

The roles of gambling refusal self-efficacy and protective behavioral strategies in the relationships between impulsivity and gambling outcomes

What this research is about

Problem gambling (PG) is a behavioural addiction that can cause several types of harms. Greater involvement with gambling is associated with a higher risk of PG. Research has documented various risk factors for PG. A personality trait that is often linked to PG is impulsivity, which is a tendency to make quick decisions without consideration of the consequences. Numerous studies have found that impulsivity is linked to a higher risk of PG and greater gambling involvement. This may be because people with high impulsivity have lower self-control and a preference for immediate rewards.

Gambling refusal self-efficacy (GRSE) and protective behavioural strategies may influence the relationship between impulsivity and PG. GRSE refers to a person's belief that they can refuse gambling in high-risk situations, such as when under social pressure to gamble. Lower GRSE has been found to be related to both PG and greater gambling involvement. Gambling protective behavioural strategies (GPBS) are deliberate actions to prevent or reduce harm from gambling. They include harm reduction (e.g., limiting the amount of money spent) and avoidance strategies (e.g., removing triggers to gamble).

The aim of this study was to investigate whether GRSE and GPBS could help explain the associations of impulsivity with gambling involvement and PG. It was predicted that GRSE and GPBS would mediate the associations; that is, higher impulsivity would be linked to lower levels of GRSE and GPBS, which

What you need to know

Impulsivity refers to a tendency to act without consideration of the consequences. It has been linked to a higher risk of problem gambling. This study examined whether gambling refusal self-efficacy (GRSE) and gambling protective behavioural strategies (GPBS) play a role in the relationship between impulsivity and gambling. A total of 926 Hungarian adults who had gambled in the past year completed an online survey. It was found that impulsivity was linked to greater gambling involvement and PG through GRSE and GPBS. In other words, people with higher impulsivity had lower GRSE and were less likely to use GPBS. This, in turn, led to greater gambling involvement and a higher risk of PG. GPBS also had a moderating effect on the associations of impulsivity with gambling involvement and problem gambling.

would then be associated with greater gambling involvement and PG. It was also expected that GRSE and GPBS would moderate the relationships between impulsivity and both gambling involvement and PG, with the relationships being stronger when GRSE and GPBS were lower.

What the researchers did

The data for this study came from an online survey that was advertised through Facebook in Hungary. The survey was conducted between April and May 2024. The final sample included 926 adults aged 18 or older who had gambled in the past 12 months.

The survey included the following measures:

- Problem Gambling Severity Index (PGSI) to measure gambling behaviour and problems in the past 12 months.
- Consumption Screen for Problem Gambling (CSPG) to measure gambling frequency, typical time spent, and frequency of gambling for more than 2 hours in the past 12 months.
- Barratt Impulsiveness Scale-Revised (BIS-R-21-SF) to measure impulsivity.
- Gambling Self-Efficacy Questionnaire (GSEQ).
- Gambling Protective Behavior Scale (GPB-S) to measure harm reduction and avoidance strategies used in the past 12 months.

What the researchers found

Nearly half of the participants scored as non-problem gambling on the PGSI (score of 0). About one-third scored as low-risk gambling (score of 1–2), and one-quarter scored as moderate- or high-risk gambling (score of 3 or higher).

First, the researchers found that higher impulsivity was associated with lower levels of GRSE and GPBS, as well as greater gambling involvement and a higher risk of PG. Both GRSE and GPBS were associated with lower gambling involvement and lower risk of PG.

Next, the researchers looked at the mediating effects of GRSE and GPBS. They found that impulsivity was linked to greater gambling involvement and PG through GRSE and GPBS. In other words, people with higher impulsivity had lower GRSE and were less likely to use GPBS. This, in turn, led to greater gambling involvement and a higher risk of PG.

Lastly, the researchers examined the moderating effects. They found that only GPBS moderated the relationships of impulsivity with PG and gambling involvement. At low level of GPBS, the link between impulsivity and gambling involvement was significant, but not when the level of GPBS was moderate or high. Similarly, when the level of GPBS was low or moderate, the link between impulsivity and PG was significant. However, it was not significant when the level of GPBS was high. In other words, impulsivity was linked to greater gambling involvement and PG when people rarely used GPBS.

How you can use this research

This study sheds new light on the associations of impulsivity with PG and gambling involvement. The results suggest that both GRSE and GPBS influence these associations. This study could be relevant to researchers, clinicians, and policy makers interested in reducing gambling-related harms.

About the researchers

Natasa Nagy and **Zsolt Horváth** are affiliated with the Institute of Psychology, ELTE Eötvös Loránd University, Budapest, Hungary. **Andrea Czakó** and **Zsolt Demetrovics** are affiliated with the Flinders University Institute for Mental Health and Wellbeing, College of Human Sciences and Culture, Flinders University, SA, Australia. Please see the original article for full information on author affiliations. For more information about this study, please contact Zsolt Horváth at horvath.zsolt@ppk.elte.hu.

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