to finding opportunities to run awareness raising activities.

*"I send out 43 emails and I'd be lucky if I get one response." (TEO)*

*"At the moment, everything is dependent on sending lots of emails, with then some organisations responding out of the blue." (TEO)*

*I think Covid had an impact... for networking events and conferences, some things we would have attended that just weren't happening." (CAB senior manager)*

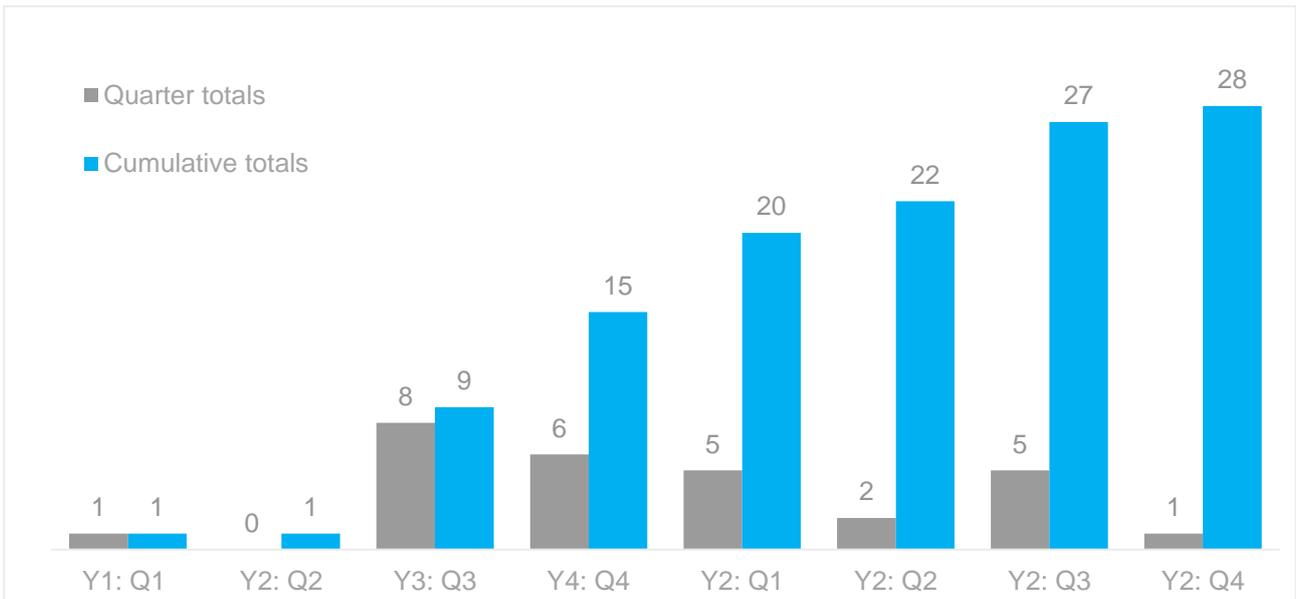
It is also worth noting that there was some confusion about the difference between the awareness raising and training presentation KPI. As a result, some TEOs felt unclear about how training and awareness raising presentations should differ, did not feel completely confident in what awareness raising presentations should include, and were unsure how to record KPI data.

*"There was some confusion between events and training at some point." (CAB senior manager)*

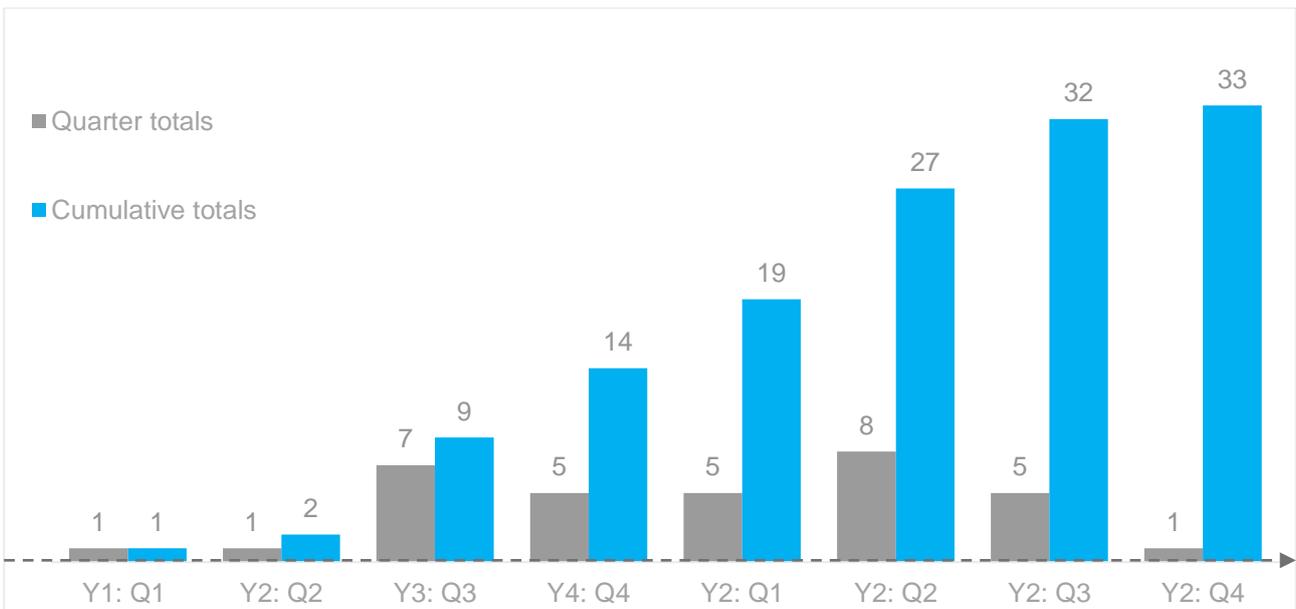
**Figure 13: Examples of organisations engaged in awareness raising activities conducted by TEOs**  
(Collected through Kantar Public's data collection tool – see 2.3.2)

Glasgow Council
Community Justice Glasgow (Glasgow Community Planning Partnership)
Inverclyde Financial Inclusion Partnership
Airdrie Action Partnership
Glasgow Gambling Summit arranged by Public Health Scotland
Public Policy Exchange
University of the Highlands and Islands
West Lothian Volunteer Network
Convention of Scottish Local Authorities

**Figure 14: Open engagement events KPI data – Number of presentations delivered by TEOs (KPI target was 20)**



**Figure 15: Open engagement events KPI data – Number of events attended by TEOs (KPI target was 74)**



### 4.3.2 Enablers

Figure 16 outlines the key enablers assisting awareness raising activities, which are explained in more detail in 4.3.1.

**Figure 16: Awareness raising and event enablers**

#### **TEOs**

In the CAB with two TEOs, role-sharing has allowed each TEO to focus on parts of the project they have specific skills and experience in. This has resulted in this CAB engaging in the widest range of awareness raising activities. Further, TEOs that had previously been in senior CAB positions brought more experience and seniority to awareness raising and event activities, along with a good network of relevant local contacts.

#### **Recruiting for awareness raising events**

As with training, leveraging any existing relationships TEOs or CAB senior managers already had was key to finding opportunities to run awareness raising activities.

### 4.3.3 Barriers

Figure 17 summarises the key barriers impacting awareness raising and events, which are explained in more detail in 4.3.1.

**Figure 17: Awareness raising and events barriers**

#### **Promotional materials**

TEOs felt that they did not have easy access to promotional materials, and this was affecting their ability to raise awareness of GSS and gambling harms.

#### **Activities**

TEOs don't generally engage in a wide range of awareness raising activities and primarily ran awareness raising through presentations, limiting the types of and ways people are being engaged.

#### **KPIs**

There was some confusion about the difference between the awareness raising and training presentation KPIs. Some TEOs felt unclear about how training and awareness raising presentations should differ, did not feel completely confident in what awareness raising presentations should include, and were unsure how to record KPI data.

#### **Recruiting for awareness raising events**

TEOs found recruiting and networking to identify awareness raising opportunities difficult, particularly when events TEOs could have attended and networked at were cancelled due to Covid-19 restrictions.

## 4.4 Client advice

### 4.4.1 Activities and impacts

TEOs and trainees felt that GSS Scotland played a valuable role in improving client advice on gambling harms and aiding the reduction of gambling harm across Scotland. Through training, frontline workers learned how to better advise those experiencing gambling harm. Trainees described feeling more confident and knowledgeable about how to help clients, and were able to offer advice (such as helping clients download gambling website blocking apps), and signpost to relevant support organisations that were felt to be most suited to clients' needs (such as GamCare and RCA Trust). All clients (100%) reported improved mental health from receiving CAB advice in a survey completed after advice was received (this figure should be taken as indicative as these surveys were not systematically completed and the base size is low).

Training also helped to increase frontline workers' knowledge of gambling and its potentially harmful impacts on people's lives, which in turn improved their ability to identify clients experiencing gambling harm. Frontline workers explained, however, that busy caseloads and organisational pressures to increase efficiency could make it hard to find the time to dig into the underlying causes of issues, and remember to look for signs of gambling harm. Frontline workers felt that this impacted their ability to assist those experiencing harm, as many clients sought help for issues relating to gambling rather than gambling directly e.g. a housing issue caused by gambling.

Training also explained how to use a screening tool and trainees recognised its usefulness in aiding identification of those with gambling harms. Despite this, few frontline staff reported using the screening tool as they felt that it could not easily be used as part of sensitive client conversations that build good client-worker rapport. Frontline workers, TEOs, and CAB senior managers emphasised the importance of developing good rapport as it allows clients to open up and share information about their circumstances, enabling relevant and tailored advice to be given. In contrast, systematically going through all screening questions was felt to be intrusive, formal, too direct, and not conducive to natural conversation.

*"The questions are really formal and straight to the point and not how we would approach it. No two clients are the same, some might take offense at that."* (TEO)

*"The client must be comfortable and feel they can open up and not feel judged or uncomfortable in any way, whereas those four questions would just put somebody off... I ask questions in my own way – trying to reword the questions as best as I can."* (TEO)

Similarly, despite GambleAware and training recommending the screening tool to be used with most clients, TEOs, CAB senior managers, and frontline staff felt this was not appropriate. Interviewees thought that asking most clients about gambling behaviours was unsuitable as it may feel odd and intrusive for clients seeking help with an issue not commonly felt to be related to gambling. As a result, all interviewees reported using the tool selectively – only when clients showed signs of experiencing issues with gambling, such as unexplained debt, and seemed open to talking about gambling harms.

*"We felt that using it unless the advisor felt there was an issue wasn't going to happen as it might deter people from coming to us if they feel they have to answer all these questions that aren't related to why they came into the bureau."* (TEO)

CAB senior managers also felt that current training went "only so far" in preparing frontline workers to have successful client conversations about gambling. They highlighted that having conversations about gambling could be difficult because clients often think gambling is not an issue they need advice about, feel uncomfortable about their gambling and discussing it, or only want help with another 'burning issue'. As a result, frontline workers need to have good soft skills to be able to build rapport with clients before asking about gambling and this takes time and careful questioning, making identifying clients who are experiencing gambling harm more difficult.

CAB senior managers felt that the current GSS Scotland training did not fully train trainees in the soft skills required to have successful client conversations about gambling. Similarly, TEOs and senior CAB managers felt that refresher training will be needed to keep gambling harm top of mind (so that frontline workers

prioritise identifying clients experiencing gambling harms), and ensure knowledge is sustained. They felt refresher sessions should inject new information rather than just re-covering the same material used in initial training sessions.

*“I don’t think they [CAB advisors] have the skills to deal with it [clients with gambling issues] now. Thinking of money advisors, if going through bank accounts can usually see a pattern – but I don’t think we have addressed in a serious way [through enough training] the direct contact with clients.”*  
(Senior manager)

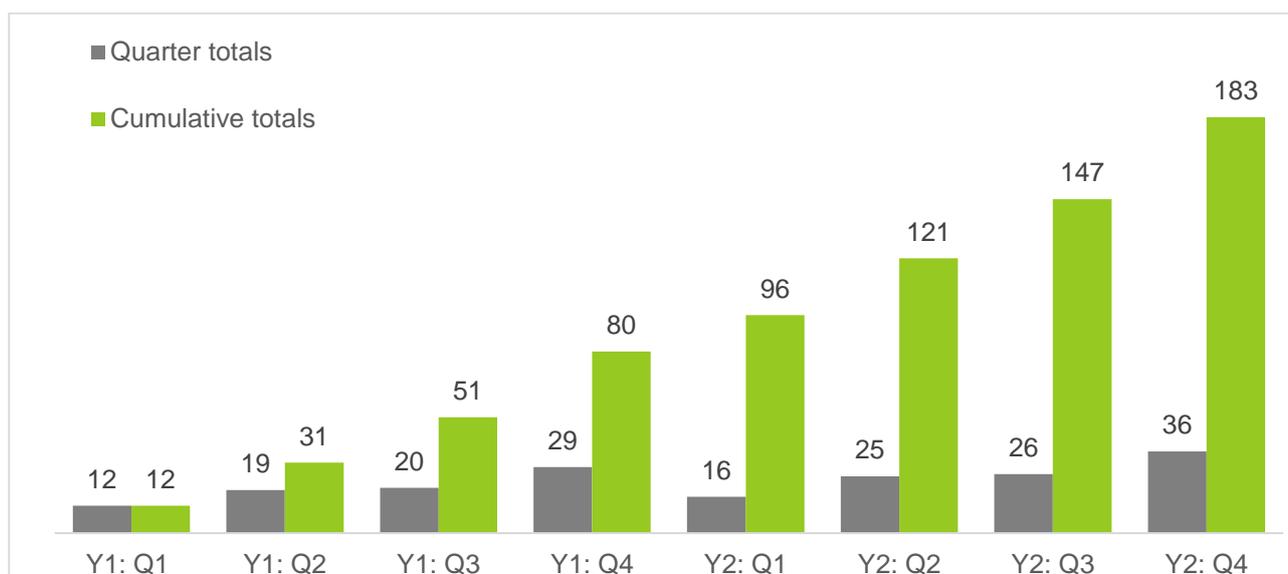
*“Training CAB advisors in an hour and a half session is one thing but we need to go back to that and support them.”* (Senior manager)

*“It’s one of those things that people will come to us but will need to work up their trust with us to do so. It is also hard to pick up on the signs that there is hidden gambling going on.”* (External frontline worker)

*“Yes refresher training, covering different topics – need to make it interactive and a bit of fun.”* (TEO)

Figure 18 shows the number of CAB clients recorded as having received advice on gambling from advisors over the course of the GSS Scotland project. Overall, 183 clients received advice, with 31 of these clients receiving support from TEOs directly.

**Figure 18: Brief interventions KPI data – Number of CAB clients advised on gambling harms (No KPI target set)**



GSS Scotland also helped improve client advice by giving frontline workers the opportunity to refer clients to TEOs to gain advice on gambling harm if they didn’t feel confident offering advice themselves, or where specialist support was required.

TEOs and CAB senior managers felt that few clients had been referred to TEOs, however TEOs hoped that referrals were low because frontline workers were confident advising clients themselves after receiving GSS Scotland training. Further, TEOs described that they had more time to spend on other activities that could in turn improve client advice, such as awareness raising and training general CAB advisors to offer clients advice directly, rather than signposting to TEOs.

TEOs also felt that where frontline workers provided advice themselves it kept client advice joined up, rather than clients receiving advice on different topics from different frontline workers. Finally, TEOs thought that frontline workers providing advice themselves would help to ensure that project impacts are sustained after the project ends and TEOs are no longer in post.

*“[Because of the training] more bureaux are aware of gambling related harms and they have a clear and precise way to deal with it which makes all the difference in delivering advice to a client.”* (TEO)

*“And since doing the training [the debt advisor] has actually come to me and said that’s a couple of clients we’ve identified that it’s actually gambling that’s the problem that’s got them into debt.”* (TEO)

*“Most of the time we are focussed on drugs and alcohol but obviously gambling is a big element in there as well ... we tend to ask those questions [about experiences of gambling] now especially at clients’ assessments.”* (External frontline worker)

Several frontline workers felt that it would be beneficial if GSS Scotland could offer more direct help to those experiencing gambling harm, rather than primarily signposting to other organisations. For example, a social worker said his ability to assist clients was limited as there was no face-to-face support available in his local area, with GSS Scotland not resolving this; it is worth noting that providing this kind of support is outside the scope of the GSS Scotland programme. Similarly, one TEO said that there was little support available in their region’s rural community, limiting client signposting options.

Despite KPI data showing that CAB clients have received advice on gambling harm during the project, and GSS Scotland being perceived by frontline workers to improve client advice, little project data has been collected to evidence how GSS Scotland activities have impacted clients (such as how helpful they have found advice received, or if they have contacted and received support from external organisations CAB advisors had signposted or referred to).

CAB advisors collected data on client satisfaction and mental health impacts of the advice received through feedback surveys immediately after advice (where client consented to giving this feedback). This data could help understand how GSS Scotland is benefiting clients, however base sizes are low, and advisors are not systematically asking clients to complete forms. Additionally, no data is being collected on client experiences when support is received from external training participants. TEOs and CAB advisors further report that they don’t routinely check back in on clients, such as when they are signposted to external support organisations, and so are primarily unaware of the success of support and long-term impact.

See Appendix C for two case studies of client experiences of receiving TEO advice on gambling.

#### **4.4.2 Enablers**

Figure 19 outlines the key enablers assisting the delivery of client advice, which are explained in more detail in 4.3.1.

**Figure 19: Client advice enablers**

##### **Training presentation**

TEOs felt the training presentation slides were good and had enabled them to deliver training that builds knowledge and confidence in how to advise clients in relation to gambling.

##### **Advice giving**

TEOs recognised that CABs were a good point of access to reach those at risk of, or experiencing, gambling harm who might not be explicitly seeking help for it because people often come into CABs with one problem, but advisors then identify related or underlying issues that they can also provide advice on.

### 4.4.3 Barriers

Figure 20 outlines the key barriers impacting on provision of client advice, which are explained in more detail in 4.3.1.

**Figure 20: Client advice barriers**

#### **Screening tool**

The screening tool is felt to often not be appropriate to be used with clients. This results in low use of the tool by frontline workers, affecting ability to identify clients experiencing gambling harm.

#### **Training**

CAB senior managers felt that current training did not fully train trainees in high levels of soft skills needed for conversations about gambling harm.

#### **Advice giving**

High caseloads and organisational requests to increase efficiency made it difficult for frontline workers to prioritise the identification of gambling harm.

#### **Data collection**

TEOs were unsure if the advice codes on CASTLE were being used consistently by CAB advisors, which impacts reliable data available to GambleAware, evaluators, CAS, and TEOs to understand which CABs were offering. Additionally, client feedback was not routinely obtained to help understand the impacts of the project and how it could be improved.

# 5 Lessons learned and implications for project delivery

## 5.1 Identification of gambling harms and the screening tool

Various concerns were expressed about the screening tool (see 4.4.3), specifically around it being appropriate to administer only in specific cases and that it was too formal, direct, and intrusive.

To increase the use of the screening tool and make it more appropriate to frontline staff, consideration should be given to:

- **Producing clear guidance for frontline workers** explaining why gambling could be a problem for clients seeking assistance on a wide range of issues and how to weave screening questions into conversations. This could help increase comfort levels towards asking screening questions to a greater number of clients, and consequently, use of the screening tool, by showing how the screening questions can be used in a way that frontline workers might feel is more sensitive.
- **Redesigning the screening tool** so that instead of prescriptive questions, it is a guide with discussion points to explore. This will be more acceptable to frontline workers who stress the importance of building worker-client relationships through sensitive and unintrusive questions and conversations.
- **Continuing to promote the importance of the screening tool and negative impacts of gambling**, to increase confidence in use of the tool, as well as understanding of its importance.

## 5.2 Client advice

There was a view that GSS training might not fully prepare frontline workers to have conversations about gambling, affecting the extent to which GSS Scotland can improve client advice on gambling harms (see 4.4.3). It was felt that training needed to focus more on building the soft skills of frontline workers, and that it would be beneficial to provide refresher training to help sustain knowledge of how to identify and support clients experiencing gambling harm.

To further develop the training strand of GSS Scotland so that it is better able to improve client advice on gambling harms, consideration should be given to:

- **Creating training materials and plans that TEOs can use** to deliver more and different types of training sessions. This could include refresher training packs, materials about developing soft skills, and guidance on how to use the screening tool and raise the topic of gambling in client conversations.
- **Providing clear guidance on when CAB advisors should use the gambling harms advice codes and project flag** on CASTLE. This would allow TEOs to accurately see which CABs are advising clients on gambling, and which are not. TEOs could use this information to explore the barriers and enablers impacting the provision of advice, and use this information to improve training and refresher sessions.

### 5.3 Awareness raising and events

Awareness raising faced several challenges (see 4.3.3) which impacted the success of the strand: TEOs were not engaging in a wide range of awareness raising activities. There was no consistent understanding of the difference between the training and awareness raising presentation KPIs, TEOs were sent limited numbers of promotional leaflets and posters which they thought were important to awareness raising efforts, and TEOs wanted to advertise GSS Scotland on social media but felt there were barriers to doing so.

To assist delivery, diversify awareness raising activities, and assist TEOs to deliver them, consideration should be given to:

- **Exploring collaboratively with TEOs the range of awareness raising activities they could be involved in**, such as drawing attention to examples of different activities or producing a guidance document, to give TEOs insight into the opportunities available for diversifying the range of awareness raising and engagement activities delivered.
- **Broadening KPIs** so they capture a wider range of activities such as work with local media. This would help ensure KPIs are not barriers to diversity of awareness raising activities. Currently, awareness raising KPIs only capture TEOs delivering presentations and attending events.
- **Adding KPI descriptions** explaining the types of activities each KPI refers to. This would also help ensure TEOs share understandings of the difference between the training and awareness raising presentation KPIs. It would also more clearly show TEOs the range of activities each KPI covers which could lead to TEOs engaging in a wider range of awareness raising activities.
- **Developing an effective system that allows TEOs to access and order more promotional materials** when they run out, and giving TEOs a clear briefing on this.
- **Thinking about how to allow TEOs to use social media more easily for promotion purposes** as it would reduce barriers to successful awareness raising.

### 5.4 CAS' role in GSS Scotland

TEOs and CAB senior managers felt greater project consolidation was needed and that CAS could enable this. TEOs described wanting a more *"joined up"* GSS Scotland approach with greater top-down guidance and management, despite liking the autonomy they had to decide how to run GSS Scotland in their region. Similarly, CAB senior managers said they had initially expected CAS to be more involved and offer greater leadership.

Further, TEOs wanted CAS to help with day-to-day project activities. They wanted CAS to assist with recruiting those to attend training and awareness raising presentation recruitment (which they felt was the most challenging part of the TEO role) by networking and forming relationships with national organisations. TEOs also felt CAS could conduct greater internal awareness raising of GSS Scotland to CABs, and help encourage greater uptake of e-learning by promoting it to CABs.

To help consolidate GSS Scotland consideration should be given to:

- **Encouraging CAS to more visibly lead the project, assist TEOs and their managers, and set the direction of activities.** This could provide a more *"joined up approach"* desired by TEOs.
- **Considering whether responsibility should be given to CAS to form national contacts and carry out greater internal awareness raising**, what capacity CAS has to do this, and whether any KPIs should be set against new responsibilities. This would help assist TEOs to complete their day-to-day tasks and increase project impact.

### 5.5 Embedding GSS Scotland activities

Going forward with the project, CAB senior managers expressed the importance of *"embedding"* GSS Scotland so that client advice on gambling harms becomes routine CAB activity. CAB senior managers

described how making GSS activities everyday parts of frontline workers' and CABs' activities would ensure that GSS Scotland has sustainable and long-lasting impacts.

To ensure long-lasting project impacts, consideration should be given to:

- **Aiming to have gambling harm training included in routine CAB advisor training** as it would help ensure that new CAB advisors are trained in how to advise clients experiencing harms associated with gambling after GSS Scotland ends.
- **How to help reinforce training and familiarity with the topic** such as through providing refresher training options, to ensure that CAB advisors have strong knowledge and skills that allow them to routinely advise clients.
- **Ensuring CAB advisors are using the advice codes and project flag<sup>11</sup> consistently** by sharing information about when and how it should be used. This is important since TEOs were unsure if the 'gambling harm' CASTLE flag was being used uniformly by CAB advisors.

## 5.6 TEO skill sets

The need for TEOs to run activities across all three project strands requires a diverse skill set to successfully deliver the project. The necessary skill set has made it difficult in some cases to find suitable candidates for the TEO position. The absence of systematic onboarding was seen to compound this challenge.

To support the diverse skill sets TEOs need, consideration should be given to:

- **Producing standardised GSS Scotland induction packs and comprehensive onboarding for TEOs** This would help ensure TEOs, regardless of their previous workplace experiences, can run all parts of the project well.
- **Reviewing the job description** to ensure it contains appropriate levels of detail about the skills required for the role, so that applications are made by those with the required experience.
- **Consider TEO role sharing if any future TEO recruitment is undertaken** as this can help ensure each region has the right TEO skill sets (as described in 3.2.1).

## 5.7 Data collection

Several data collection challenges affected the evaluation, and the project's ability to measure and demonstrate impact.

- TEOs were unsure if the advice codes and project flag were being used consistently by CAB advisors.
- CAB advisors were not routinely following up with clients to explore the after-effect of advice.
- TEOs did not routinely recontact external organisations who had received training to assess its impact on client advice given to those experiencing gambling harms.
- Trainee and client feedback forms, as well as client mental health impact forms (that are collected immediately after clients have received advice about gambling harms) are not systematically completed and collected.
- Kantar Public were unable to gain contact details for clients receiving advice from CAB advisors (who were not TEOs) for evaluation purposes (as described in 2.4.1).
- TEOs did not have direct access to information about which CABs have completed e-learning.

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<sup>11</sup> CASTLE is CAS's client management database where information about clients is entered. Advisors select advice codes and project flags that reflect what has happened in conversations with clients and record specific conversation details.

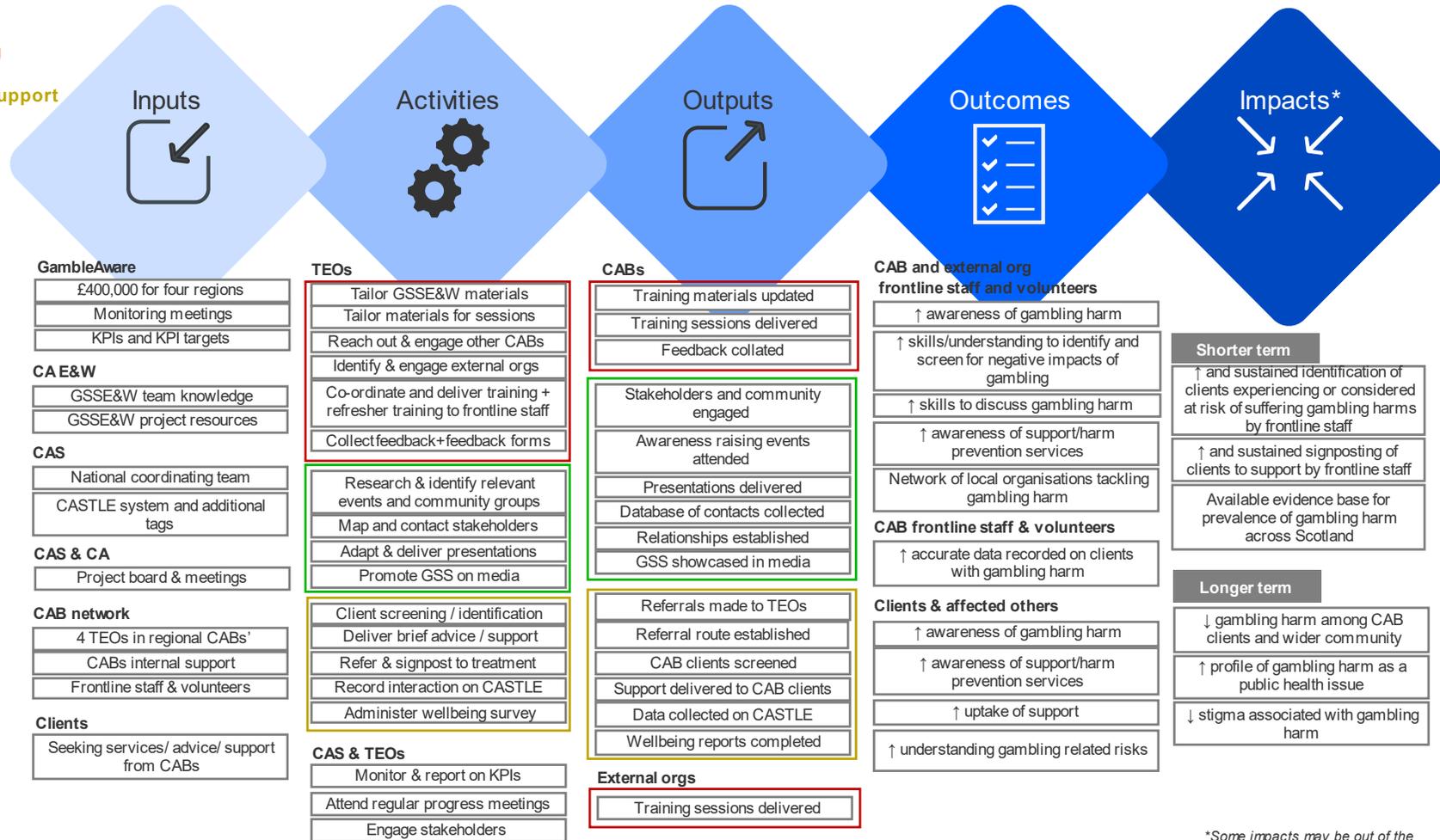
As a result, evidence on how many clients have received support, client outcomes, and additional data that could add to the evidence base about gambling harms in Scotland (such as the proportion of CAB clients receiving or seeking support for gambling) is limited, which makes evaluating project impact and building an evidence base difficult.

To improve data collection, consideration should be given to:

- **Providing clear advice on CASTLE data collection** that TEOs can communicate to CAB advisors to ensure CASTLE data is more reliably recorded and can be used to identify project impact and build an evidence base about gambling harms in Scotland.
- **How data could be collected to evidence client outcomes**, such as how beneficial signposting and referrals are. This could be done through TEOs following up with a sample of clients who are signposted or referred to external organisations that offer specialist support (such as GamCare), to see if they received further advice or support and assess how helpful this was. Similarly, TEOs could follow up with trainees from external organisations to see if and how learning has been translated into practice.
- **Improving collection of trainee and client feedback**, such as sending reminder emails or having reminders for advisors to complete client feedback forms on CASTLE.
- **Identifying data access barriers** if any further evaluation aims to talk to clients about experiences of the project.
- **CAS regularly sharing data on e-learning completions with TEOs**, so advisors who have not completed the e-learning can be reminded to do so.

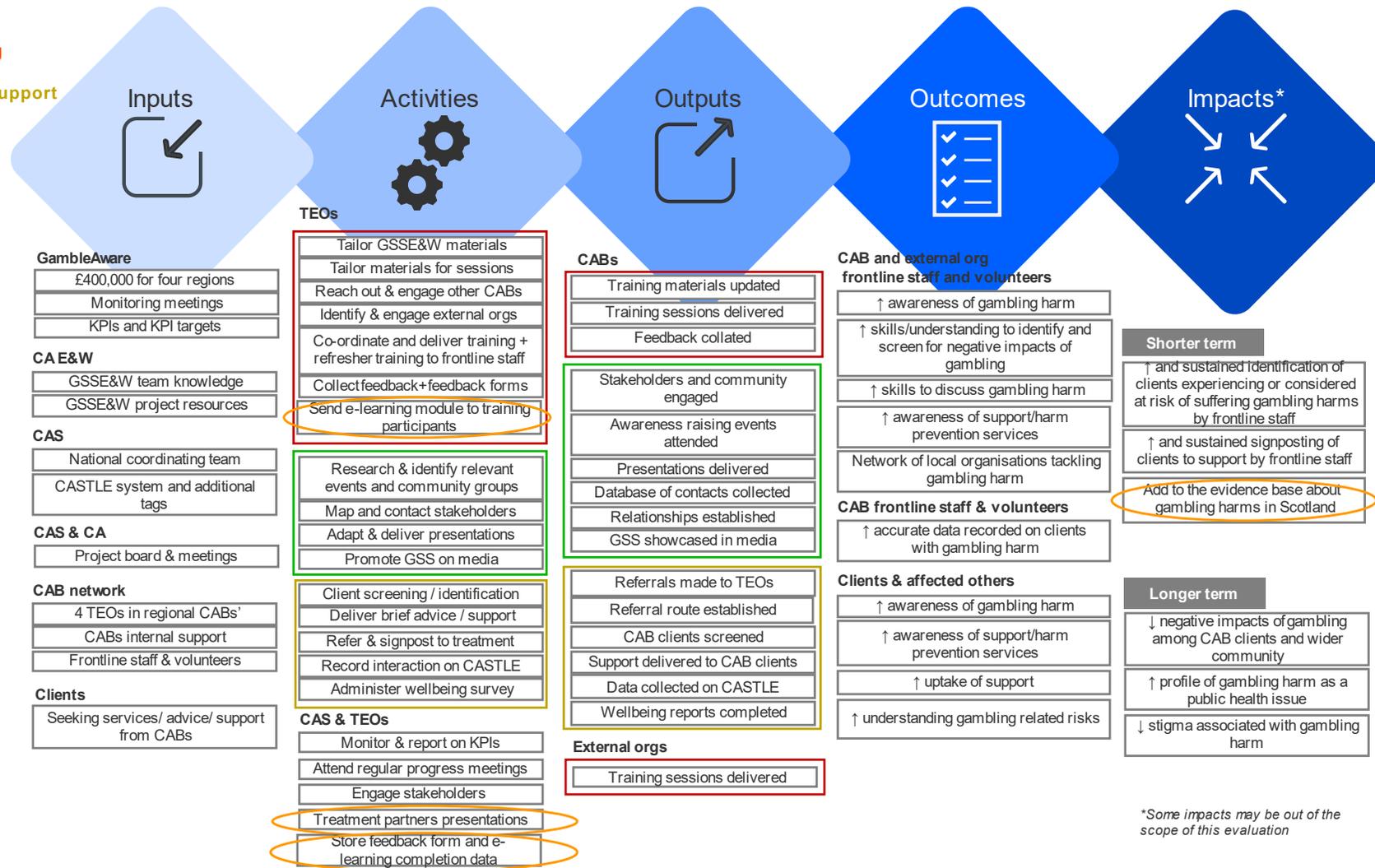
# Appendix A – Initial project logic model

Key:  
 Training  
 Events  
 Client support



# Appendix B – Updated project logic model

Key:  
■ Training  
■ Events  
■ Client support



## Appendix C – Client impact journeys

**Affected other case study:** Sarah went to her local Citizens Advice Bureau to learn about support she could recommend to her son and advice given reassured her that she was supporting her son well

Sarah is a middle aged female with three adult children. She works in healthcare.

Sarah's adult son developed a gambling issue a few years ago which resulted in him **losing his home and moving in with her** with his partner and two children.

Her son had previously attended Gamblers Anonymous. He did not like going because they live in a small town and was worried that people would become aware he was attending.

**Sarah wanted to support her son so approached her local bureau to check if there was any support she could recommend to him that she was not already aware of or had not identified through her own research.**

Her local bureau emailed her a list of support that could help her son – Sarah had already heard of all of them and this **reassured her that she was well informed about support available and was making suitable recommendations to her son.**

Sarah sent her local bureau an email to ask for advice. **Due to her job in healthcare she had a good understanding of Citizens Advice Bureau services** and felt they could help her support her son since they offer for other kinds of addiction and where to get support.



*"I felt it was just a little bit of reassurance maybe, and you know you get the letter back from Citizens Advice and I thought well you know, that's probably everything I'm doing anyway but maybe not everyone has as many resources."*

1

## Case study: John sought help for his gambling from his local Citizens Advice Bureau and as a result he self-excluded from betting shops. He still gambles online using software that minimises his spending

John is a single middle aged man who previously worked as a postman. John has been unemployed for several years due to health issues.



John had debt causing by gambling.

John has previously been in contact with Citizens Advice bureaux to seek advice on his heat and energy bills - he had always had positive experiences of bureaux.

After seeing a poster in his local bureau's window, John reached out to them via email about his gambling. He received a call from the CAB TEO where they spoke in depth about his gambling issues.

John self-excluded from betting shops in his area, and accessed information on Gamblers Anonymous and GamCare websites which he found helpful. John now uses software that controls his spending online and feels his relationship with gambling has improved.

John found it easier to be open with the TEO on the telephone rather than in person. The TEO provided John with information on self-exclusion, gambling support services, and websites with more information.

*"After listening he [the TEO] was kind with his words and reassuring and tried his best to point me in the right direction"*

*"For gambling issues, I think I'd go direct to the companies [such as GamCare] that were suggested [by the TEO] but I'd go back to Citizens Advice for other information"*

# Appendix D – CAB case studies



## Case study: North-East (South-West Aberdeenshire CAB)

*CAB covers rural and urban areas. Key client issues revolved around benefits and energy debt. TEO has been in post since April 2020, and is a long-standing CAB worker with previous experience both delivering training to advisors and supporting clients*

Delivery	Challenges faced	Lessons learnt	Outcomes
<ul style="list-style-type: none"> <li>= Delivered training to all CABs in the region and several external organisations</li> <li>= Attempted to organise events, using selection of slides as promotional materials, however, take up has been limited. Other awareness raising included a local newspaper interview organised through CAS</li> <li>= While screening was not conducted across the region, TEO advocated for identification of gambling harm and supported several clients referred to her</li> </ul>	<ul style="list-style-type: none"> <li>= Engaging external stakeholders, especially for events, could be difficult because of the inability to personally build relationship (due to Covid-19) and limited promotional materials</li> <li>= Onboarding was challenging, and initial lack of structure and changes to training resources negatively affected early efforts</li> <li>= Limited availability of training recipients and support providers in rural areas affected ability to meet KPIs</li> <li>= Stigma still seen as a big challenge for advice giving</li> </ul>	<ul style="list-style-type: none"> <li>= Importance of persistence in engagement with comms and tapping into existing contacts and relationships</li> <li>= Value of using different methods (e.g., social media) to expand the reach of the service</li> <li>= Flexibility to adapt sessions and support, make them relevant and share training with as many organisations as possible</li> <li>= Importance of clear project structure, materials, and vision from the start, including regular meetings with CAS and TEOs</li> </ul>	<ul style="list-style-type: none"> <li>= Increased awareness of gambling harm among training recipients</li> <li>= Training positively received by attendees, who reported increased confidence recognising gambling harm and discussing support available</li> <li>= TEO established a referral pathway to support clients that did previously not exist and received several referrals</li> </ul>



## Case study: West & South-West (Airdrie CAB)

CAB covers urban areas experiencing high deprivation. TEOs role shared by 2 long-time CAB workers (20+ years experience each), one leading on training and the other on events and networking activities. Previous TEO left a few months into the programme.

Delivery	Challenges faced	Lessons learnt	Outcomes
<ul style="list-style-type: none"><li>= Key focus was training presentations, which were delivered to <b>both CABs and external services</b> in the region</li><li>= Reported various successful engagement and events activities and <b>high-profile networking</b> in the Glasgow region</li><li>= TEO's undertook a significant <b>network mapping exercise</b> which helped to identify targets for awareness activities</li><li>= CAB was the <b>first point of contact for initial client support</b>, and clients were referred to specialist support if necessary</li></ul>	<ul style="list-style-type: none"><li>= <b>Previous TEO left November 2020</b> and the GSS programme came to a standstill – this affected activities and KPIs.</li><li>= <b>Covid-19 impacted CAB resource</b> and <b>gambling harms was less of a priority</b> for external organisations due to the knock-on effects of the pandemic, which affected openness to engagement with the programme</li><li>= <b>Identifying CAB's remit in client support was a challenge</b> – dealing with the effects of gambling vs. specialist clinical support</li></ul>	<ul style="list-style-type: none"><li>= Offering <b>taster sessions to external organisations</b> as an initial warm up to the GSS programme was effective as a way into further engagement</li><li>= <b>Two TEOs</b> managing training and events strands separately worked well to focus efforts</li><li>= <b>Existing relationships</b> were key to get gambling harms on the local agenda and promote openness to GSS presentations</li><li>= <b>Network mapping and openness to follow any lead</b> were critical for targeted and successful engagement within the region</li></ul>	<ul style="list-style-type: none"><li>= <b>Frontline worker increased knowledge</b> of problematic gambling and its effects</li><li>= Debt advisors are able to <b>identify gambling harms faster than other frontline workers, and refer clients</b> to the necessary services quicker</li><li>= <b>Increased interest in gambling harm</b> was reported as attendees approached TEOs after events to ask questions about gambling harms</li><li>= TEOs reported <b>positive feelings towards the programme</b> despite challenges</li></ul>



## Case study: South-East (West Lothian CAB)

CAB is in a largely rural region, and mainly serves clients from lower income groups. TEO has been in post for six months, previously working for CAS as a training and engagement officer. He had no previous experience working with clients in a similar way to CAB services.

Delivery	Challenges faced	Lessons learnt	Outcomes
<ul style="list-style-type: none"><li>= Delivery of training sessions was a key focus. TEO also delivered follow up sessions, which went into greater detail, if requested</li><li>= Delivered programme presentations incl seminar at West Lothian Volunteer network meeting</li><li>= TEO kept regular contact with CAB debt advisors as he felt they were the most likely to support clients with problem gambling</li><li>= TEO did not use the screening tool and did not receive any client referrals from advisors</li></ul>	<ul style="list-style-type: none"><li>= Previous TEO struggled arranging training and events, especially with the shift to online due to COVID-19 and as a result few presentations were delivered</li><li>= Response rates to emails inviting organisations to attend training have been low. TEO thought face to face recruitment would work better, but opportunity for this was limited due to COVID-19</li><li>= TEO felt that in person training is more engaging and effective than online, but was unable to conduct session this way</li></ul>	<ul style="list-style-type: none"><li>= Existing TEOs sharing their knowledge helped successful onboarding and day to day working</li><li>= Manager was very useful to gain further contacts for training</li><li>= It would be helpful for CAS to be more involved to build relationships with large national organisations</li><li>= Programme required high levels of proactivity as work is primarily conducted by TEOs and individually at home due to COVID-19</li></ul>	<ul style="list-style-type: none"><li>= Training provided participants with clear and useful information</li><li>= There was a sense that training presentations had positive early impact on increasing awareness of gambling harm and improving client support</li><li>= However, limited evidence of training impact apart from verbal feedback from participants</li></ul>

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## Case study: Highlands & Islands (Inverness CAB)

CAB covers rural areas. Client issues are similar to other CABs, and primarily related to EU settlement scheme. TEO joined programme in June 2021 and was previously a general CAB advisor. They are the fourth TEO in post since the start of the programme.

Delivery	Challenges faced	Lessons learnt	Outcomes
<ul style="list-style-type: none"><li>= Key focus attributed to training strand as KPIs are higher for training than events</li><li>= Placed emphasis on different parts of the presentation, using relevant examples, to adapt presentation to different audiences</li><li>= TEO supported two clients with problem gambling (one was a referral from a mental health organisation, and the other came into CAB looking for advice)</li><li>= TEO onboarding was run by previous TEO before they left post, which was helpful</li></ul>	<ul style="list-style-type: none"><li>= TEO experienced challenges getting additional leaflets to give to training recipients as reminders / resource</li><li>= Travelling to deliver presentations in person would be challenging in post-pandemic times</li></ul>	<ul style="list-style-type: none"><li>= Online training helpful to overcome difficulties travelling to islands to deliver presentations</li><li>= Regular meetings with other TEOs were useful to draw learnings and make improvements to local delivery</li><li>= Flexibility with training arrangements was helpful to ensure attendance and successfully run sessions e.g. mixed organisational training, running mop up sessions</li></ul>	<ul style="list-style-type: none"><li>= TEO believed information delivered through training was having good impacts on awareness raising and improving client support</li><li>= Limited evidence about the impact of training apart from verbal feedback after delivery from participants e.g. after training a housing association wanted to put information about GSS in tenant newsletter</li></ul>

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# Appendix E – GSS Scotland KPIs

## Training KPIs

KPI	KPI Description	Project target	Actual achieved
Training - No. of training sessions delivered	Total number of training sessions delivered by TEOs	200	247
Training - No. of trainees	Total number of trainees who have attended training sessions held by TEOs.	1800	2183
Training - % knowledge shift	Average % knowledge shift before and after training session.	15%	61.5%
Training – Satisfaction rate	Average % satisfaction rate provided in session feedback.	95%	96.5%
E-learning - No. of advisors accessing e-learning	Number of advisors starting eLearning.	800	317
E-learning - No. of people successfully completing assessment at end of e-learning	Percentage of advisors starting and completing in full.	90%	100%
National specialist debt advisor training – No. of training courses delivered	Total number of training sessions delivered by TEOs.	14	22
National specialist debt advisor training – No. of advisors trained	Total number of trainees who have attended training sessions held by TEOs.	168	139
National specialist debt advisor training - % knowledge shift	Average % knowledge shift – recorded before and after training session.	15%	53.5%
National specialist debt advisor training – Satisfaction rate	Average % satisfaction rate provided in session feedback.	95%	96%

### Awareness raising KPIs

KPI	KPI Description	Project target	Actual achieved
Open engagement events – No. of events attended	Number of events attended (online currently).	74	33
Open engagement events – No. of presentations delivered	Number of presentations delivered.	20	28

### Client advice KPIs

KPI	KPI Description	Project target	Actual achieved
Brief interventions - No. of clients advised on gambling harms	Number of clients noted in case recording system as receiving advice on gambling harms – all advisors across network.	N/A	183
Brief interventions – No. of clients referred to GSS	Number of clients referred to TEOs – clients receiving support / advice directly from TEOs.	N/A	31
Brief interventions - No. of clients referred to the National Gambling Treatment Service	Number of clients in case recording system noted as signposted to National Gambling Treatment Service.	N/A	10
Brief interventions – Satisfaction rate	Average satisfaction rate of service. Feedback provided by clients referred to TEOs only - not all advisors.	90%	N/A (Not recorded)
Brief interventions - % clients reporting improved mental health following referral to TEOs	Average percentage of clients reporting improved mental health by completing questionnaire. Feedback provided by clients referred to TEOs only - not all advisors.	75%	100% (Based on small sample size)

# Appendix F – Screening Tool

## GambleAware Screening Tool (GAST-G)

In the last 12 months, have you gambled in a casino, bookmaker, online, at a sports venue, by buying scratch cards, visiting arcades or bingo halls, or other similar activities?

Yes  No (if no, go to question 4)

**If yes, please complete the following questions:**

1. Thinking about the last 12 months, have you bet more than you could really afford to lose?  
 Never (0)  Sometimes (1)  Most of the time (2)  Almost Always (3)
2. Thinking about the last 12 months, have people criticised your betting or told you that you had a gambling problem, regardless of whether or not you thought it was true?  
 Never (0)  Sometimes (1)  Most of the time (2)  Almost Always (3)
3. Thinking about the last 12 months, have you felt guilty about the way you gamble or what happens when you gamble?  
 Never (0)  Sometimes (1)  Most of the time (2)  Almost Always (3)
4. In the last 12 months, have you been affected by another person as a result of their gambling in a casino, bookmaker, online, at a sports venue, by buying scratch cards, visiting arcades or bingo halls, or other similar activities?  
 Yes  No

Total Score out of 9: \_\_\_\_\_

If you have scored 1 or 2 you can speak to a member of staff and find out how you can receive more information or local support.

If you have scored 3 or more, it is recommended that you contact specialist support. The Gambling Support Service can help you with this or alternatively you can contact the National Helpline on 0808 8020133 or visit the [www.begambleaware.org](http://www.begambleaware.org) website for more advice.