What this research is about

Only two studies have looked at the prevalence of gambling and problem gambling in Canada. These two national studies examined who is gambling, what they gamble on, and which types of gambling are linked to harm. This information can help public health target problem gambling prevention and treatment to those who need it most. Additionally, it can inform us about which types of gambling should be closely regulated.

Research in Canada shows that many individual traits affect risks of problem gambling. For example, being male, being unmarried, and having a lower education level are linked to higher risks of problem gambling. Certain types of gambling can also be riskier. For example, electronic gaming machines (EGMs) allow continuous gambling and are linked to more harm.

The previous studies on the prevalence of gambling in Canada were published in 2000 and 2002. This study provides updated information about gambling and problem gambling in Canada. It describes the demographics of people who gamble or have problem gambling. It also describes which individual traits and types of gambling are linked to problem gambling.

What the researchers did

The researchers worked with Statistics Canada to develop a set of questions about gambling and problem gambling called the “Gambling Module”. They included the Gambling Module in the 2018 Canadian Community Health Survey (CCHS).

The CCHS collects information from a representative sample of the population with a few exceptions (e.g., it does not include people living on Indigenous settlements). Statistics Canada selects households from different regions and randomly selects one member from each household to participate. The survey asks participants about their mental health, and cigarette and alcohol use. It also asks demographic questions about their gender, age, household income, education level, and race/ethnicity.

For the 2018 CCHS, the Gambling Module was administered to individuals who were at least 15 years old and lived in one of Canada’s 10 provinces (but not the 3 territories). A total of 24,982 people completed the Gambling Module. The researchers analyzed data from 23,952 people aged 18 and older.

The Gambling Module used a shortened version of the Gambling Participation Instrument. It asked people how often they engaged in eight different types of gambling in the past year. The types were: instant lottery tickets, lottery or raffle tickets, EGMs, casino...
table games, sports betting, bingo, other forms of gambling, and speculative financial market activities.

Participants who said they gambled at least once per month answered the 9 questions from the Problem Gambling Severity Index (PGSI). PGSI scores range from 0-27 points. The researchers used the PGSI scores to categorize participants as having non-problem gambling (score of 0 points), at-risk gambling (1-4 points), or problem gambling (5+ points).

What the researchers found
The likelihood that someone gambled was linked to their gender, income, education level, and race/ethnicity. These factors also affected the risk of problem gambling, along with a participant’s age and what province they lived in. For example, the highest rates of problem gambling occurred in men, people aged 18-29, Indigenous people, and people living in the Prairie provinces. Meanwhile, the lowest rates of problem gambling were found in women, people aged 50+, and people living in Ontario or British Columbia.

The researchers compared people with problem gambling (PGSI score of 5+) to people without problem gambling (PGSI scores of 0 or 1–4). Many factors were linked to problem gambling. These included having a mood disorder, being male, participating in casino table games, etc. However, the strongest factor linked to problem gambling was the use of EGMs. Additionally, provinces that had more EGMs per 1000 people or that had higher EGM use also had higher rates of at-risk and problem gambling.

Finally, Ontario and British Columbia are the only provinces that do not allow EGMs outside of dedicated gambling venues. These two provinces had the lowest problem gambling rates.

How you can use this research
This study shows that many factors can increase the risk of problem gambling, but that EGM use is the strongest single factor. The authors suggest that policies should restrict the availability of EGMs. This change could reduce gambling harms and have the greatest public health benefit.

About the researchers

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Citation

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About Gambling Research Exchange (GREO)
Gambling Research Exchange (GREO) has partnered with the Knowledge Mobilization Unit at York University to produce Research Snapshots. GREO is an independent knowledge translation and exchange organization that aims to eliminate harm from gambling. Our goal is to support evidence-informed decision making in safer gambling policies, standards, and practices. The work we do is intended for researchers, policy makers, gambling regulators and operators, and treatment and prevention service providers.

Learn more about GREO by visiting greo.ca or emailing info@greo.ca.