National Gambling Treatment Service campaign evaluation

Key highlights report

March to May 2022 Burst

Campaign overview

Campaign introduction

The National Gambling Treatment Service (NGTS) campaign aims to reach those experiencing gambling harms (PGSI 8+) and encourage them to seek support through the National Gambling Helpline and/or the NGTS. The campaign was live between 22 March to 10 May 2022, with a budget of around £815k.

Campaign background

The NGTS is a collaboration of several organisations including GamCare, Gordon Moody and the Primary Care Gambling Service, working together and in collaboration with the NHS, to provide free confidential treatment and support for anyone experiencing gambling related harms.

Although the claimed appetite for treatment and support is relatively high among those experiencing harm from gambling (PGSI 8+), the number that receive support from the NGTS is relatively low with 8,490[1] supported in 2020/21. Our annual treatment and support survey, conducted by YouGov, has shown that simply knowing that support was available, and where to find it, was a key motivator for people to access support. Among those experiencing gambling harms (PGSI 8+), more than one in four (27%) mentioned this as something that would make them get help.

To address this need, GambleAware launched the first NGTS campaign in February 2020 to raise awareness of the service and increase the number of individuals using it. Since then there have been four bursts of campaign activity focused on men, and one burst of campaign activity focused on women.

Campaign execution

For the most recent burst of the NGTS campaign the charity partnered with M&C Saatchi (creative), Freuds (consumer engagement) and Goodstuff (media planning/buying) to develop an integrated multichannel campaign. The campaign aimed to increase awareness of the NGTS, and encourage those experiencing a high level of harm from gambling (PGSI 8+) to seek support within the NGTS.

The creative assets were similar to previous executions to retain residual awareness and build on the equity of previous campaigns, by focusing on the all-encompassing nature of gambling and signposting the NGTS as a place of support, the final execution can be found on our website[2]. However, there were a few differences in the creative approach this burst compared to previous bursts:
- **Imagery:** The family members in the background were removed in the assets to focus on the person who is gambling. In general, the presence of family members was often popular in focus groups among this audience, as it gives relevance and emotional cut-through. However, our recently published scoping study showed executions like this could stigmatise those experiencing gambling harms by suggesting they are a worse friend/family member by ignoring those around them. We know the main barrier to accessing treatment and support (among PGSI 8+) is stigma when support seeking and as such wanted to reduce this element.
- **Headline:** The headline changed to highlight that all-encompassing feeling that accompanies a loss of control when gambling, with "Worried about your gambling?" on some assets and "Is gambling always

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[1] Annual Statistics from the National Gambling Treatment Service 2020/2021
https://www.begambleaware.org/sites/default/files/2022-03/FINAL_GA_Annual%20stats_report_2020-21_English.pdf
[2] https://www.begambleaware.org/national-gambling-treatment-service-campaign

on your mind?" on others. In general, using a question is seen as a useful behaviour change technique among those experiencing gambling harm as:

- o It is simple, non-threatening, draws people in, makes people think/reflect
- o It allows people to think about the questions in the context of me/my life/my gambling behaviour and/or a loved one
- o It empowers the individual to come to their own conclusion rather than top-down telling people what they could/should be doing

- **Messaging:** To reduce stigmatising narratives, normalise support seeking, and get across the effectiveness of the service:
  - o The radio ad was updated to focus more on the efficacy of the service rather than an interaction between a father and daughter (as with the above, although it performed well previously among our audience we were concerned it was perpetuating stigmatising narratives).
  - o To further add to the efficacy of the service, a new supporting message was included "our experts help thousands of people every month gain more control of their gambling". This helped normalise help-seeking behaviour and softened the entry point of the service. To note, whilst cutting out gambling is sometimes the end goal, our insight has shown that talking too directly about stopping gambling can often overwhelm people experiencing harms from gambling, as gambling is strongly embedded in their self-identity and daily lives/social networks.
  - o An updated end line was included "For free and confidential advice chat to us online or over the phone today" to prevent fears of having to pay for treatment and emphasising that anything discussed would be confidential due to the stigma associated with gambling harms.

Our core goal was to reach those experiencing gambling harms that could benefit from treatment and support (defined by a PGSI score of 8+). The focus of media spend was among:

- Primary: Men aged 25-34 C2DE
  - o With spend upweighted within London, the North West, and Midlands
- Secondary: Men and women aged 25-55 C2DE

Media spend was focused on those who show the highest prevalence of gambling harm in our treatment and support survey (i.e. men aged 25-34, geographic areas). Given the relatively broad demographic audiences, digital signals and segments (e.g., Nielsen segments, gambling app usage, purchase data, gambling enthusiasts) were utilised alongside certain contextual environments (e.g., Pulse magazine for GPs) to make sure the campaign reached the correct individuals.

In addition to the core activity above, there was some low level (but highly contextual/targeted) spend to reach GPs, as this group are a key source of referrals into the NGTS and can be the first person someone experiencing gambling harms opens up to. We also included affected others as part of an overhear audience as they often see/recognise the campaign without needing to be directly targeted.

The campaign was live between 22 March to 10 May 2022, with a budget of around £815k, across Digital (c. £425k), Audio (c. £275k), and Print (c. £115k). It is worth noting that GambleAware has an extremely low share of voice (c. 1-3%) when advertising due to the significant spend by the gambling industry.

Campaign evaluation

Evaluation approach

GambleAware commissioned YouGov to conduct a campaign evaluation. The evaluation has been merged with the Treatment and Support Survey to provide treatment and support insights throughout the year, alongside being a vessel to evaluate the NGTS campaigns. In line with this approach there are "big dips" every November with around 18,000 interviews taking place using alongside "mini-dips" spread out across the rest of the year with around 3,000 interviews. The methodology is an online survey with a nationally representative sample collected of adults aged 18+ living in Great Britain, alongside a boosted sample of those at risk of and/or experiencing gambling harm (PGSI 1+, PGSI 8+). Data are weighted (by age, gender, ethnicity, work social grade and region) back to the known population profile of Great Britain to counteract non-response bias.

Fieldwork for the combined treatment and support survey with the NGTS evaluation have taken place at:
- **Baseline** (i.e., first combined survey to use as a benchmark) was conducted between 18 November – 14 December 2021. A sample of 18,038 was achieved (i.e., "big dip")
- **Pre-wave** (i.e., most recent baseline before launch of the campaign) was conducted out between 19 – 31 January 2022. A sample of 3,059 was achieved (i.e., "mini dip") overall, with a sample of 732 who were at risk of and/or experiencing gambling harms (PGSI 1+).
- **Post-wave** (i.e., after the majority of the campaign activity) was conducted between 3 – 23 May 2022. A sample of 3,090 was achieved (i.e., "mini dip") overall, with a sample of 739 PGSI 1+.

The evaluation is therefore slightly different to previous evaluations where surveys took place right before campaign activity, and at the end of activity. This new approach is better from an organisational point of view, but does have some limitations:
- The sampling approach had to change to previous campaign monitoring, meaning back data for previous bursts is no longer directly comparable
- The baseline and post campaign evaluation are not as close to each other as they would be otherwise, which increases likelihood of "noise" affecting baseline measures, making it more challenging to show impact over time
- PGSI 8+ are rare in the population (c. 3% incidence within the YouGov survey) making them difficult to recruit in the evaluation, thus the sample size is relatively small and definition is wide (i.e. all men and women aged 18+ with a PGSI score of 8+ are included, rather than those targeted directly by media). This can also make it more challenging to show the campaign impact.

Overall, there were four core audiences within the campaign monitoring:
1. **Those experiencing a high level of gambling harm:** Men and women aged 18+ with a PGSI score of 8+ on the PGSI scale
2. **Those experiencing any level of gambling harm:** Men and women aged 18+ with a PGSI score of 1+ on the PGSI scale
3. **Affected others:** Men and women aged 18+ that are negatively affected by someone else's gambling
4. **General population:** Men and women aged 18+

Most of the results are focused on PGSI 8+ due to the campaign's key-performance indicators being set against this audience. We also monitor the campaign performance among a wider group at risk and/or experiencing harm from their gambling (PGSI 1+), alongside the general population and affected others to understand the wider impact of activity. This campaign's monitoring data is viewed alongside broader data below to provide a

more complete view of campaign performance, such as website data, owned social media data, paid media/partnership/PR data and social listening. This provides a holistic view of how the campaign performed and feeds into a process of continual learning and development.

Evaluation highlights

The campaign monitoring data showed mainly positive results among our campaign target audience of those experiencing gambling harm (PGSI 8+) based on May 2022 data. Below provides an overview of some of the main findings:

- **Prompted campaign recognition is strong:** Around half (52%) of respondents with a PGSI of 8+ recognised at least one element of the campaign, with recognition of images particularly high (46%)
  - o There was also considerable recognition among a wider audience of PGSI 1+ (38%) and affected others (29%)
- **However, prompted recognition of the NGTS brand remains low**: Awareness of the NGTS (13%) and National Gambling Helpline (20%) remained in line with baseline results
- **The advertising was relevant and cut through with the audience:** There was a high level of agreement with the statements that the ads *told them something useful* (55%), alongside being *relevant* (53%) and *memorable* (52%)
- **Key messages within the ads resonated** with the audience with agreement high for the ads showing *you may need support if gambling is always on your mind* (61%), *where to go if gambling is always on your mind* (60%), and *those who are experiencing problems from gambling are not alone* (57%)
  - o Interestingly, among PGSI 1+ these metrics were higher (72%, 74% and 71%) which follows a trend we've seen across campaigns, with message takeout among PGSI 8+ often lower in tracking studies compared to wider groups of those who gamble
- **The campaign has increased knowledge, motivation and confidence:** Around half indicated that the ads increased their *knowledge of where to start to get help with gambling problems* (49%), *motivation to go to the NGTS to help myself if needed* (49%), and *confidence that if I needed help with problems gambling, the NGTS would be right for me* (59%)
- **The campaign awareness is resulting in reported behaviour change:** Amongst those who recognised the campaign, the vast majority (83%) claimed to take action as a result of seeing it, demonstrating the strength of the campaign to incite behaviour change.
  - o There was also a notable level of claimed behaviour among all of those PGSI 1+ (40%)

A range of wider data sources also demonstrate the campaign's significant impact:

- **The campaign delivered strong reach**:
  - o The campaign received widespread media interest with 75 pieces of coverage delivering almost 56 million impressions across broadcast, national print and online, consumer, regional, marketing trade, and gambling trade. This included ITV, The Guardian, Sky News and Times Radio. A bespoke interview with comedian John Robins[3], who talks openly about the impact of gambling on his life and his journey with recovery, reached almost half a million.
  - o The campaign assets on paid-for advertising media have been viewed tens of millions of times across media, with digital media delivering almost 56 million impressions, audio 98 million impressions and print 1 million impressions
- **The campaign generated real-world action:**
  - o Digital mentions of keywords relating to gambling treatment spiked on launch day, rising to 156% of the 90-day average, demonstrating that the campaign successfully put gambling harms into the public eye and stimulated discussions around the topic

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[3] See video at: https://www.youtube.com/watch?v=zRPxuiaFmCo

- o All activity successfully drove traffic to the BeGambleAware website showing the large demand for treatment and support among those experiencing harms from gambling:
    - Over 1.6 million visits to the website over the NGTS campaign period, up 60% from previous equivalent period
    - Over 400,000 visits to the NGTS campaign landing page, up 2,938%
    - Over 33,000 clicks through to GamCare's website (where the helpline chat is hosted), up 65%
- o Alongside an increase in website visits, the campaign coincided with an increase of inbound calls or chats to the GamCare helpline to over 26,000 (up 6%), unfortunately these did not filter down to target calls (c. 5100, down 5%) due to callers hanging up before an operator could speak to them or calling the helpline incorrectly/not being in the right place.

Next steps

GambleAware, alongside our network of NGTS providers, are committed to increasing awareness of the service and making treatment and support as accessible as possible. As before, we will continue to engage with those experiencing gambling harms in the testing process of communications, alongside feeding in insights from adjacent workstreams, most notably around stigma.

Later this year we will also launch two major prevention campaigns which will draw on insight and principles from both behaviour change and public health expertise to increase awareness and understanding of gambling harms, particularly amongst those at risk and affected others. The next wave of our new women's campaign for example will raise awareness of the gambling harms women experience, how to spot the early warning signs of harmful gambling and signpost women to advice and support to keep their gambling under control. Then the 2022 World Cup provides a platform for the next iteration of our successful 'Bet Regret' campaign, which will raise awareness of harmful gambling, particularly amongst young men, and encourage people to take steps to reduce their risk of gambling harm.