

ONLINE GAMBLING: THE HEALTH IMPACT OF AN EMERGING PHENOMENON

Position Statement from the Council of Medical Associations of Catalonia

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The concept of pathological gambling

Gambling has been an entertainment and leisure activity since ancient times. However, it can cause problems and have a significant impact on people's lives. **Risk-free, or social gambling** does not cause any disturbance; does not affect personal, family, employment, academic or vocational obligations; and does not cause financial problems. However, for some people, gambling can have negative consequences, triggering a pattern of problematic or pathological behaviour. **We then talk about pathological gambling.**

In this sense, the Mental Disorder Diagnosis Manual from the American Psychiatric Association (DSM-5) defines gambling disorder as persistent, problematic, recurring gambling behaviour leading to clinically significant deterioration or malaise. It appears when the individual presents four or more of the following key indicators during a period of 12 months:

- 1) excessive concern for gambling
- 2) the need to stake increasing amounts of money to achieve the desired excitement
- 3) repeated failure to control or stop this behaviour
- 4) unease or irritability when an attempt is made to reduce or stop gambling
- 5) use of gambling as a way of escaping negative emotional states
- 6) persistent gambling to try to win back money lost
- 7) lying to conceal gambling behaviour and the problems deriving from it
- 8) losing personal relationships or putting them at risk
- 9) belief that others will provide the financial resources for them to escape from desperate situations.

It is considered that there is a high risk or **problematic gambling** when two or three of these key indicators are presented (some authors consider the presence only a single factor to be sufficient).

Causes of pathological gambling

Gambling addiction is a disorder with many potential causes involving environmental, psychological and neurobiological risk factors. The interaction between these factors will promote the development and continuation of the disorder. **Social or environmental** factors have been described, including gender, age, the age a person starts gambling, socioeconomic status, education, the availability and range of gambling, the type of gambling, advertising

and traumatic events. From a **psychological** point of view, factors such as impulsiveness, the search for sensations, deficits in strategies for coping with problems, decision-making disorders, cognitive distortion, emotional control difficulties, personality traits and others have been identified. Finally, from a **neurobiological** point of view, the involvement of reward circuits in the brain, the existence of genetic polymorphisms (particularly associated with dopamine receptors), a family history of substance abuse and comorbidity with other disorders (such as ADHD and alcohol and substance consumption) have been highlighted, among others.

Epidemiology and the magnitude of gambling

Gambling is defined as an individual risking money on the outcome of a future event. From an epidemiological point of view, gambling is having a very significant increase in the European Union and is one of the fastest expanding activities at the moment. Spain is one of the countries where gambling has most increased. In fact, 0.9% of the general population presents a gambling addiction problem throughout their lives and up to 4.4% show risk behaviour. However, among the adolescent population, the European Union (EU) figure ranges between 0.2% and 5.6%. In Spain, the figure is one of the highest, at 4.6%.

The studies coincide in highlighting that the **risk profile among adolescents and young people** is associated with being male, from an ethnic minority, having a gambling atmosphere in the family, being a younger adolescent, online gambling, using gambling as a way of escaping problems and negative emotional states, and being a consumer of alcohol and tobacco. The average age that pathological gamblers begin gambling behaviour in Spain is 19 years. For social gamblers it is 23 years. However, in the clinical population it has been shown that 37% of pathological gamblers begin this type of behaviour before the age when they are legally allowed to gamble.

One of the possible reasons put forward to explain the increase in rates among adolescents and young people is that they are the first generation who have experienced such a big increase in gambling opportunities.

One of the areas of gambling that has most increased among patients seen at health services or by gambling rehabilitation associations is **sports betting** (online and in betting shops).

The studies indicated that adolescents (aged between 14 and 17 years) believe that sports betting is an activity implicit in sport. They consider it to be a social experience bringing together friends who gamble for fun, believing that it is easy to win money and does not involve any associated risk. It must be noted that, for the first time in history, children, adolescents and young people are constantly exposed to advertising and marketing to stimulate gambling, which is presented as an activity related to luxury and glamour, popular among certain celebrities from the worlds of sport or showbusiness. This encourages cognitive distortions and magical thinking related to the belief that prizes are guaranteed. We might say that sports betting has crossed a threshold and become accepted as “normal”.

Pathological gambling online: a public health problem

Recent studies show that boys who place sports bets are particularly vulnerable to developing gambling problems (especially if they have positive attitudes towards the advertising strategies used). People who already show problematic or pathological behaviour are also at risk. Advertising induces the impulse to gamble (particular when it appears during sporting events); makes it difficult to maintain any efforts to limit gambling (therefore reducing self-control); and makes it easier to relapse (in people already showing excessive or problematic gambling behaviour).

The proliferation of online gambling, particularly sports betting, is a cause for alarm and concern all over the world, basically because of the addictive potential of this kind of gambling among young people. The international evidence shows how the demand for treatment and for appointments at specialist units has increased among sports gamblers. They also show that, since 2011, advertising of certain types of gambling has increased by 160%, particularly during sporting events. Although in the majority of countries the legal age for gambling is 18, between 66% and 75% of adolescents aged between 14 and 17 say they have gambled at some point.

To reverse this trend, important socialisation factors should be considered. These include the role of the family as a model; the reduction or elimination of repeated exposure to advertising and marketing strategies (especially during sporting events); and the need for advertising campaigns that would not stimulate magical thinking and distortion among gamblers or the belief that gambling is an activity implicitly related to sport or to a form of social cohesion with peers.

General recommendations

Urgent regulation of the advertising and marketing of gambling must be clearly promoted, in such a way similar to that adopted in the case of alcohol and tobacco. This is even more important now that gambling is considered in the diagnostic manuals to be a **non-substance or behavioural addiction**.

It is important to limit and restrict advertising that contains messages related to gambling as a social activity and form of cohesion; during televised sporting events; and gambling advertising messages that are made attractive to children and adolescents with the use of sporting or showbusiness figures.

Education campaigns are needed on the risk of gambling and the content of the advertising and marketing messages used by the gambling industry. These should be aimed at parents and teachers as well as children and adolescents.

Ultimately, the scientific research carried out to date confirms the need to develop and implement **preventive programmes** aimed at providing resources and mechanisms to protect gambling users and consumers in order to minimise the damage and risks associated with this activity (particularly among the most vulnerable groups).

Prevention should begin in schools as it has been shown that the age people start gambling is a risk factor clearly associated with problematic and pathological behaviour (regardless of

gender and current age). These psycho-educational and prevention programmes could be associated with advertising campaigns especially aimed at adolescents and young people.

Meanwhile, restrictions on **gambling for children** must be strengthened, designing formulas for controlling access both to online gambling operators' websites and all gambling premises (training employees, requesting specific personal information that can be checked in different ways). Through advertising campaigns, courses and seminars (in primary and secondary schools), these prevention programmes should also give information about the real statistical probabilities of winning prizes, establishing examples and comparisons with other unlikely or improbable events.

The role of physicians

The medical profession needs to know the scale of this public health problem and to be particularly alert to gambling and its consequences, particularly because of the importance of early detection and the age people begin such behaviour. For this reason, as well as exploring indicators of gambling behaviour – such as frequency, sums staked, type of gambling, lying to conceal behaviour and its financial consequences, the need to stake increasing sums of money or to gamble to win it back – other associated comorbidities that could increase the risk of developing problematic gambling behaviour should be taken into account. These include anxiety-related and depressive disorders, alcohol and substance use and attention deficient and hyperactivity disorder. Any gambling behaviour, whether or not it is intense, that has ceased to be entertainment and causes functional repercussions in the person is a reason for referral to a specialised unit for assessment, diagnosis and potential treatment.

Authors:

Susanna Jiménez, coordinator of the Pathological Gambling Unit of the Psychiatry Service at Bellvitge University Hospital; **Josep Manuel Menchón**, head of the Psychiatric Service at Bellvitge University Hospital-Idibell; **Sònia Miravet**, GP, director of Martorell Primary Care Team and deputy secretary of the governing board of the Medical Association of Barcelona (CoMB); **Eulàlia Ruiz**, GP, teaching coordinator for residents at the Sant Ildefons Primary Care Team in Cornellà and member of the governing board of the CoMB; and **Antoni Trilla**, head of the Preventive Medicine and Epidemiology Service at Hospital Clínic in Barcelona-UB-ISGlobal and member of the governing board of the CoMB.

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