

SCOTTISH COMMUNITY LINK WORKER NETWORK

GIVING A VOICE TO SCOTLAND'S COMMUNITY LINK WORKERS

Scottish Community Link Worker Network Knowledge Exchange Event
Wednesday 24 April 2024 on Zoom

Introduction

The Scottish Community Link Worker Network (SCLWN) hosted its 6th Knowledge Exchange event on 24 April for community link workers from across Scotland. The knowledge exchange events are designed to bring CLWs together with organisations that can support them in their work. Roisin Hurst, Network Project Manager, chaired the event which featured presentations from Lisa-Marie Patton from GamCare, Maureen Hunter from Stroke Association Scotland and Anne Garry from Sight Scotland Veterans.

1.GamCare

GamCare is an independent charity is in its 27th year of operation and is best known for the National Gambling Help Line which operates 24 hrs a day, 7 days a week. Through the charity's website you can find a considerable number of resources and opportunities for support to both gamblers and those affected by someone's gambling (affected others).

Women and gambling

The number of people gambling has risen over recent years particularly with access to so many gambling sites now possible through mobile phones, tablets and computers. While men will talk about gambling, women talk about taking part (notice the change in language). Women don't always say they gamble. Women often gamble to escape a difficult personal relationship, or due to caring or work pressures, boredom, loneliness, social isolation and depression – it provides a coping mechanism. It can also be due to a relationship breakdown in later life, empty nest syndrome when children leave home or the death of a parent, all of these situations can impact. Generally, women begin gambling later than men and develop problems more quickly – these are the things that women have told GamCare.

Women's problems with gambling develop more quickly than men's because they tend to choose quick, high-stakes games such as online slots and bingo that they can play continuously. Almost 70% of women who gamble use apps and websites. Gambling operators spent £747 million in 2020 on marketing messages directly

aimed at identifiable groups of individuals, such as women of a certain age or socio-economic groups (Gambling Commission, 2021).

Women tend not to acknowledge that their gambling is causing harm to themselves and others until it reaches crisis proportions. The dual addictions of some women and complex problems such as mental health conditions and abusive relationships may mean that women don't feel that a gambling support service will meet their varied needs, and the perception remains that gambling support services are for men.

Over the past five years, the number of women reporting a gambling problem has risen at more than twice the rate of men, according to figures from GamCare. This rise in reporting has been attributed to the ease with which women can now gamble online using their smartphones.

Contributory factors

Here are some of the key risk factors:

- Coming from a situation where trauma, abuse or neglect has been a factor can lead to people seeing gambling as an escape. One person said that a happy memory she had from childhood was sitting on her grandfather's knee watching the racing; to recreate that feeling she started gambling.
- An early big win is another factor many people mention – the excitement that brought. They want to recreate it and so chase another win. Some people also say later that they wish they hadn't won.
- There is a very high connection between alcohol and/or drugs and gambling. I have heard stories from gamblers who have turned to using cocaine at the same time and find it easier to confess to their drug usage than to their gambling. Parents often can't win – too high or too low supervision can spark gambling in a child as can peer pressure.
- Social isolation and low self-esteem are factors - people see adverts on the TV for Foxy Bingo and Gala Bingo and see people enjoying themselves and decide they want to do that too. All those people enjoying themselves – dressed up and laughing.
- A lot of betting goes on in prison due to so much down time – not usually for money, although this does happen, but also for cigarettes or services.
- Poverty is also a driver. People want to win to help them make ends meet, for example, people using their last £5 to buy a scratch card. If they win they can buy the week's shopping. Scratch cards are to be phased out when the new company takes over from Camelot.
- Gambling establishments such as bookies open up in deprived areas just like fast food outlets. There has been research about the number of bookies per 100,000 of population. Outside of London, Glasgow has the highest number of bookies per 100,000 of the population with 194 betting shops which relates to one per 3264 people.
- Casinos have no windows and offer free food and drink; they pump fresh air in to keep people awake. Bingo halls often offer cheap food – so someone can

go in and play with friends in the morning, have lunch and decide just to stay on. So, people get drawn in in a number of different ways.

How can we reach people affected by gambling?

Could a question be incorporated into CLWs' internal assessment and review processes.

It may be that you need a preamble question of "Do you gamble or does someone you live with or are friendly with gamble?" However, as you have found out today, some people may not see their activity as gambling and so you may need to probe further.

The negative effect of gambling could impact any part of their life, such as debt or relationship difficulties. If they answer 'no' to this question, they may share something in the future as they build their trust in you.

Please contact Lisa-Marie Patton or find out more information about how to get support for someone you know who is affected by gambling.

2.Stroke Association Scotland

Please see attached presentation for more information.

The Stroke Association provides a range of different support services:

Stroke Group Network: to get support and meet other people affected by stroke. See what's available in your local area

Scotland Online Stroke Group: Scotland wide online stroke group for people who have had a stroke and their carers. They meet on Thursday morning from 10.30am fortnightly **via Zoom**. If you are interested in attending, please email the Engagement Team to request the zoom link to join. The groups provide people with an opportunity to speak to others who have had a stroke or are in a caring role to share experiences and access peer support.

Weekly telephone calls 'here for you': beneficiaries receive a 1 x 30 minute call per week over an 8 week period. This service is available for stroke survivors and carers. Please go to our website to make a referral.

Facebook
We have a peer support group on Facebook for people who have had a stroke and carers. Search for Stroke Association - Scotland Stroke Connect Group.

Our publications: our publications provide you with trusted and accessible health information which can help answer your questions and improve your understanding of stroke and its effects. You can also order information in print and alternative formats such as braille.

Online community: join our online community online community and connect with thousands of people on the forums. Chatting to people who understand stroke first hand can help you feel more supported.

Stroke Association helpline: 0303 3033 100
www.stroke.org.uk
Facebook: StrokeAssociation - Scotland
Twitter: @StrokeScotland

3.Sight Scotland Veterans

Please see attached presentation for more information.

Sight Scotland Veterans (SSV) supports veterans who have a sight impairment.

Veterans: this includes men and women who served in the Army, Navy, RAF, Reserves (TA), including National Service - people in military roles who have been employed by the Ministry of Defence. Some people who were in the Merchant Navy during times of war have also been commandeered by the military to serve during conflicts and would also therefore be classed as military veterans. We at Sight Scotland Veterans are happy to discuss technicalities with individuals if there are any questions about the service types.

Sight Impairment: we would look at supporting any veteran that has an eye condition which affects their everyday living, such as preventing them from driving or reading text. We can look at providing short term support for people with reversible sight issues, such as cataracts and longer-term support for people with permanent sight impairment, such as caused by macular degeneration, glaucoma or as a result of a stroke or diabetes. Again, we are happy to discuss eligibility with an individual.

Significantly, the majority of SSV members are National Service Veterans - most men aged 79 and over today will have been required to undertake National Service and are therefore classed as being “veterans”. Many of this group of veterans don’t recognise themselves as being a veteran so don’t know they are entitled to support from SSV in the event of them developing a sight problem.

SSV supports all sight impaired veterans whether their sight was affected during and/or as a consequence of their time in service or in the lifetime afterwards. Most developed sight problems a long time after service due to age related eye conditions such as macular degeneration and glaucoma or through other health related problems such as stroke or diabetes. We can discuss any diagnosis or level of sight issues.

Examples of Support: on receipt of a referral on our webform, we would usually phone the veteran and check appropriateness of referral, then allocate to the local worker. Restrictions allowing, a local worker would then visit the veteran at home to assess their needs and start to arrange any equipment and support they would like to accept. Some common outcomes would be as follows:

- To provide equipment to assist with daily living – lighting appliances and anti-glare glasses to make the most of remaining vision; TV magnification glasses to enhance the view of the screen and activate audio description to regain enjoyment of television; silicone red mat in the kitchen to increase colour contrast and improve safety when making hot drinks; talking watch and talking calendar clock to independently keep track of time.
- To refer onwards to SSV Rehabilitation Officer colleague for a low vision assessment at home to provide a magnifier or other electronic device to regain access to printed text, such as reading mail, newspaper and magazines.
- To provide a talking book player and subscribe to talking book library to regain enjoyment of reading for leisure.
- To refer onwards to SSV wellbeing hub for regular group phone calls to reduce social isolation, if desired, place the veteran on the waiting list for our activity centre.
- To maximise financial wellbeing and perhaps provide a grant for sight loss related adaptations or purchases.
- Sight Scotland Veterans also has two **activity centres**, at Paisley and Linburn near Edinburgh, where veterans meet and take part in many adapted activities such as archery, woodwork, exercise, etc. for the sight impaired.

To make a referral: please feel free to get in touch by phone on Freephone SSV Enquiry: 0800 035 6409 or through our online referral form You can also sign up for our newsletter for professionals

Roisin thanked everyone for attending the session and reminded everyone to contact Lauren and her to discuss topics and/or format for future peer support sessions.