

## TFN Impact Report

<b>Name of your Organisation:</b>	Betknowmore UK
<b>Name of the project TFN funded:</b>	ACT Support Network
<b>Date Funded by TFN:</b>	12 June 2017
<b>Were you able to undertake your project as planned?</b>	Yes
<b>Can you describe and/or demonstrate the specific impact that TFN funding has had against your initial objectives?</b>	<p>The TFN funding enabled Betknowmore UK to develop an additional pathway of support in two of the projects provided in Islington; the 'Don't Gamble with Health' (DGWH) licensed betting shop support project and the Islington based mental health project. Both projects provided direct support and treatment to gamblers impacted by gambling related harm, and using the TFN funding we embedded a service for 'affected others' within them.</p> <p>Clients presenting to either project were given the option to also refer people within their support network to our support and treatment team, if, a) it would benefit their recovery and b) the 'affected other' were willing to engage. It was decided to provide the services to 'affected others' as a additional benefit to our gambling clients, rather than as a stand alone service, as we wanted to continue to develop the offering to them and monitor the demand and take up of the service.</p> <p>From August 2017 to present (mental health is still running, DGWH completed in March 2018), we have provided the following to 'affected others':</p> <ul style="list-style-type: none"> <li>• 1:1 outreach support. Provided with tailored plan for individual needs and focus on health and wellbeing issues.</li> <li>• Counselling with our experienced treatment team</li> <li>• Drop in service to 28b</li> <li>• Workshops jointly delivered by BKM to partner orgs in Islington – focusing on awareness around gambling related harm and its wider impact.</li> </ul> <p>Assessment and screening - to date we have kept initial screening and assessment 'light touch', meaning we wanted to provide a service that did not risk further stigmatising or creating a barrier to entry. However, we intend to introduce screening into the next phase of service. The tool we will introduce initially is the CORE 10, which is an evaluative tool which analyses various indicators on mental health. The ten indicators reflect anxiety, depression and suicide ideation.</p> <p>In addition, we are working with Adfam and Gamble Aware on the specific issue of supporting affected others. Adfam is a family support</p>

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	<p>specialist, working in the substance misuse field, Gamble Aware is the commissioning body for the gambling support sector. In February 2018 we provided a workshop for the Adfam management team and continue to develop ideas around potential collaboration.</p> <p>To date, we have supported 12 'affected others'. 11 have been female and one male. All were given tailored support plans and reported benefits in their mental health and safeguards around gambling - see below case studies.</p> <p>We have not fully developed the affected others intervention pack yet. However, we are using a Gambling Action Plan (GAP) - submitted. This is a crisis intervention plan, we have begun using it as part of a resource pack for housing associations and their staff. Housing associations report that gambling is increasingly noted as a trigger for domestic violence or relationship breakdown.</p>
<b>What portion of the project did TFN fund?</b>	15% - pro rota salary to outreach worker & service overheads
<b>How many direct beneficiaries did the TFN funded project reach?</b>	12
<b>How many indirect beneficiaries did the TFN funded project reach?</b>	32 - additional wider family / social network
<b>Were you able to leverage further funding as a result of TFN support?</b>	No
<b>Did you receive any pro-bono support, volunteer offers or introductions as a result of the event?</b>	No
<b>How important was TFN funding in helping you achieve your objectives?</b>	We would have found it difficult to achieve our objectives without TFN funding.
<b>Since presenting at TFN, has your organisation undergone any other significant changes?</b>	<p>Yes, there has been both challenging significant changes, as well as positive.</p> <p>Unfortunately, we have moved out of the service building we were using in Islington, as the building is to be used for a different purpose by Islington council. The notice period was short - 5 weeks - and has left us with a difficult period finding suitable alternative accommodation.</p> <p>Despite the DGWH pilot achieving its objectives and outcomes,</p>

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	<p>validated by an external evaluation service, the Association of British Bookmakers are not continuing to fund the project at present, although may be open to funding at a later date.</p> <p>However, in May 2018, we are relocating to Newham and will be working with Bonny Downs Community Association to establish a new gambling support hub. The project has the support of the Newham CCG and we are excited at the prospect of working within a borough with lots of invested stakeholders.</p>
<p><b>Do you have any other comments or feedback on the experience of the TFN process?</b></p>	<p>I have been through funding applications with TFN. Both were extremely well managed and great experiences for me personally. The presentations have provided an opportunity to practice key skills, as well as presenting our project ideas in a format where we have to be mindful of keeping messages on point, clear and impactful.</p> <p>The TFN donors have been very supportive and I have been very grateful for the expert feedback and attention to detail they have provided.</p>
<p><b>Can you tell us any personal stories to highlight the value of the project?</b></p>	<p><i>Case study 1:</i></p> <p>SP (mother) - Her son has been gambling excessively putting himself into debt and destroying his relationships with his family to who he relies to repay his debts. She has been feeling extremely anxious and depressed by witnessing the situation her son is putting himself in. She claimed she did not know what to do, how to help.</p> <p>Support:</p> <p>Most of the support offered to her was on the phone, after one 1:1 meeting. Support was provided on how to detect and react to a gambling behaviour. Ways to cope and how not to unintentionally reinforce the addictive behaviour offering a better understanding of the problem itself and guidance.</p> <p>Outcome:</p> <p>She referred many times that the fact that she was able to open up about the situation and get some useful advice was a major psychological relief as she was never able to talk about it without people judging rather than helping. She also stated that understanding better the addiction helped her dealing with it and help her son adequately.</p> <p>Assessment tools suggested: CORE 10. GAST-S.</p> <p><i>Case study 2:</i></p> <p>KP (partner) – KP contacted our services as her relationship with her partner, as well as her own mental health, were suffering great impact</p>

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	<p>from her partner’s excessive gambling habits.</p> <p>Support:</p> <p>On the phone about once a month (we agreed she would call me when needed). Cognitive Behavioural therapy techniques were used to help KP cope with the situation and improve her mental health. Some guidance was offered to her to understand how the addiction works so she could act accordingly to help her partner when going through crisis. Focus on her own wellbeing was important as she wouldn’t be able to help her partner if herself was going through a crisis.</p> <p>Outcome:</p> <p>KP was extremely grateful that she could openly talk about her problems with a professional and get some useful advices. She referred it was a great relief having someone to talk to who would understand what she was going through. Her wellbeing and relationship improved on the short term as she felt more confident, and more hopeful, after our talks on the phone.</p> <p>Assessment Tools suggested:</p> <p>CORE 10. GAST-S. ACT. GAD. (anxiety assessment tool)</p> <p><i>Case study 3:</i></p> <p>MJ. (partner and mother) – MJ’s has suffered from the impact of various types of addiction in her family during her whole life, including gambling addiction of which both her son and ex-partner suffer. Monica has been depressed and suffered from low self-esteem during most her life.</p> <p>Support:</p> <p>1:1 sessions. Mentoring provided MJ a place to speak about her feelings and emotions about her son and ex-partner. She finally accepted that she couldn’t help them as it was affecting her too much. CBT and soft counselling session help her rebuild her confidence and improve her wellbeing. An ACT plan was design for her to set up goals to herself and prioritise her own personal targets before trying to help others. MJ was referred to our mental health services for counselling to work</p> <p>Outcome:</p> <p>Great improvement of her wellbeing in general as well as financially. She started going on holidays with friends and prioritise her own mental health without feeling guilty about it. Her self-esteem</p>
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	<p>improved as well as her mental health.</p> <p>Tools suggested: CORE 10. GAST-S. ACT. GAD</p>
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