

Outcomes of the Community Resilience Fund: Addressing gambling harms in underserved groups

What this research is about

Gambling harms are not evenly distributed across the population. People living in disadvantaged communities and those experiencing issues like poverty, mental health challenges, and housing instability are at higher risk, but less likely to access support. To address this gap, GambleAware launched the Community Resilience Fund (CRF) in 2022. Its goal was to test new ways of reaching people at higher risk of gambling harms by funding organizations that already had trusted relationships with their communities. These organizations were often not specialized in gambling, but worked in areas like homelessness, food insecurity, and support for immigrant and ethnic minority communities.

The CRF was based on the idea that people are more likely to seek help in familiar, trusted settings, and that gambling harms are often connected to other issues like debt, trauma, and substance use. As a result, support for people experiencing gambling harms works better when it is integrated into broader services rather than offered separately.

The CRF involved 21 community organizations across England, Scotland, and Wales that were initially funded for a period of 12 months. Eleven of these organizations received extended funding for up to 3 years in total. Organizations delivered support across the levels of primary prevention (e.g., awareness raising campaigns, education), secondary prevention (e.g., brief interventions, referrals), and tertiary prevention (e.g., counselling, peer support).

The CRF was evaluated to answer three overarching questions:

What you need to know

The Community Resilience Fund (CRF) was launched by GambleAware in 2022. The CRF funded community-based organizations in the United Kingdom to support addressing gambling harms among disadvantaged and marginalized groups. GambleAware commissioned Ipsos to evaluate the CRF, which ran for three years between January 2023 and January 2026.

The evaluation found that the CRF led to increased awareness of gambling harms, improved staff knowledge, and helped reach underserved groups who might not engage with traditional services. These approaches worked best when gambling harms were integrated into existing services and addressed alongside socioeconomic and mental health concerns like debt, trauma, and housing. However, stigma, low awareness, and system-level barriers were challenges for uptake of formal support.

The findings of this evaluation suggest that funding community-based organizations to address gambling harms among underserved groups is valuable. They also show that the impact depends on the availability of long-term funding, trust building in communities, and stronger coordination and collaboration across services.

- How have funded organizations engaged with their local systems and communities?

- How and for whom have these organizations contributed to the planned outcomes of the CRF?
- What support has GambleAware provided to funded organizations?

What the researchers did

GambleAware commissioned Ipsos to evaluate the CRF, which ran for three years between January 2023 and January 2026. The evaluation used multiple sources of data, including community organization reports and funding applications, interviews with staff at both GambleAware and the funded organizations, observations of program activities, case studies of selected organizations, and learning events and workshops.

What the researchers found

Engaging with local systems and communities

The evaluation first considered the extent to which funded organizations engaged with local systems and communities. Funded organizations used four main approaches to do this: enhancing staff training, forming local partnerships, raising awareness, and providing direct support. These activities were more effective when they were pursued together, and organizations that focused on only one area tended to have less reach and impact.

Many organizations initially planned to deliver standalone gambling services, but found this approach was limited by stigma and low awareness of gambling harms. Integrating support for gambling harms into existing services like mental health and housing worked better for engaging people in the community and building trust.

Since most organizations were not gambling specialists, building staff capability was important. Approaches that worked well included embedding gambling harms into routine training, providing ongoing training, and involving people with lived experience of gambling harms. One-off training alone was not enough to build staff confidence in addressing gambling harms. Staff also highlighted the benefits of involving people with lived experience in training.

Organizations also worked to build relationships with local services to improve referral pathways and provide more holistic support. Although partnerships were valuable, progress was limited at times by low awareness of gambling harms and a fragmented service system.

Organizations reached large numbers of people at risk of or experiencing gambling harms through a mix of passive (e.g., leaflets, posters) and active (e.g., workshops, community drop-in sessions) approaches. Engagement with services improved over time as trust increased, especially when gambling harms were talked about within the context of broader wellbeing in “everyday” conversations.

Finally, organizations provided a range of support services for gambling harms. These included brief interventions, counselling, and peer groups. Awareness-raising activities had good reach, but uptake of formal support was lower. Many people preferred less formal support or needed help with socioeconomic stressors first. A key finding was the importance of providing support to people affected by someone else’s gambling problems (i.e., affected others). Many organizations also created women-only services.

Program outcomes

The evaluation then considered how and for whom funded organizations contributed to planned CRF outcomes. These outcomes included those for people at risk of or experiencing gambling harms and affected others, funded organizations, and GambleAware.

For people at risk of or experiencing gambling harms and affected others, organizations generally succeeded at increasing awareness of gambling harms and available support services. There was some evidence that uptake of gambling harm support services improved over time. For people receiving more intensive support, improvements in mental health, wellbeing, and social connection were reported. Organizations also reported that people were less isolated, developed better financial skills, and had more opportunities for involvement with peers.

For funded organizations, staff developed more knowledge of gambling harms as well as confidence and ability to address them. They also generally had greater capacity to offer gambling harm support. Stigma toward gambling was reduced in several organizations. Several organizations started embedding conversations about gambling into routine practice and built new community partnerships. Despite these important impacts, embedding gambling harm support into routine practice was unlikely to work as well after funding ran out, unless organizations had dedicated staff or prioritized this initiative.

For GambleAware, the CRF increased the number of community organizations that provided gambling harm support to disadvantaged and marginalized communities. It also provided insight into how to best reach underserved groups. Learning from the CRF could also inform the design of future funding programs and approaches.

Learning: Success factors and barriers

Regarding success factors, funded organizations found that awareness raising was more effective when they used person-centred, tailored approaches that reflected the needs of the communities they serve. This included adapting language, delivery methods, and cultural framing to make conversations about gambling more relevant and accessible.

Integrating gambling harms into existing services, like those for mental health, housing, or financial support, helped reduce stigma and made it easier for people to engage. Organizations that involved people with lived experience reported higher engagement, as this helped build trust and make the issue feel more relatable to community members. Moreover, organizations increasingly recognized the importance of providing specific support for affected others such as family members.

More broadly, trust and relationship building were central to success. Organizations with established connections were better able to engage people in the community and have meaningful conversations about gambling harms.

One major barrier was the stigma and hidden nature of gambling harms, which made it difficult for people to openly talk about their experiences or seek help. Low awareness among communities and professionals also limited engagement and early identification of gambling harms.

At the system level, limited communication and collaboration between services made it harder to build effective referral pathways and provide coordinated support. Some organizations experienced challenges working with statutory partners (e.g., local authorities), who were hesitant to collaborate because GambleAware was seen as “industry-funded”. This slowed down progress.

Finally, short-term funding and uncertainty about the future of services after the CRF had ended made it difficult to sustain progress and work toward long-term change. Many organizations needed more time to build trust in their communities, form partnerships, and fully integrate gambling harms into their services.

GambleAware’s role

GambleAware’s flexible, trust-based funding model allowed organizations to test and adapt their approaches. This supported innovation and allowed organizations to invest in building trust in their communities and developing partnerships.

Learning from the CRF also shows how important it is to have a national funder acting as a leader and knowledge hub. Through the CRF, GambleAware created opportunities for organizations to come together and share learning, build skills, and avoid “reinventing the wheel” by developing their own resources and training.

The evaluation also highlighted challenges with building a coordinated system for addressing gambling harms. These included fragmented services and hesitancy of some partners to collaborate. This suggests that future funders will need to play a stronger role in supporting system-wide integration and partnerships.

Implications and recommendations

For funders, the findings of this evaluation suggest that they should provide longer-term funding. This

would allow organizations more time to build trust in their communities and develop services for addressing gambling harms. Funders should also invest in a diverse range of community-based organizations, support collaboration, and fund evaluation to understand long-term impacts. Funders should recognize that a flexible, tailored approach is needed to meet the needs of diverse communities.

Community-based organizations are encouraged to integrate gambling harms into existing services to reduce stigma, take a holistic approach that addresses related socioeconomic and mental health issues (e.g., debt, trauma), participate in strengthening referral pathways and partnerships, and improve data collection to be able to clearly show the impact of these activities.

How you can use this research

The findings of this evaluation highlight the value of funding and supporting community-based organizations to address gambling harms among underserved groups. Integrating gambling support into existing services and taking a holistic, person-centred approach can improve engagement. The findings also show the need for longer-term funding and stronger coordination across services.

About the researchers

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About Greo Evidence Insights

Greo Evidence Insights is an independent, non-profit organization specializing in research, knowledge mobilization, and evaluation in the health and well-being sectors. Greo transforms research and insights into actionable strategies to prevent and reduce harm related to gambling, gaming, technology use, and substance use. To learn more about funding for Research Snapshots visit [our website](#).

