

# Harnessing Lived Experience in a city-region gambling harms reduction intervention

Dr Catherine L. Jenkins<sup>1</sup>, Dr Thomas Mills<sup>1</sup>, Professor Paula Reavey<sup>2</sup>, James Grimes<sup>3</sup>, Professor Anthony Moss<sup>2</sup>, Professor Jane Wills<sup>1</sup>, Professor Susie Sykes<sup>1</sup>

<sup>1</sup>Institute of Health and Social Care, London South Bank University; <sup>2</sup>School of Applied Sciences, London South Bank University; <sup>3</sup>Education Unit, Gambling with Lives

## Background

The Lived Experience (LE) of people affected by public health issues can provide unique insights to improve interventions. LE contributions to the gambling harms field are understudied. The purpose of this research was to identify these diverse contributions, including ones that do not feature in the literature on how LE is involved in other sectors. This poster reports qualitative exploratory research into the value of LE as part of an evaluation of a city-region gambling harms reduction initiative in the UK.

## Methods

Interviews (n=32) and 3x focus groups explored the practical application of LE with participants: people with LE, public health professionals, and Voluntary and Community Sector (VCS) staff. Collaborative data analysis combined the Framework Method with theme development inductively (from participants' accounts) and deductively (from academic and grey literature).

## KEY MESSAGES:

- Increasing availability of gambling necessitates involving communities in efforts to reduce gambling-related harms.
- The use of LE in gambling-related harms prevention efforts and research can inform intervention development.

## ACKNOWLEDGEMENTS

This evaluation was conducted by PHIRST South Bank and funded by the National Institute for Health and Care Research (NIHR; PHIRST South Bank Award ID NIHR131568 and Research Award ID NIHR135398). The views expressed are those of the author(s) and not necessarily those of the NIHR or the Department of Health and Social Care. Thanks to our partners, Greater Manchester Combined Authority.

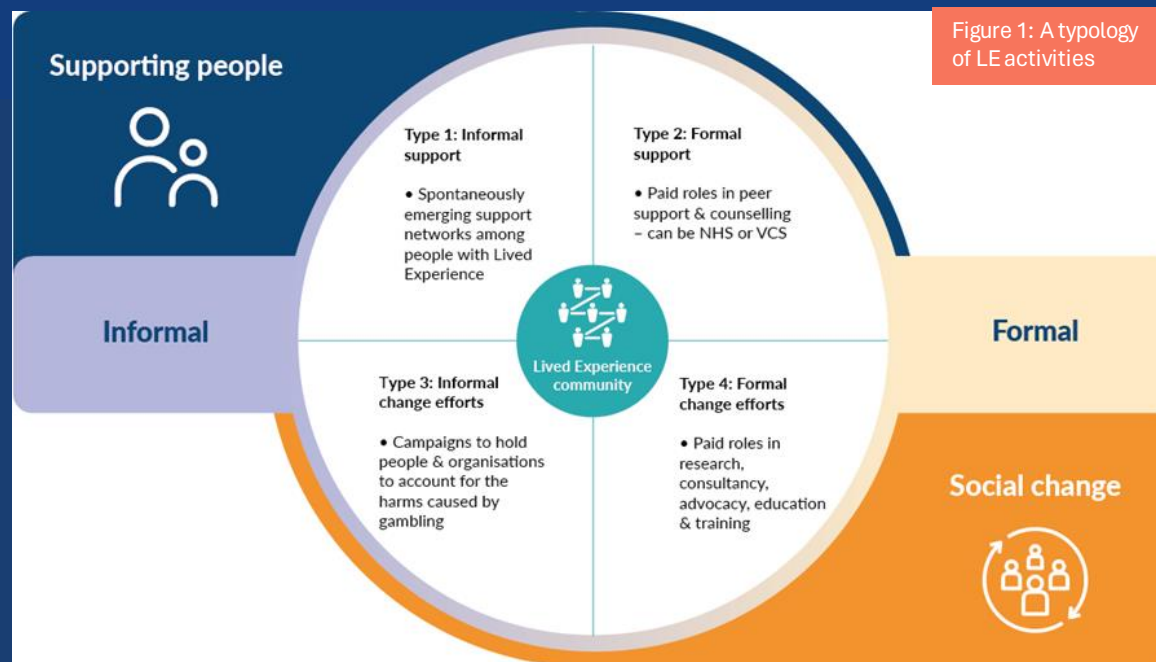


Figure 1: A typology of LE activities

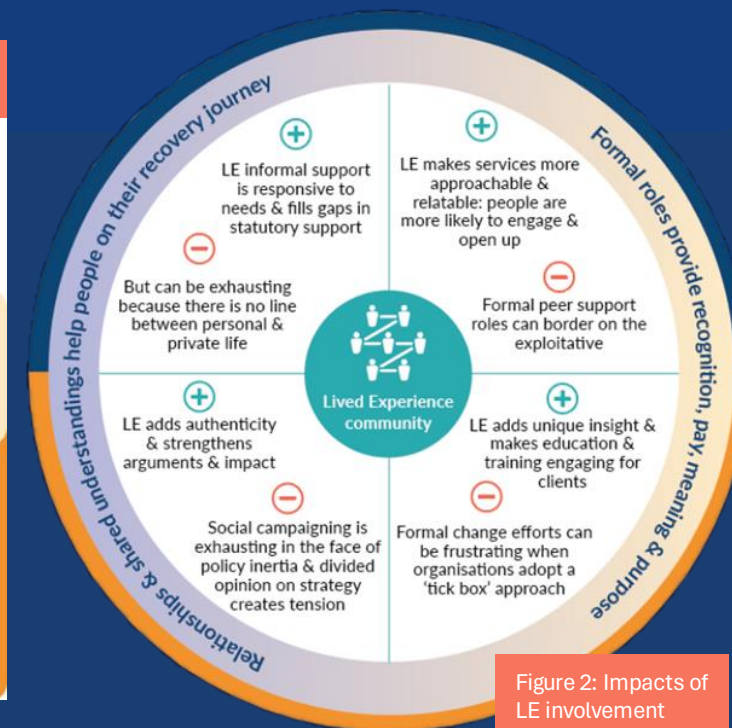


Figure 2: Impacts of LE involvement

## Results

People with LE were found to undertake many activities in support of public health that spanned informal and formal domains: Figure 1 presents a typology. The themes explored:

- Personal journeys to LE involvement
- The value added by LE to interventions (Figure 2)
- Emotional impacts on people with LE: both positive and negative (Figure 2)
- Collective LE and diverse lived experiences

## Conclusion

Harnessing LE at a regional level requires multi-setting support, free from stigma and industry influence. This can help ensure the sustained vitality of a diverse LE community specialised in gambling-related harms and equipped to navigate conflicting emotions and a challenging policy environment.