



Gambling among people with a migrant background: The role of culture and family

What this research is about

Problem gambling (PG) affects about 1–2% of the world population. It is associated with a wide range of harms for people who gamble, their concerned significant others, and the community. PG is unevenly distributed. Higher prevalence was found among certain groups, such as males, younger adults, and those with lower socio-economic status. Studies have also identified higher PG prevalence in ethnic minorities compared to the majority populations.

There is limited understanding with respect to the higher prevalence of PG among minority groups. It could involve factors like socio-economic status, co-occurring psychiatric disorders, and difficulties relating to the migration process. This study explored the experiences of and thoughts about gambling and PG among men with a migrant background in Sweden.

What the researchers did

The researchers interviewed 12 men with a migrant background. Participants were required to have experiences of gambling, but not necessarily PG. They were recruited through addiction clinics, peer support groups, and personal contacts. The participants had a migrant background from Afghanistan, Iran, Iraq, Tunisia, or Turkey. All but one was born outside of Sweden, and all self-identified as currently gambling or having gambled in the past.

The interview questions concerned experiences of gambling, gambling among family and friends, thoughts on gambling in the origin country as compared to Sweden, and thoughts on help-seeking for PG. The researchers analyzed the interviews using qualitative content analysis.

What you need to know

This study explored the experiences of and opinions about gambling and problem gambling (PG) among 12 male participants living in Sweden. All participants had a migrant background. The results show that the acculturation process could be a factor influencing the development of PG, along with cultural values. PG was described as more stigmatized in the origin country. Participants also described family as playing an important role in the recovery from PG.

What the researchers found

The researchers identified 5 themes and 15 subthemes from the interviews. The first theme is "relationship to gambling" and has three subthemes. (1) Problem gambling (PG): Most participants self-described as experiencing PG currently or in the past, with periods of uncontrolled gambling. This led to negative consequences in terms of economy and relationships. (2) Gambling in the family or among friends: participants mentioned being exposed to gambling from older family members, as well as gambling with friends, when growing up. (3) Peer support groups: some participants mentioned engaging in various peer support groups for PG.

The second theme is "acculturation and gambling". It addresses gambling related to the process of migration and integration and has three subthemes. (1) Financial motives: Gambling was partly driven by financial motives for some participants, which was linked to the migration and integration process in Sweden. Earning money to send to family members back home was a reason leading to gambling. (2)

Alienation and belonging: Gambling was an activity that offered a place of belonging for some participants. This was especially true for those who felt alienated from the society. (3) Sudden access to money: For some participants, coming to Sweden signified an elevated economic status. This prompted them to use large amounts of money on gambling.

The third theme is "gambling in Sweden vs. origin country" and has three subthemes. (1) Availability and regulation: In the participants' origin countries except for Turkey, gambling is illegal. The availability of gambling was described as low. (2) Unpreparedness: For some participants, gambling was a novel phenomenon when arriving in Sweden. This could increase their vulnerability to gambling advertising. (3) Everyday gambling: several participants reported that certain types of everyday gambling are widespread in their origin countries and cultures.

The fourth theme is "cultural views on gambling". It addresses views of gambling that differ between the origin and Swedish cultures and has three subthemes. (1) Shame and stigma: the participants all highlighted that gambling and PG is very stigmatized in their origin cultures. (2) Religious views: A few participants expressed that religion (Islam) plays an important role in how gambling is viewed in their origin country. They talked about gambling as being seen as a "disgrace" or "haram" (an Islamic term describing something as forbidden or unlawful). (3) Extravagance and status: some participants described gambling as a way to display monetary wealth and success.

The last theme is "help-seeking and treatment". Participants discussed this with regard to both themselves and others with a similar background. (1) Family-oriented problem solving: Several participants emphasized the importance of family support for people with PG. For several participants, gambling problems should be kept within the immediate family. (2) Unconditional support: Some participants expressed that family support is unconditional. This could clash with the individualized approach used by treatment providers in Sweden. (3) Professional support and treatment: Most participants had experience with professional treatment or support for

PG and generally viewed it as a positive experience. But participants who had never sought treatment expressed skepticism.

How you can use this research

This research can be used to inform gambling preventive and clinical programs to better reach people with a migrant background.

About the researchers

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