RESEARCH SNAPSHOT

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A review of the relationship between problem gambling and gambling refusal self-efficacy

What this research is about

Gambling disorder (GD) is the first behavioural addiction to be included in the fifth edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-5). Problem gambling (PG) is a broader term describing less severe gambling that does not yet meet the diagnostic criteria for GD. It is well established that financial, psychological, and social harms can arise from GD and PG.

Social cognitive theory suggests that refusal self-efficacy, which is a person's belief in their ability to resist certain behaviours, may contribute to addictive behaviours. Gambling refusal self-efficacy (GRSE) refers specifically to a person's confidence in being able to resist gambling. Research on alcohol and substance use has shown that lower refusal self-efficacy is linked with more problematic outcomes. Similarly, lower GRSE has been associated with PG. However, the extent to which demographic and clinical factors influence the relationship between GRSE and PG is not well understood.

This study presents a review and meta-analysis of existing research on the relationship between GRSE and PG. There were two key aims: (1) to examine the relationship between GRSE and PG, and (2) to assess whether factors such as gender, age, and clinical status moderate this relationship.

What the researchers did

The authors conducted a systematic review and meta-analysis following the PRISMA guidelines. They searched several databases, including PubMed, ScienceDirect, Academic Search Complete (EBSCO), Web of Science, and PsycINFO. The search terms focused on 'gambling' and 'self-efficacy'. All studies were reviewed by two of the researchers.

To be included in the review, studies had to be published in English; have a quantitative, observational or correlational design; assess PG or GD and GRSE using standardized measures; report the association between PG or GD and GRSE or provide sufficient statistical data; and provide relevant demographic and clinical information.

What the researchers found

A total of 21 studies, with 24 independent participant samples, were included in the review. The total number of participants was 8,080. Most studies were

What you need to know

One factor that may play a role in problem gambling (PG) is gambling refusal self-efficacy (GRSE). This term refers to a person's confidence in being able to resist gambling. Lower GRSE has been linked to PG; however, it is still unclear if other factors influence the relationship between GRSE and PG.

The present study is a review and meta-analysis of existing research on the relationship between GRSE and PG. A total of 21 studies were included in the review. A significant negative relationship between GRSE and PG was found. In other words, people with lower GRES tend to have a lower risk for PG. The only factors that moderated the relationship between GRSE and PG were sample size and the GRSE measure used. These results can inform researchers and clinicians working with people experiencing PG.

cross-sectional studies that collected data from participants at only one point in time (62.5%). Almost 80% of samples comprised adult participants, one sample included adolescents/children only, and four sample included both adults and children. Most studies were found to have a moderate or high risk of bias, due to issues like vague eligibility criteria and use of convenience or self-selecting samples.

The most common GRSE measure was the Gambling Self-Efficacy Questionnaire (GSEQ), followed by the Gambling Refusal Self-Efficacy Questionnaire (GRSEQ), the Gambling Abstinence Self-Efficacy Scale (GASS), and the Multidimensional Gambling Self-Efficacy Scale (MGSES). The most common gambling measures were the South Oaks Gambling Screen (SOGS), the Problem Gambling Severity Index (PGSI), and DSM-IV criteria for PG.

First, it was found that studies differed in the measures and statistical approaches used. However, when data were pooled from the studies for a meta-analysis, a negative association between GRSE and PG was found. This means that people with greater confidence in their ability to resist gambling typically reported a lower risk for PG.

Next, the researchers examined factors that might moderate the relationship between PG and GRSE. Only two factors were found to influence the relationship: the sample size of a study and the type of GRSE questionnaire used. Studies with larger sample sizes tended to report a stronger negative relationship between PG and GRSE than studies with smaller sample sizes. Similarly, studies that used the GRSEQ or MGSES to measure GRSE tended to report a stronger negative relationship than studies that used the GASS. Other factors such as age, gender and gambling severity were not found to be significant moderators.

Overall, the results indicate that lower GRSE is associated with a higher risk of PG. This negative relationship between GRSE and PG was found across samples of participants with potentially different sociodemographic and clinical characteristics.

How you can use this research

The findings of this study can inform researchers and clinicians treating people experiencing PG.

About the researchers

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Citation

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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.