

Inter-country comparisons in gambling research

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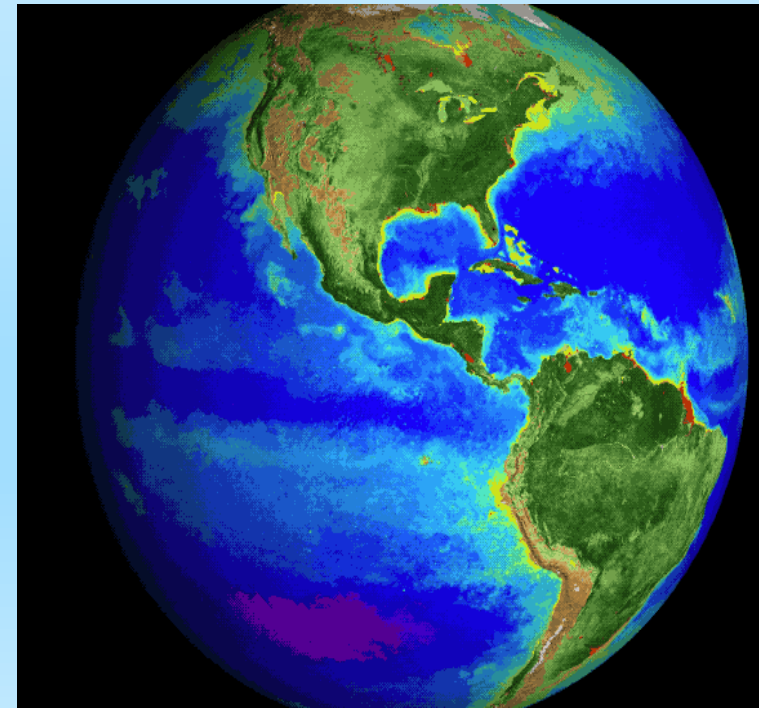
**An international comparative study of gambling, problem
gambling and the role of accessibility in higher risk
gambling
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Introduction

Gambling worldwide has many features in common. Since countries differ in terms of their gambling markets, gambling behaviors are embedded in a specific social and environmental context.



Why conduct a cross-national gambling study?

- An international cross-sectional study allows for **comparisons** of the same variables across countries with different regulatory frameworks, religious and cultural differences.
- Helps understand how different **regulatory environments and cultural contexts influence** gambling behaviors.

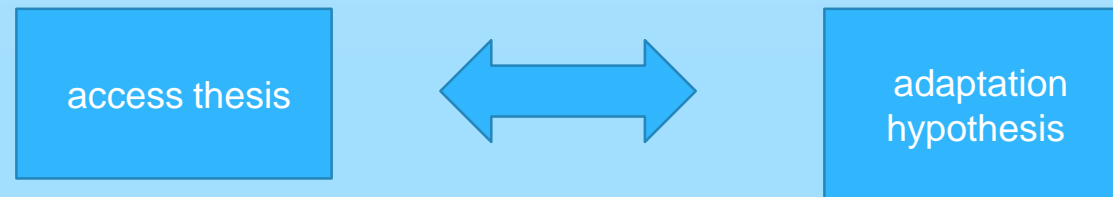


Accessibility

- A multidimensional concept
- Physical accessibility – geographic features (location of gambling venues, number of venues)
- Social accessibility – social and cultural approval
- Cognitive accessibility – people's understanding of how to gamble.



- A meta-analysis of 34 surveys conducted in Australia and New Zealand revealed interesting findings reflecting forces that operate simultaneously according to the access and adaptation hypothesis. There was a positive association between the density of EGMs and problem gambling (which supports the **access thesis**), but over time, the prevalence of problem gambling decreased (which supports the individual and community **adaptation hypothesis**) (Storer et al., 2009).



Community capital: A pro-recovery environment

- Community and residential environments that are kept free of gambling venues by statute are conducive to recovery. The participants mentioned the 2017 legislation that banned EGMs throughout the country as a key factor in creating a pro-recovery
- “When the machines were around I wanted to play them constantly. After they were gone, I stopped looking for them.”
(male, 71, married)
- “Many thanks to the finance minister who closed the EGMs. I was so happy that day. ...Of course there are illegal machines, but when it's legal it's different”
(male, 42, married)



Four countries

- Four countries with differing regulatory histories took part: Australia, Canada, Croatia and Israel.
- The first three have highly liberalized gambling markets with less restrictive laws and regulations, ready access to slot-machines, casinos and a range of wagering products. Both Australia and Canada have well established markets, whereas Croatia has experienced more recent and rapid growth in the past 20 years.

South Australia

Population: 1,500,000 (80% living in Adelaide)



Social context & legislation:

- **Prohibited** to minors (min.age = 18)
- **High availability**
 - Main forms: lotteries, poker machines in clubs and hotels, Main SkyCity Casino, racing and sports betting (mostly online or over the phone)
 - **There are over 500 venues (hotels and clubs) with poker machines and the CBD has venues on almost every corner and can be accessed from the street.**
- Gambling is **popular and widely advertised activity**
- **PG is acknowledged and discussed in the media**

Rates:

PG

- **PG – 0.5%**
- **Moderate risk – 2%**

60-70% of the problems are caused by poker machines

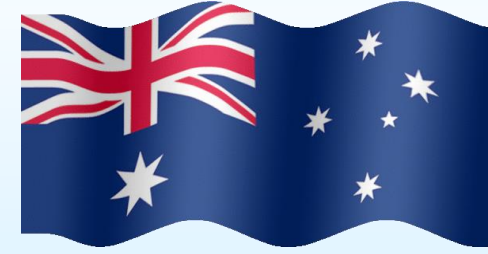
Gambling Behavior

- **70% of adults gamble at least once a year**
- **slot-machines/poker machines played by 21% of all adults**
- **weekly participation rate is around 2.5% of all adults**
- **men make up 60% of problem gamblers**
- **no gender or cultural barriers to participation.**



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Canada - Quebec



Population: Quebec 8.2 million

Social context & legislation

- Gambling is *regulated provincially*
- **Main forms:**
 - most jurisdictions have casinos, horse race tracks, bingo, lotteries
 - some have VLTs and accept online wagers
 - betting on sports - through the lottery and must include parlay bets
 - single sports event betting on horse racing is legal.
 - many provinces now have single sports online gambling.
- **Age limitation:**
 - many provinces - min. age 18 to purchase lottery tickets
 - some allow 18 year olds in casinos
 - others require the individual to be 19

Rates:

PG	Gambling behavior
1 – 2%	80% report gambling in their lifetime



Croatia



Population: 3,899,000

Social context & legislation:

- **Prohibited** to minors (min.age = 18)
- **High-availability**
Gambling forms:
 - Lottery Games (*state monopoly*)
 - Betting Games
 - Games on Automats (slot machines, roulette, etc.)
 - Games in Casinos
- **350 gambling venues in the 90s vs. more than 4 500 currently** (+ online gambling, VLTs, betting machines, etc.)
- **Liberal advertising** – almost no restrictions

LICENSED COMPANIES

The government restricts the number of companies, but not the number of gambling venues (shops, etc.)

Rates:

Adults (Glavak-Tkalić et al, 2017)

- **N=4.992** - representative sample (15 to 65 years of age)
 - ✓ 9.4% of the adult population has gambling related problems (PGSI)

Young People (Ricijaš et al, 2016)

- **N=2.702** – high school students
 - ✓ **13%** - high-severity of GP (GPSS – CAGI)
 - ✓ **33%** of male adolescents – regular sports betting



Israel



Population: 9 million (74.2% Jewish; 20.9% Israeli Arabs, 4.8% other)

Social context & legislation:

- **Prohibited** to minors (min.age = 18)
- Gambling is only authorized through **2 specially licensed entities:**

- *The National Lottery*
- *Sports Gambling Council*

LICENSED COMPANIES
Offer a wide range of gambling venues
Have significant and consistent rise in the revenues – 3.79 billion \$ in 2017.
(National Lottery, 2017)

- **Casinos** or other gambling venues for recreational purposes are classified as a **criminal offense**
- **No traditional land-based gambling establishments** (unlike in many other parts of the world; for example, in 2017 the Ministry of Finance banned EGMs)

Rates:

Anti-Drug Authority epidemiological survey
(2016)

N=5,220 adults

- **0,5% PG**
- 1.1% moderate risk gamblers
- 2% low risk gamblers

Gavriel-Fried et al., 2023

N=3422 adults – 49.3% engaged in gambling activities in the previous year

- **1.7% PG ; 5% moderate risk gamblers**
 - **10.4% low risk gamblers**



Aims and hypotheses:

- (a) Examine cross-country differences in the perception of gambling accessibility.
 - (b) Test whether differences in perceived accessibility would be related to higher risk of gambling in different countries
 - C) Explore gender differences related to accessibility and gambling behaviors
- (1) Gambling would be viewed as more accessible in Canada, Australia and Croatia than in Israel;
 - (2) Individuals who perceive gambling to be more accessible were predicted to be more likely to report a higher risk of gambling (moderate risk or problem gambling based on the Problem Gambling Severity Index);
 - (3) Gambling involvement and the prevalence of higher risk gambling would be greater in men than women in each country.

Method

- Online survey (using Qualtrics software) distributed to students aged 18+ enrolled at 5 universities in the large cities of Adelaide, Tel Aviv, Montreal, and Zagreb.
- Emerging adulthood.
- Data collection from August 2017 to April 2019.

Measures:



- **The gambling behaviors scale** - 12 items measuring the frequency of engaging in 12 common types of gambling in the past year.
- **Problem Gambling Severity Index (PGSI)** - (Ferris & Wynne, 2001)
- **Perceived Accessibility** (Hing & Haw, 2009) – 13 items assessing physical (geographic accessibility of gambling), social (approval from family, friends and colleagues) and cognitive (understanding and familiarity of how gambling products work)

Sample

	Total	% Male	% Female
Australia	477	32	68
Israel	542	28	72
Croatia	535	46	54
Canada	233	37	63
TOTAL	1787	36	64.0

	Mean age
Australia	19.6
Israel	23.3
Croatia	21.6
Canada	21

Gambling (by gender)

Males gambled significantly less in Israel than in the other countries, with the highest rates in Canada and Australia.

Canada > Australia > Croatia > Israel

Interestingly, men were generally more likely to gamble overall and gamble weekly, but this effect was not consistently observed in Australia and Canada where women's weekly participation was higher.

	Australia	Israel	Croatia	Canada
EGMs	50	10.7	18.1	27.8
Horse racing	15.0	2.0	6.7	5.0
Scratch tickets	25.4	18.9	25.6	29.5
Lotteries	20.7	12.3	27.0	26.4
Keno	11.3	2.0	1.7	4.6
Table games	20.0	8.1	18.4	21.6
Bingo	12.2	2.7	10.2	11.6
Sports	19.8	10.8	25.7	21.2
Cards	13.9	9.2	12.5	17.9
Private poker	29.2	2.9	25.5	39.0
Fantasy sports	6.8	4.9	3.4	12.6
Other	4.5	2.6	3.9	4.9

Gambling by Type

PGSI by country

	Australia	Israel	Croatia	Canada
No risk	66.4	86.1	74.9	69.7
Low risk	22.4	7.9	11.9	17.4
Mod risk	8.9	4.3	9.3	7.5
Problem	2.3	1.8	3.8	5.4

Canada and Croatia had the highest % in the problem category on the PGSI; Israel the lowest

Perceived gambling accessibility

Among men

Physical accessibility was highest in Croatia followed by Canada, and Australia with the lowest level in Israel.

Cognitive accessibility was higher in Croatia than in the other countries.

Social accessibility was lower in Israel than for the other countries.

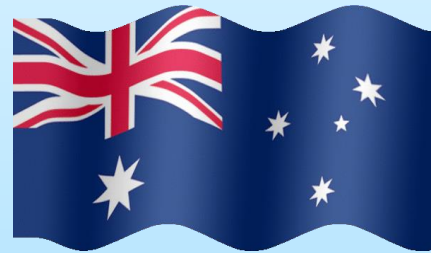
Among women

Similar results were found among women, except for **social accessibility** which was higher among women in Australia, Canada and Israel than in Croatia.

Gamblers vs. non-gamblers scored significantly higher on social accessibility in all four countries.

Is greater accessibility related to a higher risk of problem gambling?

In the Australian sample - No dimension of risk was significant for men, but women were more likely to be higher risk gamblers if they reported greater social and cognitive accessibility (knew how to gamble, and perceived it was approved and acceptable by their family/friends/colleagues).



Accessibility as a predictor of moderate-risk/problem gambling in Israel, Canada, and Croatia

In the Israeli sample, social accessibility was the only significant risk factor for both men and women.



In the Croatian sample, social accessibility was the only significant risk predictor for women.



No significant results were obtained for the Canadian sample.



Overall, physical accessibility emerged as less important than the other dimensions of accessibility.

Conclusions:

Country differences were observed for all three dimensions of accessibility. This difference was observed for both men and women.

Accessibility

The greatest differences were observed for physical accessibility, with the highest level of accessibility observed in Croatia (a newly liberalized market) and the lowest levels of accessibility in Israel, as expected given its more restrictive gambling legislation.

Physical accessibility was not the main predictor of gambling risk. Rather, the most important factor in Australia, Israel and Croatia was social accessibility: whether people had friends and family members who approved of gambling. These findings highlight the key role of social norms and family influences in the uptake of gambling and problem gambling risk.

Gambling Patterns

- In Canada, Australia and Croatia, which have liberal gambling markets, students reported gambled at higher frequencies, having more gambling problems, and perceiving the market as more accessible. By contrast, Israeli students were less involved in gambling, had fewer gambling problems and less physical and social accessibility to gambling. This is not surprising given the conservative Israeli market.
- More generally, these findings suggest that greater liberalization of the market is associated with more gambling and higher rates of problem gambling.



Gender differences

Women were less likely to take part in gambling activities.

Although in all four countries men had higher rates of gambling and problem gambling, Australia and Canada were the exceptions in that women engaged more in weekly gambling (excluding lotteries) perhaps because gambling has become more normalized in these countries. In Australia, for example, venues with gaming machines are now gender neutral.

Limitations

- Cross-sectional study
- Convenience sample based on a given segment of the population who are more likely to have a higher SES and a higher level of education.
- The majority of the sample (64%) were females.
- The current study measured accessibility via the subjective point of view of the participants.

Thank you - "Toda"- "Hvala" for your attention!

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