

Examining how gambling harm is measured: A scoping review

What this research is about

It is recognized that gambling can affect many different areas of a person's life, including finances, relationships, work or study, and physical and mental health. A growing body of research has focused on developing ways to measure gambling harms. However, because different studies use different questionnaires and scoring methods, it can be difficult to compare results. The purpose of this scoping review was to map how gambling harms have been measured in self-report questionnaires.

What the researchers did

The researchers followed the guidelines of the Preferred Reporting Items for Systematic Reviews and Meta-Analyses extension for Scoping Reviews (PRISMA-ScR). They searched the following databases for relevant studies published since 2000: Web of Science, Scopus, APA PsycInfo, and MEDLINE. They also conducted a manual search using Google Scholar. The final search was carried out on September 23, 2025.

Inclusion criteria: Studies were included if they measured gambling-related harms through self-reported questionnaires. Studies that used problem gambling measures, like the Problem Gambling Severity Index (PGSI), as a proxy for measuring gambling harms were also included.

Exclusion criteria: Studies that examined gambling harms using qualitative methods (e.g., interviews or focus groups) or only discussed gambling harms without measurement were excluded. Review articles, editorials, and studies published in languages other than English were excluded.

What you need to know

The purpose of this scoping review was to map how gambling harms are measured in self-report questionnaires. Studies were included in the review if they measured gambling-related harms through self-reported questionnaires. Studies that used problem gambling measures, like the Problem Gambling Severity Index, as a proxy were also included. Overall, the researchers identified 41 different tools used to measure gambling harms across 131 studies. Most tools focused on financial, relationship, and mental health harms. Fewer assessed, crime, community and societal impacts. Overall, the researchers found differences across studies in the types of harms measured and how they were classified and scored. This highlights the need for researchers and practitioners to carefully select measurement tools based on their specific goals, populations, and contexts.

Studies that used general outcome measures not directly linked to gambling harms (e.g., quality of life) were also excluded.

In total, the database and manual searches resulted in 2,189 papers. After excluding duplicates and screening the titles and abstracts, a total of 202 papers remained for full-text screening. Finally, 131 studies were included in this review.

What the researchers found

Across the 131 studies, 41 different instruments were used to measure gambling-related harms. These included 16 gambling harm-specific surveys (GHSS),

9 problem gambling screening tools (PGST), 8 custom questionnaires (CQ), and 8 questionnaires on harms to affected others (QHAO). Affected others are people negatively affected by someone else's gambling, such as spouses, family members, and friends. The researchers noted a rise in the use of these instruments in research over time, highlighting a growing interest in gambling harms. The researchers also noted a greater focus on harms associated with lower-risk gambling in the general population.

Almost all of the instruments assessed financial harms. Over 80% of these instruments included items about impacts on relationships and mental health, and over 50% measured productivity and physical health impacts. But fewer measures assessed crime due to gambling, and only five measures included community and societal harms.

Scoring: GHSS measures mostly used sum scoring (i.e., scores on all items were added to yield a total score). PGSTs did not use sum scoring as frequently. Across all four types of instruments, gambling harms were most frequently measured in binary terms, reflecting the presence or absence of harm.

Application: Six measures had been used in research in at least four countries, namely, the Short Gambling Harm Screen (SGHS-10), the Victorian Framework full harm checklist, the Problem Gambling Severity Index Harm Items (PGSI-Harm), the PGSI, the South Oaks Gambling Screen (SOGS), and the NORC DSM Screen for Gambling Problems (NODS). The rest of the measures had only been used in research in one or two countries. The SGHS and PGSI-Harm were most commonly applied across most countries, and studies using these measures also had the largest sample sizes.

The PGSI was most frequently used alongside gambling harm-specific measures to validate the harm assessment. Gambling engagement measures, like gambling frequency and spending, were the next most frequently used. Mental and physical health indicators (e.g., depression, anxiety, distress) were also commonly used.

The findings show differences across studies in how the core domains of gambling harms were classified and measured. This leads to questions around which

domains are most important to measure and under what conditions. The researchers argue that no single measure applies to all contexts. It is important to develop and choose measures based on their intended use and the contexts being examined.

How you can use this research

Researchers, policy makers, and public health practitioners can use this research to identify gambling harm measures that best fit their objectives and target populations. The findings can also help to guide the development of more comprehensive and culturally relevant tools for assessing gambling-related harms.

About the researchers

Cong Mou, Eamonn Ferguson, and Richard James are affiliated with the School of Psychology at the University of Nottingham in Nottingham, UK. **Sai Abirami Kailasnathan** is affiliated with North London NHS Foundation Trust in London, UK. **Richard Tunney** is affiliated with the School of Psychology at Aston University in Birmingham, UK. For more information about this study, please contact Richard James at lpzrj@nottingham.ac.uk.

Citation

Mou, C., Kailasnathan, S. A., Ferguson, E., Tunney, R., & James, R. (2026). Measuring gambling harm in self-reported questionnaires: A scoping review. *Harm Reduction Journal*. Advance online publication. <https://doi.org/10.1186/s12954-025-01352-3>

Study Funding

This study received no direct funding.

About Greo Evidence Insights

Greo Evidence Insights is an independent, non-profit organization specializing in research, knowledge mobilization, and evaluation in the health and well-being sectors. Greo transforms research and insights into actionable strategies to prevent and reduce harm related to gambling, gaming, technology use, and substance use. To learn more about funding for Research Snapshots visit [our website](#).

