

Testing the lower-risk gambling guidelines in Finland

What this research is about

Globally, many people engage in online and offline gambling, and some people experience significant financial, emotional, and social harms. An estimated 1.29 to 2.43% of adults meet the criteria for problem gambling (PG).

Although people with PG experience serious consequences from gambling, the overall societal harm caused by gambling is even greater among people with low-risk gambling due to their greater number. This is termed the “prevention paradox.” As a result, it is important to focus on how to minimize harms among people who gamble, not simply those with an addiction.

One key approach is to develop clear outlines for what constitutes low-risk and high-risk gambling. Over the past decade, researchers have developed the Lower-Risk Gambling Guidelines (LRGG) to promote safer gambling limits. The guidelines recommend the following: 1) gambling no more than 1% of household income per month; and 2) gambling no more than four days per month; and 3) limiting regular gambling to no more than two types of gambling.

For the guidelines to be effective, it is critical that they are accepted by the general public. The guidelines need to be seen as being clear, reasonable, and practical. Thus, research on whether they are perceived in this fashion is an important next step. The primary goal of this study was to assess the LRGG within subpopulations of people who live in Finland. Specifically, the researchers attempted to determine if the guidelines are feasible and acceptable as presently described or if they require adaptation to better align with the Finnish culture.

What the researchers did

What you need to know

Problem gambling (PG) is known to cause many financial, emotional, and social harms. However, the burden of harm at the societal level is greater among people with low-risk gambling because there are more of them. This phenomenon is called the “prevention paradox.” One approach is to develop Lower-Risk Gambling Guidelines (LRGG) for people who gamble. Over the past decade, researchers have developed and refined the LRGG. However, it is unknown the extent to which these guidelines are culturally appropriate for Finland.

The purpose of this study was to assess the LRGG among adults in Finland. In a sample of 778 people, it was found that the guidelines were rated positively. However, ratings for perceived effectiveness were lower. Also, people with ‘at-risk’ gambling rated the LRGG more negatively and were more pessimistic about the LRGG’s effectiveness. Overall, the results suggest that views of the guidelines differ according to experience with gambling and gambling severity.

The researchers recruited adults in Finland by posting survey invitations on the website and social media accounts of the Finnish Institute for Health and Welfare. The survey was hosted on Qualtrics and completed on participants’ own device.

Participants were randomly assigned to one of two conditions: they were either shown the LRGG or an altered version of the LRGG with personal income instead of household income. The survey took approximately 19 minutes to complete, and no compensation was provided. Data collection took place between August and October 2023. In the end, the researchers collected data from 778 participants, with most (68.5%) being women. Most people (612) were categorized as ‘no problem/low-risk’ gambling

based on the Problem Gambling Severity Index (PGSI).

Participants were asked to evaluate the LRGG with regard to clarity, understandability, effectiveness, willingness to follow, unwanted consequences, long- and short-term benefits, applicability, and sensibility. They also provided what they thought would be a suitable limit for each of the guidelines.

What the researchers found

Overall, the researchers found that participants rated the LRGG quite positively. The ratings indicated that they found the guidelines to be understandable, sensible, clear, and just right. However, lower ratings were provided for perceived effectiveness.

Participants did indicate that the limits suggested by the LRGG were appropriate. Presenting the first guideline in terms of household or personal income did not make a difference. Participants' own chosen limits were in line with the LRGG.

There were some differences between subgroups of participants. For instance, on average, people with 'at-risk' gambling (PGSI scores of 3 or higher) were more pessimistic about the LRGG's perceived effectiveness. The 'not at risk' group (PGSI scores of 0–2) rated the LRGG more positively, but people who had never gambled felt that the limits described in the LRGG were too permissive. Professionals working in the field of gambling prevention gave higher ratings for the LRGG's perceived effectiveness.

The results show that views of the LRGG differ among subgroups. The researchers suggest that promotion of the LRGG should take into account the role of experience with gambling and gambling severity.

How you can use this research

The results of this study have important implications for the successful implementation of the LRGG in other cultures, such as Finland. In this study, most people expressed a positive opinion of the LRGG. However, views on the effectiveness of the LRGG differed according to severity of gambling. These results offer insight into how to promote the LRGG.

About the researchers

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Citation

Palomäki, J., Latvala, T., Salonen, A. H., Marionneau, V., Hodgins, D., Young, M. M., & Castrén, S. (2024). Testing the acceptability and feasibility of the lower-risk gambling guidelines in Finland. *Journal of Behavioral Addictions*, 13(4), 987–1002. <https://doi.org/10.1556/2006.2024.00065>

Study Funding

The study was funded by the Ministry of Social Affairs and Health, Finland.

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