

Change and constancy in defining at-risk gambling

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Outline of the presentation

The presentation focuses on discussing the phenomenon known as at-risk gambling.

- What do we mean when we talk about at-risk gambling?
- What has changed over the years in the understanding of at-risk gambling, and what has remained constant?
- What kind of research is needed?

The presentation is based on Finnish Association for Substance Abuse Prevention EHYT's recent report regarding at-risk gambling and its prevention, and various research articles.

Definition of at-risk gambling

- By at-risk gambling is usually meant gambling that causes sporadic harms to the gambler, but gambling does not yet cause significant or extensive harms (See e.g. Browne et al 2017).
- WHO's ICD-11: " Hazardous Gambling or Betting refers to a pattern of gambling that appreciably increases the risk of harmful physical or mental health consequences to the individual or to others around the individual that may require intervention or monitoring but is not considered a disorder."
- But what does at-risk gambling mean in practice?



Why is the definition important?



- All preventive work should be based on scientific research.
- When we educate the professionals whose job it is to bring up gambling we need to have clear definitions and indicators for them that they can effortlessly use in their daily jobs.
- People deserve to be informed about at-risk gambling (see Lower Risk Gambling Guidelines).
- The gambling companies have their own definitions that they are using in their own efforts to contact at-risk gamblers/problem gamblers. We need to make sure that the criteria are strict and people are contacted rather sooner than later.

What has changed and what has remained constant in the understanding of at-risk gambling? (1/2)



- Terminology around gambling harms, gambling problems and gambling addiction has changed: take for example disordered gamblers/gambling disorder
- At-risk gambling seems to be a more recent concept (“hazardous gambling or betting”)
- Why does the change happen? Why do some things remain constant?
- Is it because we as a scientific community have gathered more and more accurate information about at-risk gambling and/or at-risk gambling? Or is it because of a massive expansion of gambling worldwide? Is it because of medicalisation? Because more and more treatment is available? Is it because NGOs get funding to do preventive work and treatment?

What has changed and what has remained constant in the understanding of at-risk gambling? (2/2)



- Our understanding of the concept of vulnerability and of vulnerable groups: it is essential to understand that certain groups of people have a bigger risk of experiencing gambling related harms so that we can target and segment our messages accordingly.
- **BUT** at the same time we need to be aware that this kind of paradigm may involve the loss of agency of groups deemed vulnerable.
- An example: Finnish pensioners and slot machines in grocery stores

What kind of research is needed?



- The phenomenon of at-risk gambling needs to be defined more precisely. There seems to be no consensus on the matter in the field.
- More research longitudinal research dealing with at-risk gamblers so we can gather more info on temporal changes.
- More research on how quickly non-problematic, recreational gambling can turn into at-risk gambling and problematic gambling and what are the phases between these two extremes.
- More research done in other fields than in psychology. More historical, cultural, and sociological research. We need to understand the bigger picture beyond individual level and experience.
- More research done in other countries and cultures than the Anglophone countries (the US, Canada, the UK, Australia & New Zealand).

■ Do we pay enough attention to at-risk gambling and at-risk gamblers?



- No we do not.
- In addition to talking about problem gambling we also need to address the issue of at-risk gambling and share knowledge about the phenomenon for the general public.
- Who should this? We all (NGOs, researchers, gambling companies etc).



The take home message



- The way we understand gambling and gambling related risks, harms and problems is constantly changing and dependent on the gambling culture, societal regulation, medicalization etc.
- The scientific consensus on at-risk gambling is welcome and needed but it should be based on a broad multicultural research material rather than research done only in the Anglophone world and only in the field of psychology.

Sources



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- EHYT Report 2022: Lind, K. (ed) 2022: Riskitason rahapelaaminen ja haittojen ehkäisy. EHYT report 2022. [At risk gambling and prevention of gambling harms]. https://ehyt.fi/wp-content/uploads/2022/06/Rahapeli_selvitys_verkkoon_2022.pdf (in Finnish)
- ICD-11 : 6C50 Gambling Disorder: <https://icd.who.int/browse11/l-m/en#/http%253a%252f%252fid.who.int%252fid%252fentity%252f1041487064>
- Salonen, A., Hagfors, H., Lind, K., Kontto, J.: Gambling and problem gambling : Finnish Gambling 2019 : Prevalence of at-risk gambling has decreased. Statistical report in English: <https://www.julkari.fi/handle/10024/139651>
- To read more about lower risk gambling guidelines go to: <https://gamblingguidelines.ca/lower-risk-gambling-guidelines/what-are-the-guidelines/>



**Thank you for your
attention!**

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