

GAMBLING HARMS SURVEY 2016–2017

Gambling participation, gambling-related harms and opinions on gambling marketing in connection with the reform of the Finnish gambling monopoly

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TERVEYDEN JA HYVINVOINNIN LAITOS

DISCLOSURE OF INTERESTS

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DISCLOSURE OF INTERESTS

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 - Studies funded by the Finnish Foundation for Alcohol Studies.

ABOUT GAMBLING IN FINLAND

- Finnish gambling policy was based on a licensed monopoly
- 18 503 EGMs scattered around the country
- Past-year prevalence: 80% gambling / 3.3% problem gambling (SOGS=3+)
- Gambling expenditure
 - Highest in Europe
 - 5.2% spend 50% of the total gambling expenditure
 - 23% of the money comes from the problem gamblers



BACKGROUND OF THE STUDY

- Merger of three Finnish gambling operators in January 2017
 - to reduce gambling-related harm
 - to moderate excessive marketing caused by the competition of the previous three operators
- Collaboration: THL, Statistics Finland, University of Helsinki, Gambling Clinic
- Funded by the Ministry of Social Affairs and Health, Finland

THE REFORM OF THE FINNISH GAMBLING MONOPOLY STILL CONTINUES

- **10/2016:** A working group focusing on preliminary assessment and monitoring of the harms and risks associated with gambling services
- **1/2017:** Online service of the reformed Veikkaus was defined as a specific gaming location in the renewed Lotteries act
 - **4/2017:** Online service the reformed Veikkaus was launched
 - **12/2017:** Online accounts of the previous three operators were combined
- **12/2017:** Obligatory limits for money transfer and losses, issuing a ban for certain games was made possible
- 2022: Obligatory identification for EGMs in public places
- Another casino will be opened in Tampere, Finland

OBJECTIVES OF THE STUDY

- to evaluate the consequences¹ in connection with the reform of the Finnish gambling monopoly
 - Gambling
 - Gambling-related harm
 - Opinions on gambling marketing

METHODS: POPULATION SURVEY

- Longitudinal, collected by Statistics Finland in 2017 & 2018
- Web & postal survey (Finnish/Swedish), ≥ 18 -year-olds
- Random sample, N = 20 000, 18–24-year-olds oversampled
 - 3 geographical areas: Uusimaa, Pirkanmaa & Kymenlaakso
 - Wave 1: n = 7 186 (36%), of which 4611 invited to 2nd wave
 - Wave 2: n = 2 624 (57%)
- Data available at: <https://www.fsd.uta.fi/en/>

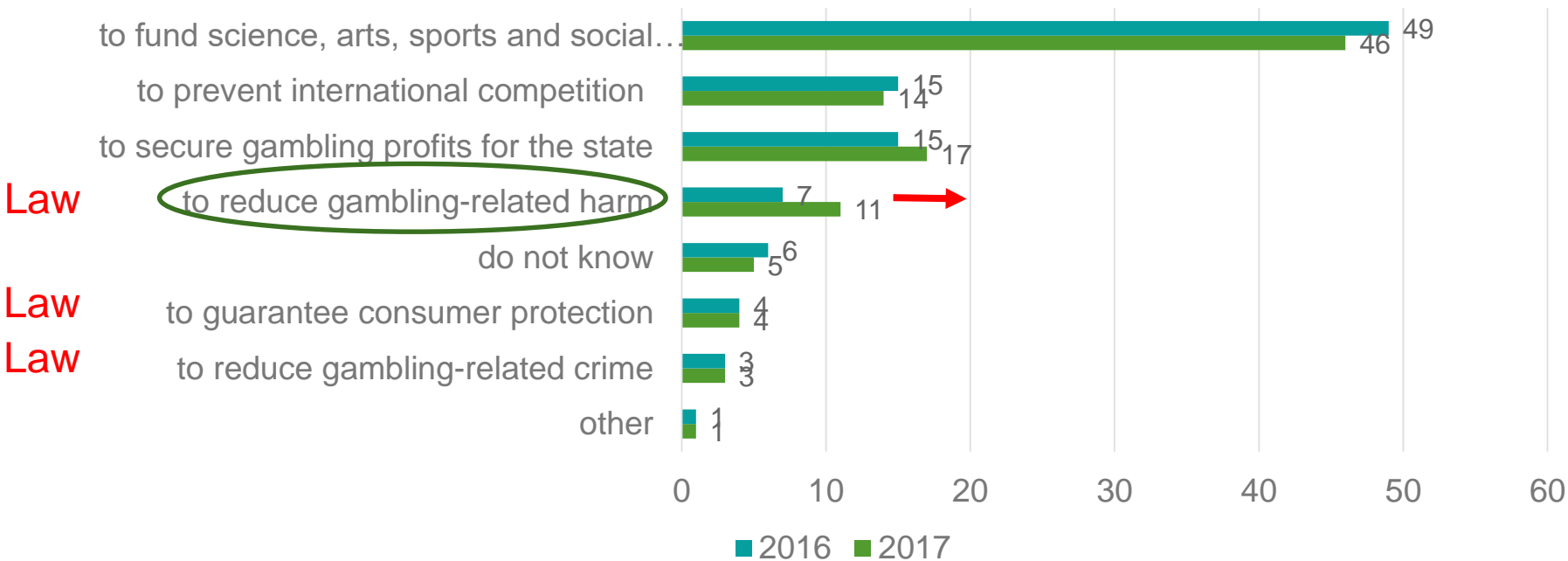


METHODS: CLINICAL SURVEY

- Collected by the staff at Gambling Clinic and Statistics Finland
- Web survey, inclusion criteria
 - seeks help for his/her own gambling problem
 - ≥ 18 -year-old
 - able to participate in Finnish or Swedish
- Anonymous, two cross-sectional studies
 - Jan–April 2017 data collection: $n = 119$
 - Jan–April 2018 data collection : $n = 102$



REDUCING HARM WAS SEEN AS THE MAIN PURPOSE OF THE SYSTEM MORE OFTEN IN 2017



Law

Law

Law



Fig 1. Respondents' views on Finnish gambling monopoly's main purpose and objective in 2016 and 2017, population survey (% , n = 2624)

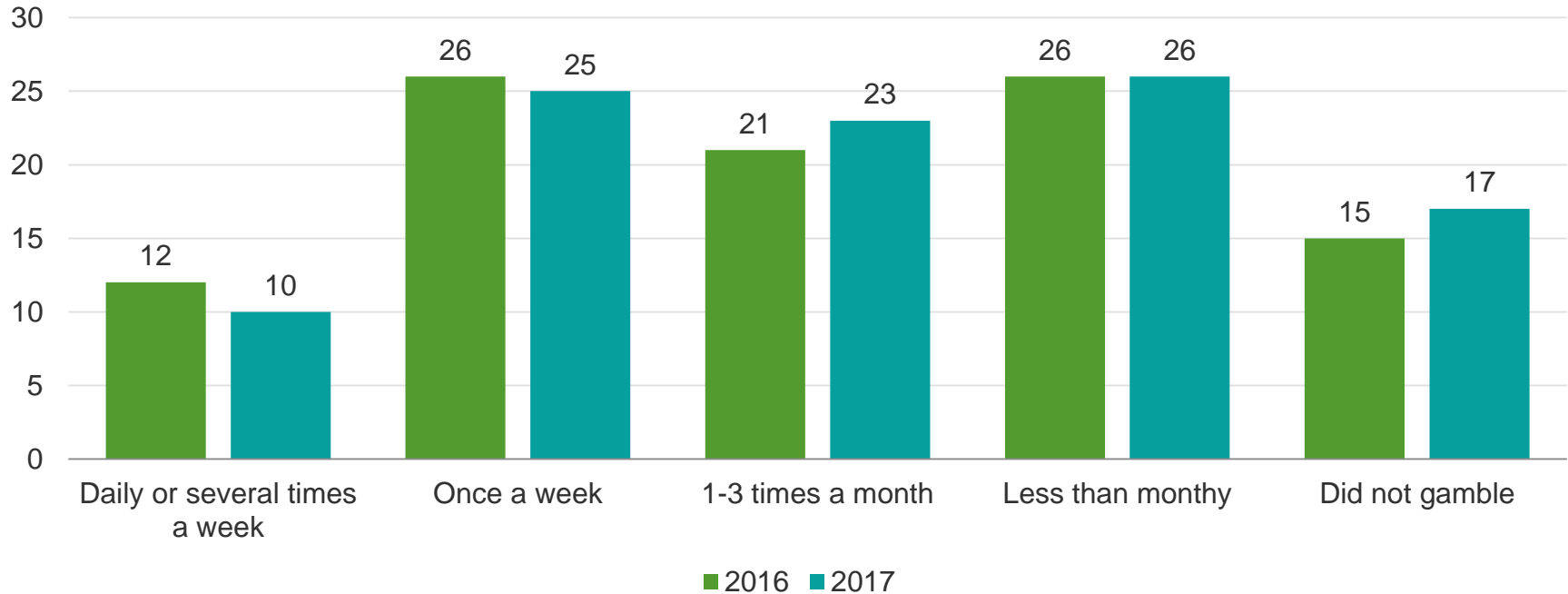
GAMBLING PARTICIPATION IN CONNECTION WITH THE REFORM OF THE FINNISH GAMBLING MONOPOLY

THE PROPORTION OF GAMBLERS DECREASED

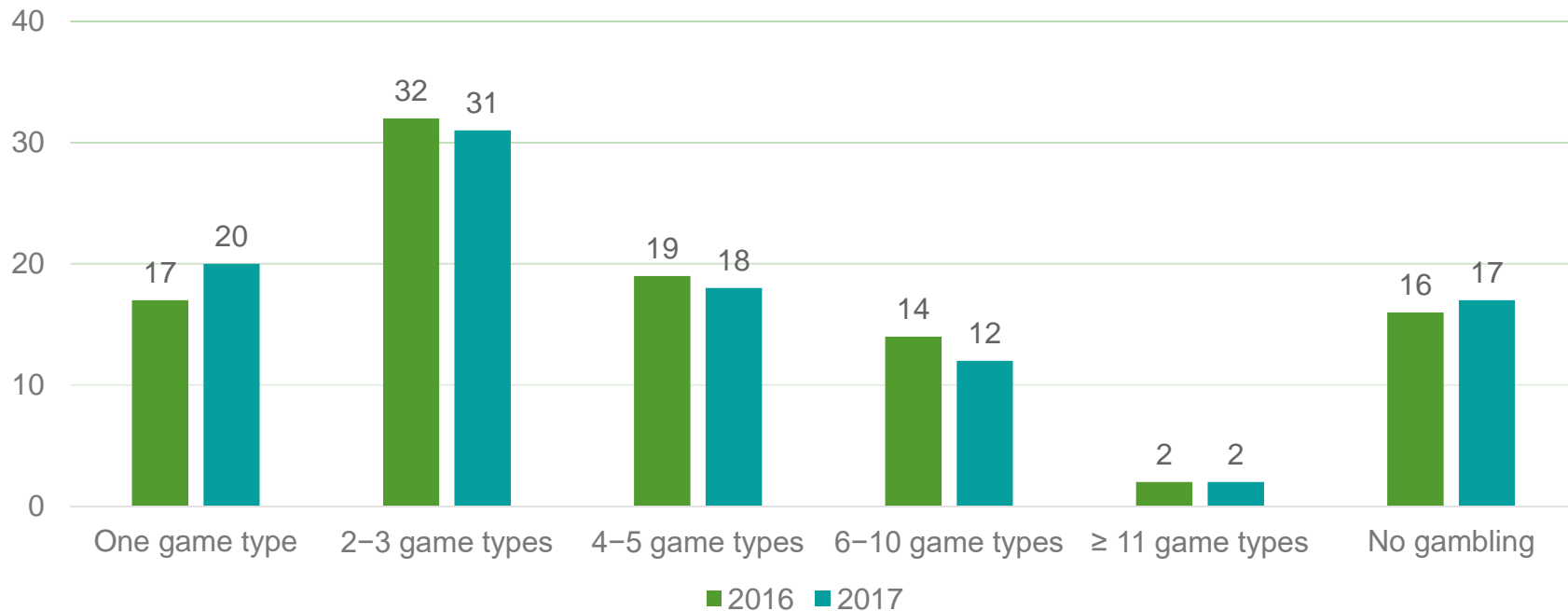
Population survey: change from 2016 to 2017

- the proportion of those who had gambled decreased
- weekly gambling decreased (Fig 2).
- the proportion of those gambling four or more game types decreased (Fig 3).
- 2–4% of gamblers accounted for 50% of the total gambling expenditure (Fig 5).

WEEKLY GAMBLING DECREASED



THE PROPORTION OF THOSE GAMBLING FOUR OR MORE GAME TYPES DECREASED



GAMBLING PARTICIPATION BY GAME TYPES

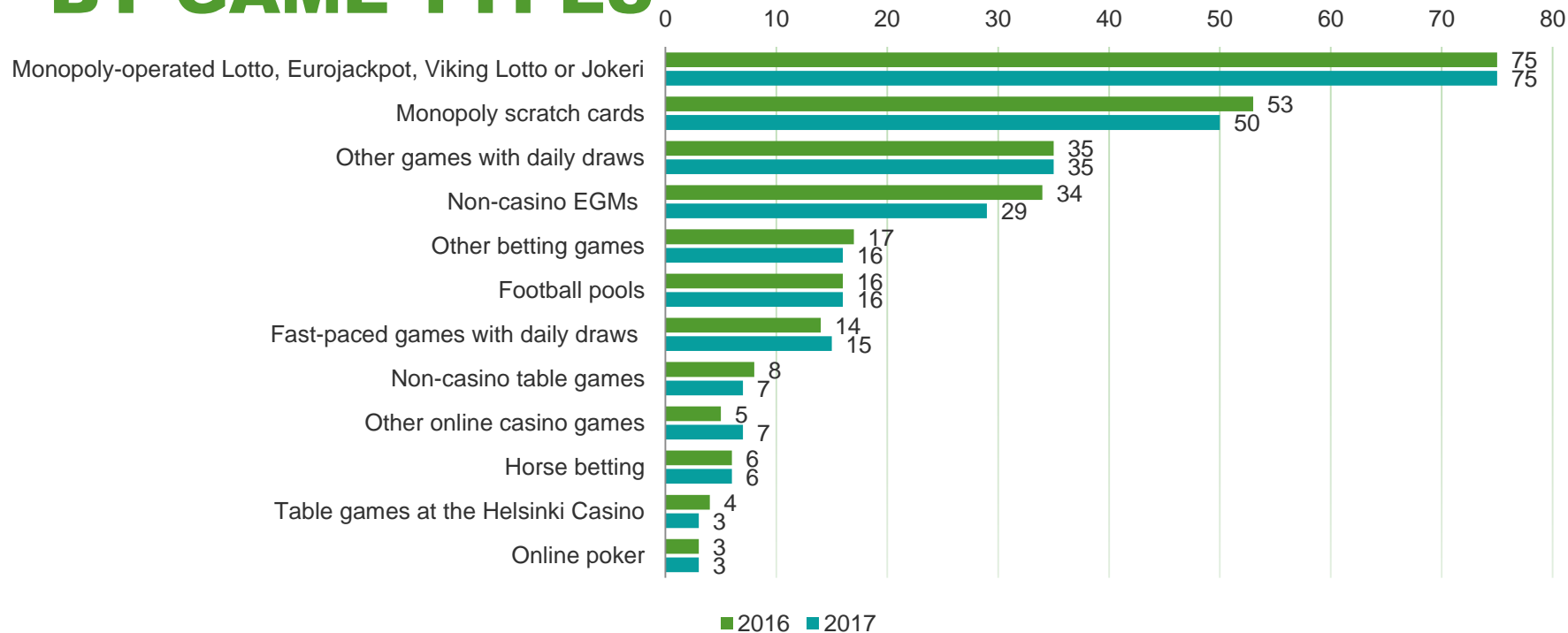


Fig 4. Gambling participation in game types provided under the Finnish monopoly system in 2016 and 2017, population survey (% , n = 2624)

2-4% OF GAMBLERS ACCOUNTED FOR 50% OF TOTAL GAMBLING EXPENDITURE

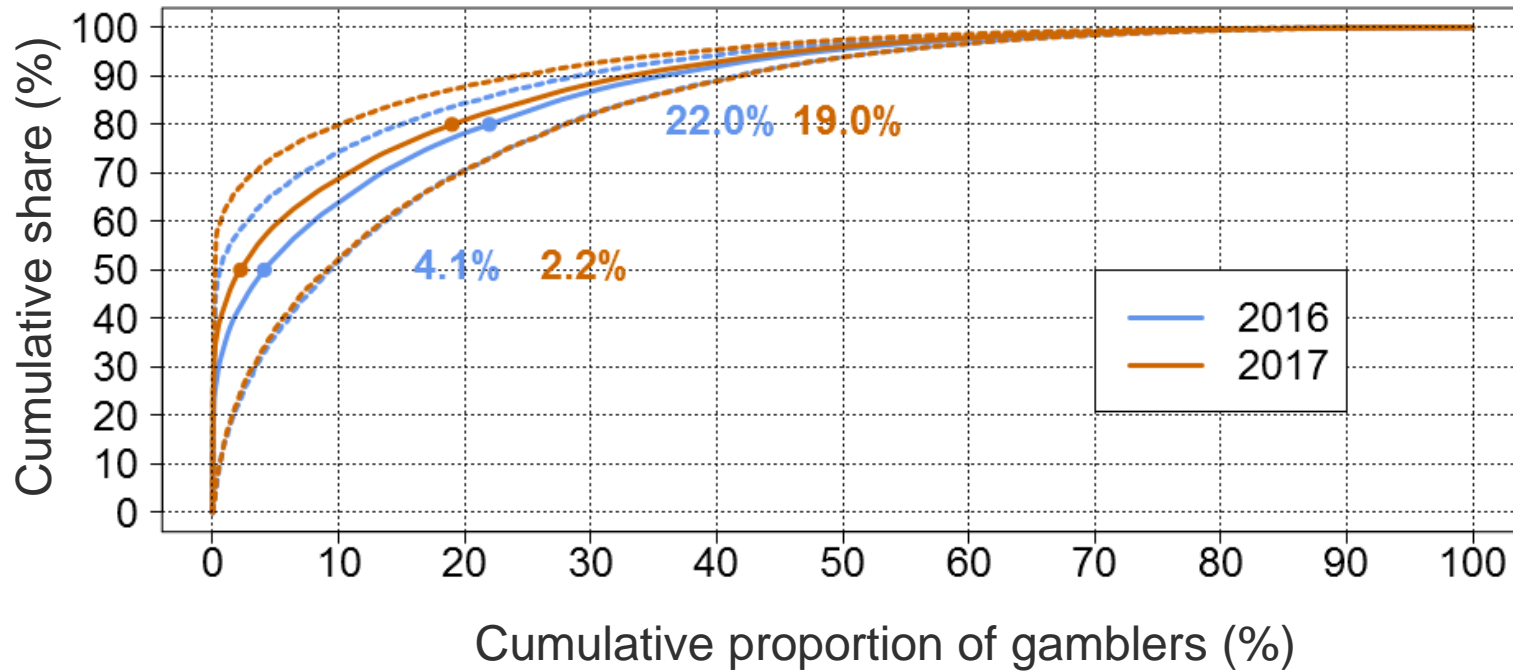


Fig 5. The cumulation of total gambling expenditure (€) in 2016 and 2017, population survey (% , n = 2165)

GAMBLING HABITS CHANGED

- **Population survey:** change from 2016 to 2017
 - Gambling online increased (Fig 6). Mobile gambling increased (Fig 7).
 - Gambling at home increased, while gambling at kiosks decreased (Fig 9).
 - Gambling alone increased (86% vs. 88%).
 - The proportion of those using at least one responsible gambling (RG) tool decreased, however, the amount of used RG tools slightly increased.

ONLINE GAMBLING INCREASED

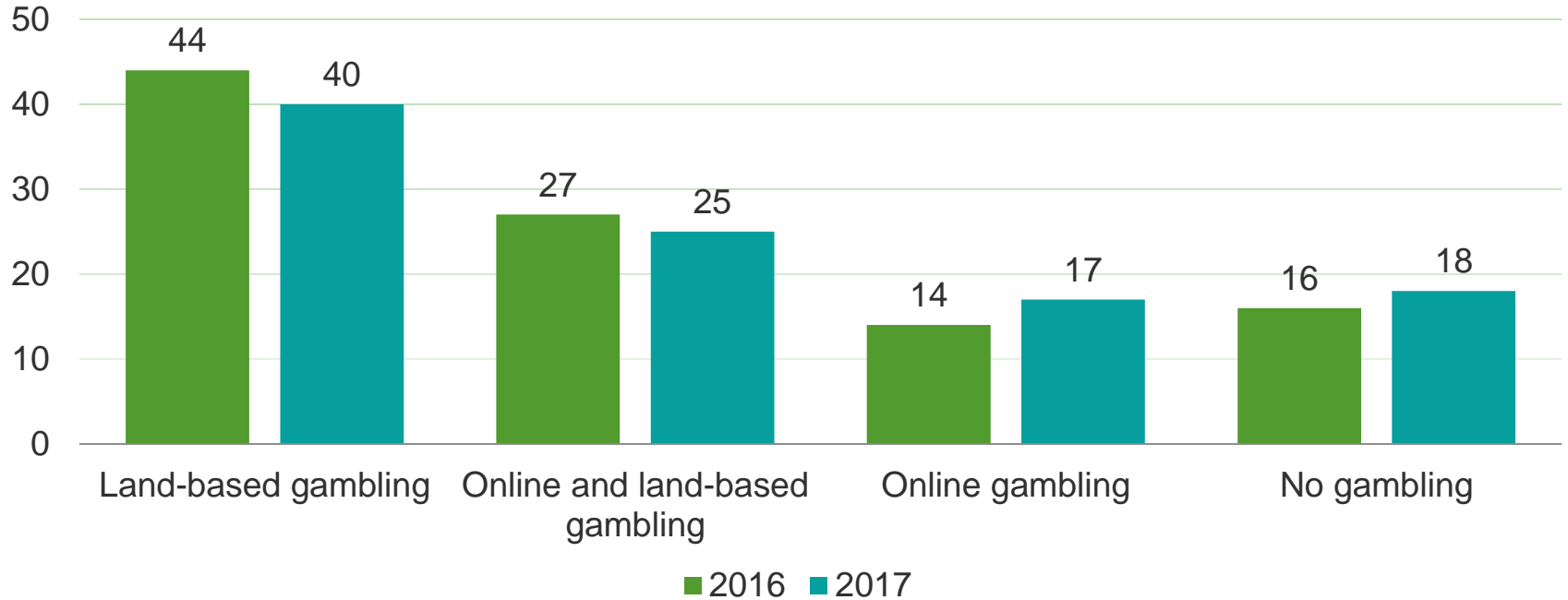


Fig 6. Gambling mode in 2016 and 2017, population survey (n = 2624, % of respondents)

MOBILE GAMBLING INCREASED

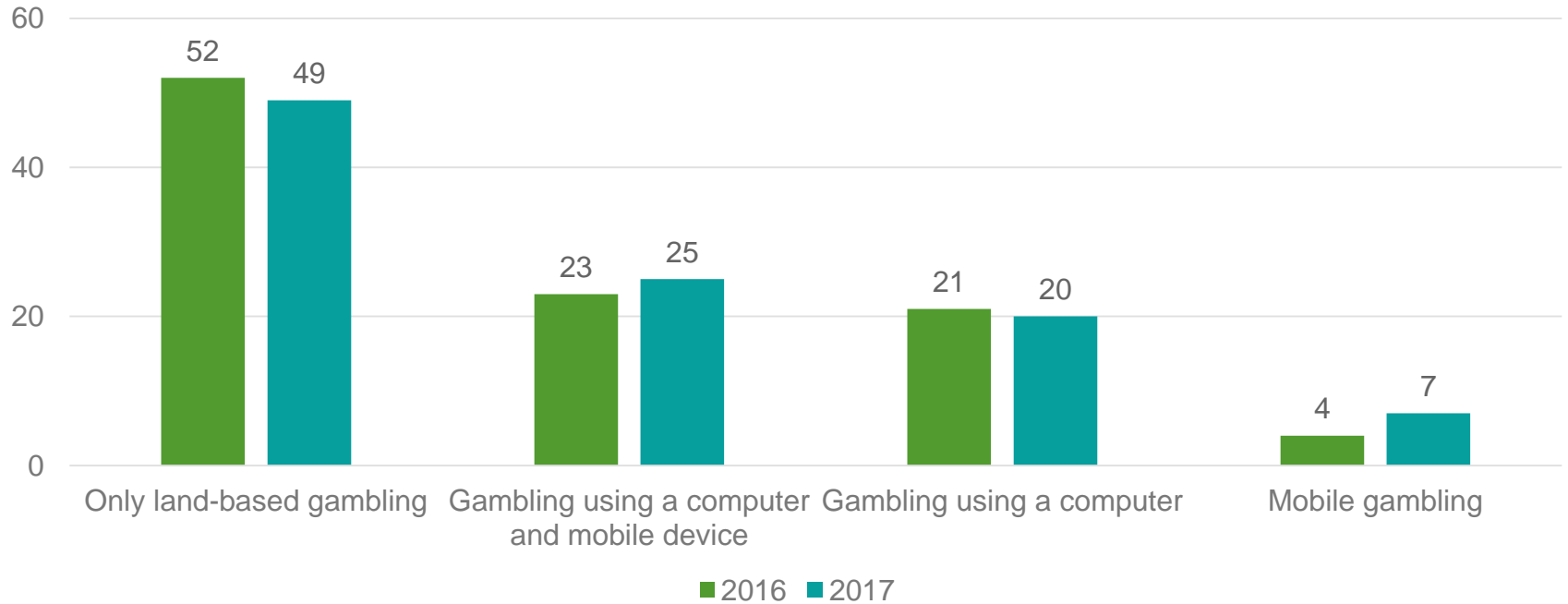


Fig 7. Gambling mode in 2016 and 2017, population survey (% , n = 2165)

GAMBLING ON MONOPOLY PLATFORMS AND PRIVATE VENUES DECREASED, WHILE GAMBLING AT PAF VENUES INCREASED (excl. ships/cruises)

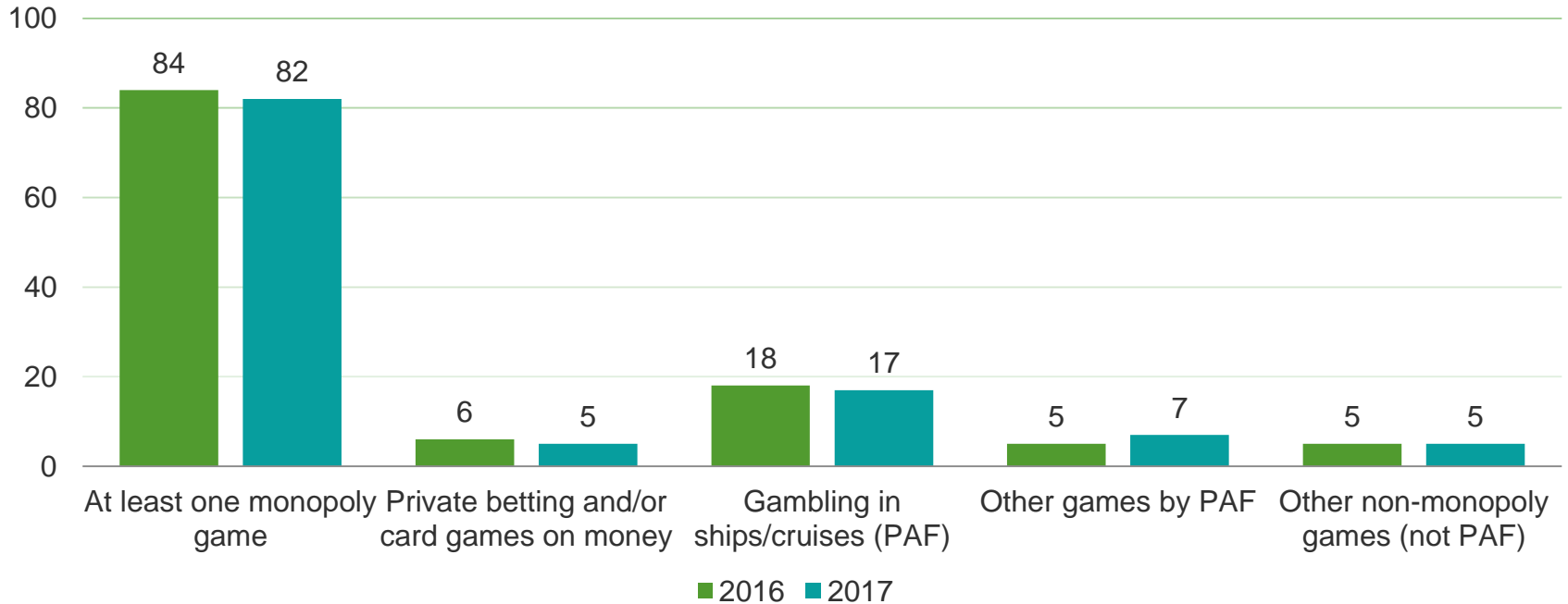


Fig 8. Gambling participation in 2016 and 2017 by operator, population survey (n = 2624, % of respondents)

GAMBLING AT HOME INCREASED, WHILE GAMBLING IN KIOSKS DECREASED

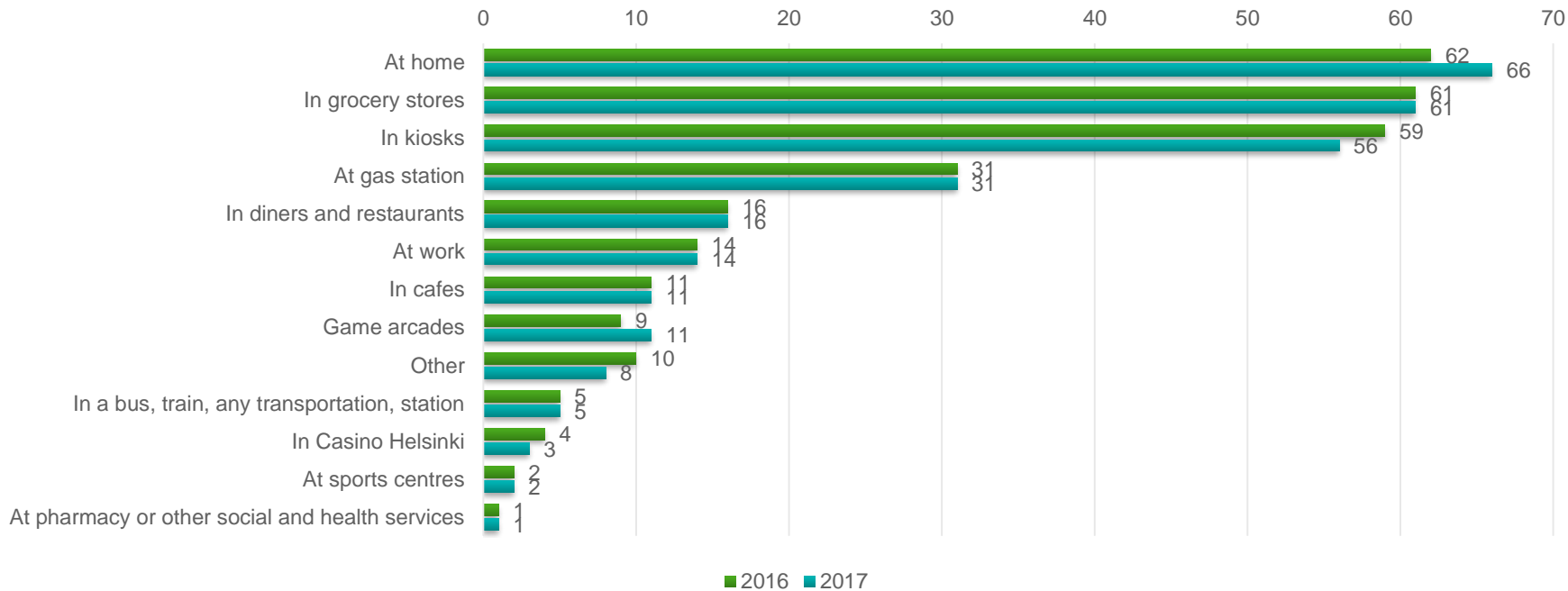


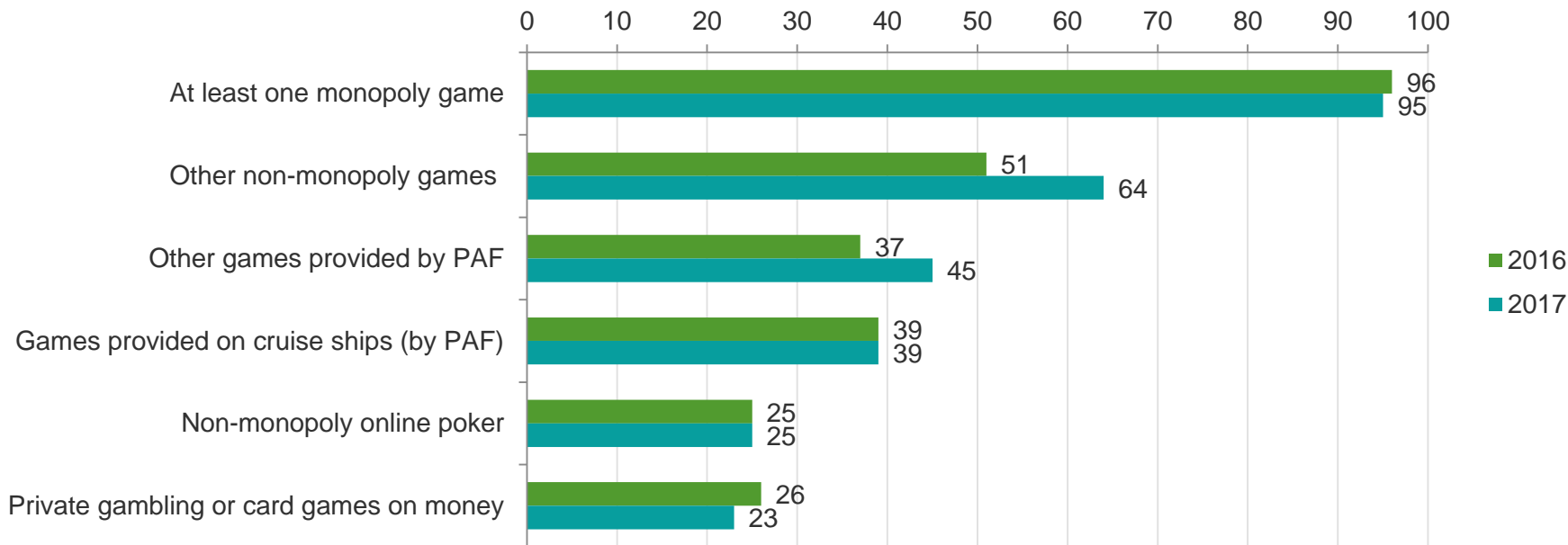
Fig 9. Gambling environments in 2016 and 2017, population survey (n = 2624, % of gamblers))

ONLINE GAMBLING INCREASED ALSO AMONG HELP-SEEKING GAMBLERS

Clinical survey: change from 2016 to 2017

- Online gambling increased.
- Non-monopoly gambling increased, especially other than online poker (Fig 10).
- No significant changes in gambling frequency, amount of game types played and gambling expenditure
- The use of RG tool did not increase.

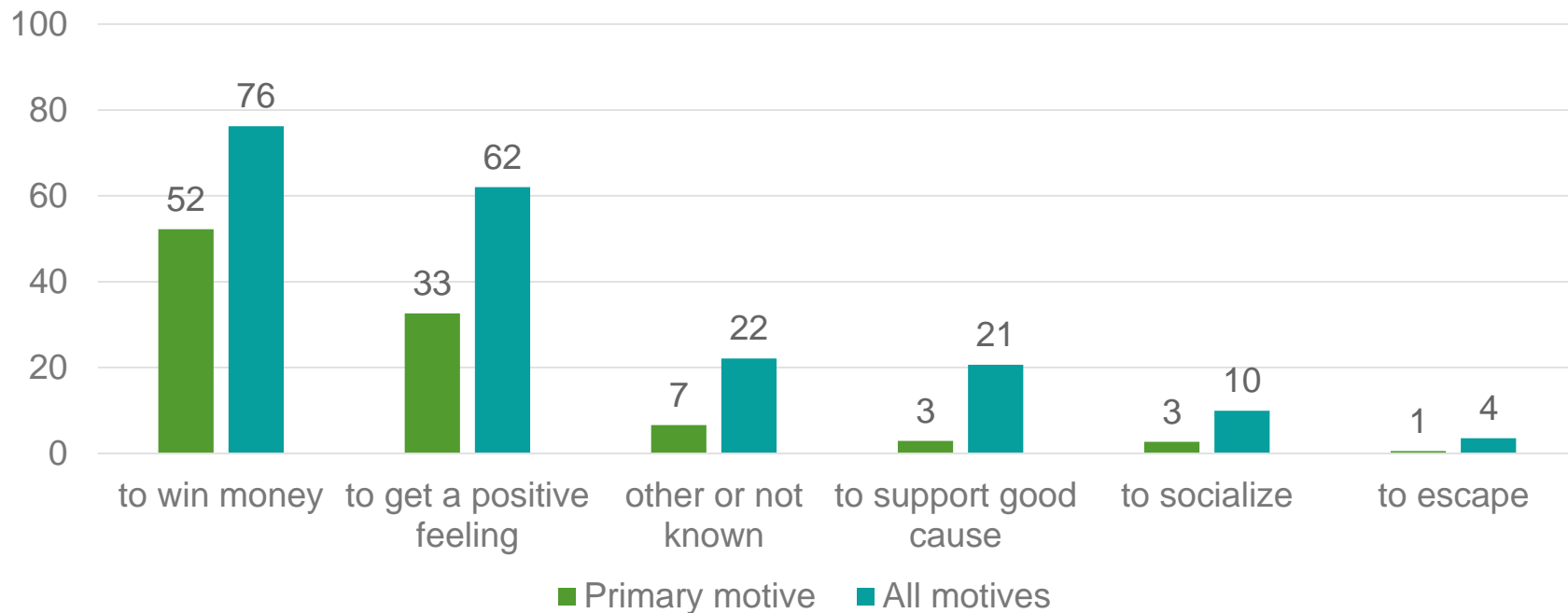
THE PROPORTION OF NON-MONOPOLY GAMBLERS INCREASED AMONG GAMBLING CLINIC CLIENTS (excl. online poker)



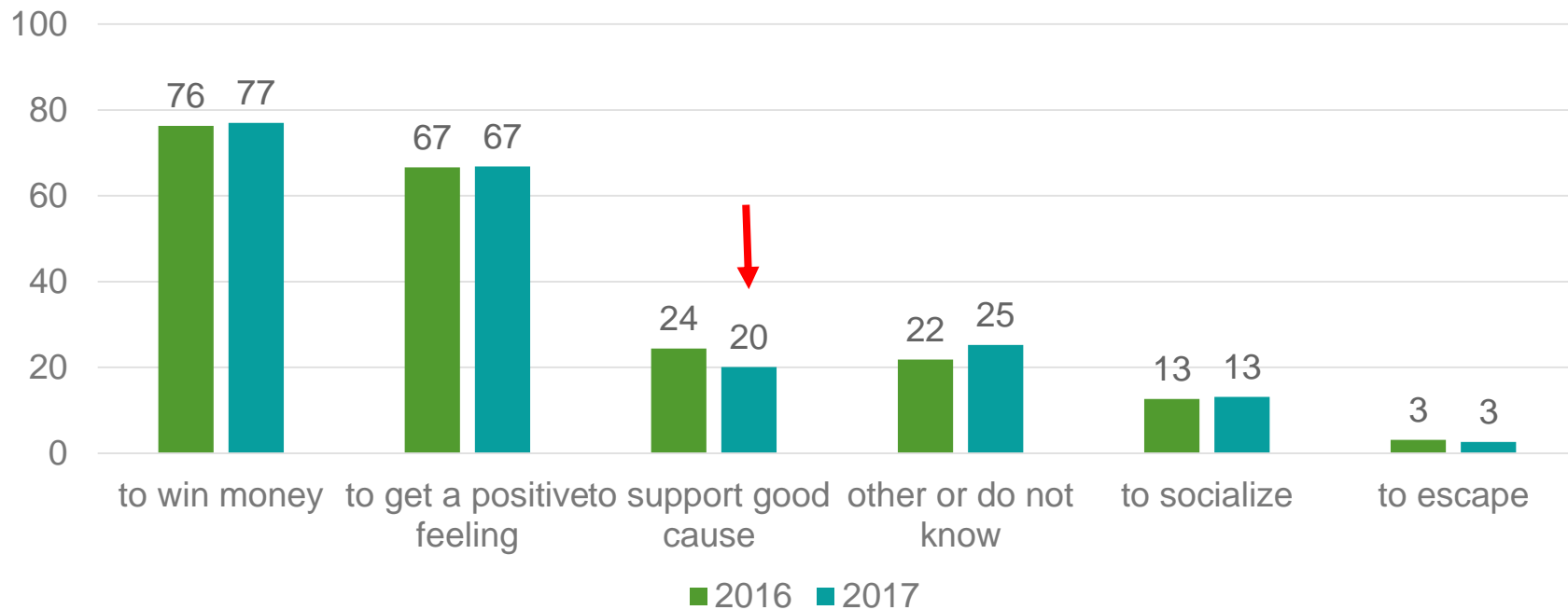
‘WHAT WOULD YOU SAY IS THE MAIN REASON THAT YOU GAMBLE*?’

2 questions (primary & other) incl. options*	In our analysis (primary & all)
For excitement, entertainment or fun	Positive feeling
To win money	Money
To escape or distract yourself	Escape
To socialize with family or friends	Socialize
To support worthy causes	Good cause
Because it makes you feel good about yourself	Positive feeling
Other	Other / do not know
Do not know	Other / do not know

MOST COMMON MOTIVES FOR GAMBLING INCLUDED TO WIN MONEY AND POSITIVE FEELING



MOTIVATIONAL FACTORS REMAINED UNCHANGED, EXCEPT FOR SUPPORTING GOOD CAUSE



GAMBLING-RELATED HARMS IN CONNECTION WITH THE FINNISH GAMBLING REFORM

HARM MEASURES

- Perception of gambling severity (1 item)
 - ‘How often did you think that gambling may have been a problem for you during the year 2016/2017?’
- Problem and Pathological Gambling Measure (PPGM¹, 14 items)
 - Problems (7 items), Impaired Control (4 items) & Other Issues (3 items)
 - Recreational, At-risk, Problem & Pathological gambling
- 18-item version of the Short Gambling Harms Scale (SGHS-18²)
 - Based on Harms checklist³: financial, relationships, emotional, health, work and study, and social deviance harm
- Clinical survey: 72-item Harms checklist³



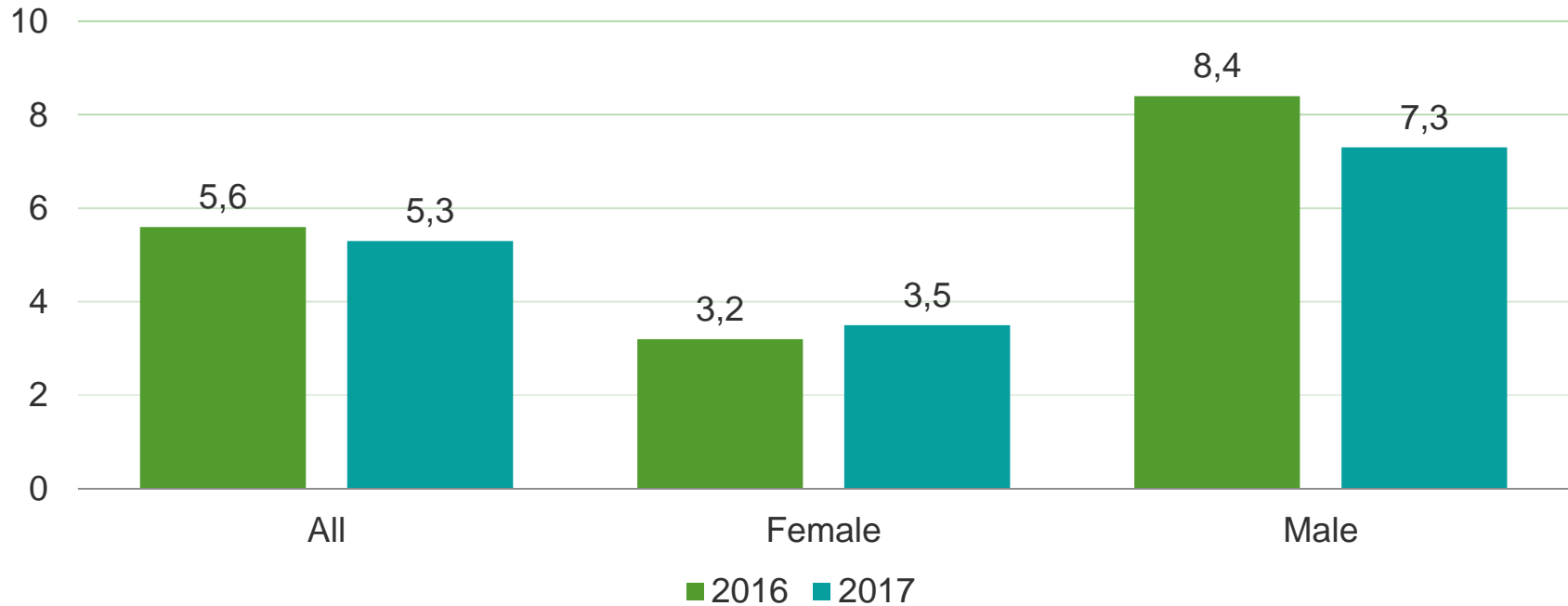
¹Williams & Volberg 2010; ²Latvala et al. manuscript; ³Browne et al., 2017

BASED ON POPULATION SURVEY, NO SIGNIFICANT CHANGE IN HARMS SO FAR

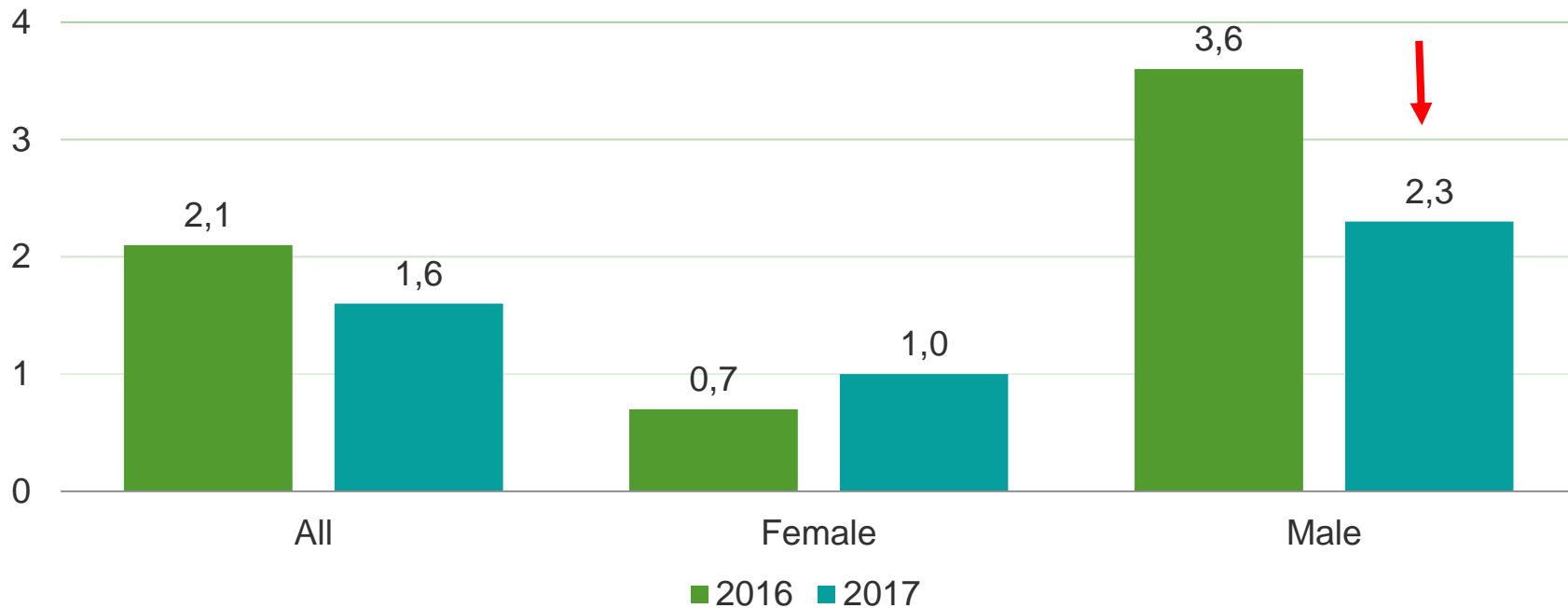
Population survey: change between 2016 and 2017

- No changes in the proportion of respondents who felt their gambling might have been (at least sometimes) a problem (Fig 13).
- No changes in problem and pathological gambling¹ prevalence (Fig 14)
- No changes in gambling-related harms² (Fig 15)

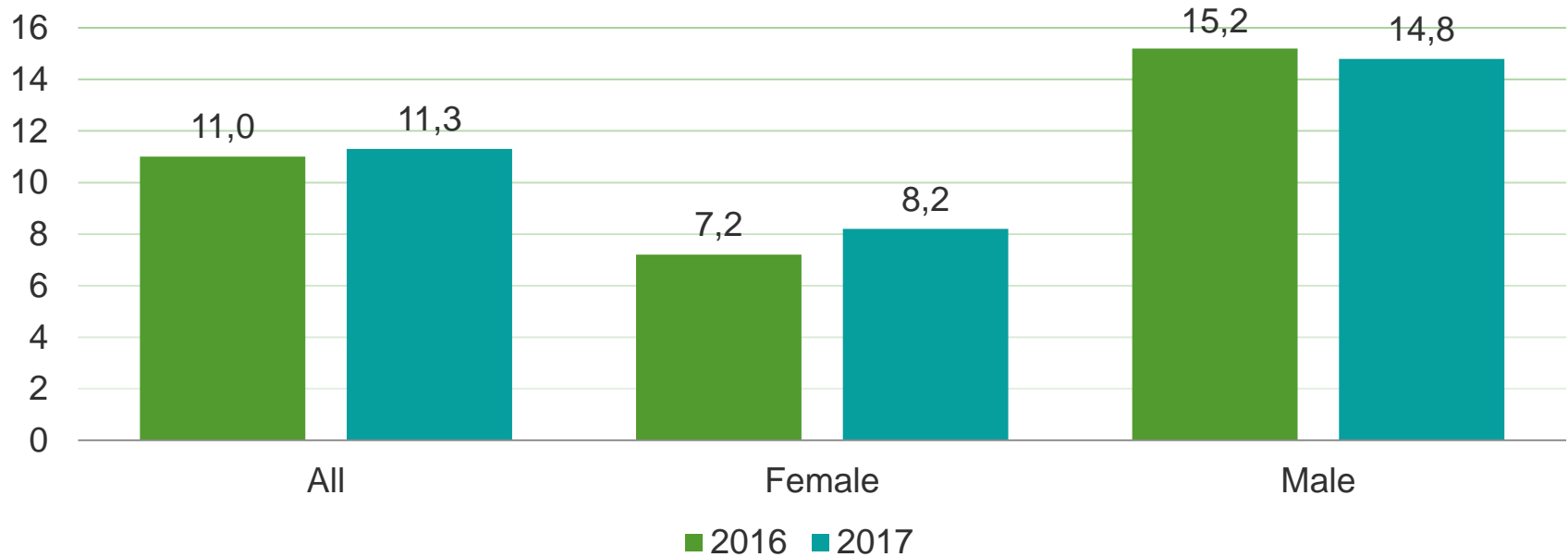
NO CHANGES IN PERCEIVED PROBLEM GAMBLING PREVALENCE



NO CHANGES IN PROBLEM GAMBLING (PPGM) PREVALENCE (except for men)



NO CHANGES IN GAMBLING-RELATED HARMS



EMOTIONAL OR PSYCHOLOGICAL HARMES INCREASED

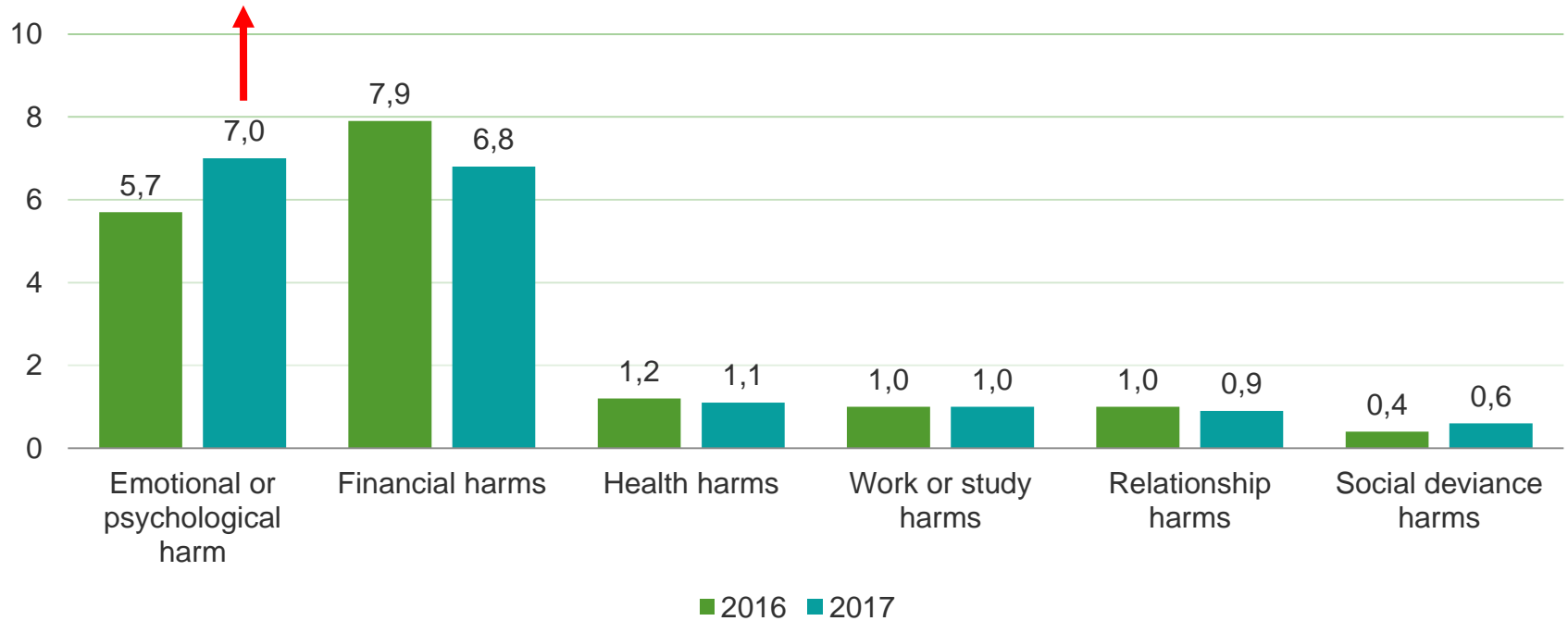


Fig 16. At least one experienced gambling-related harm (SGHS-18) in 2016 and 2017 by harm category, population survey (% , n = 2624)

CLINICAL SURVEY: GAMBLING-RELATED HARMS INCREASED

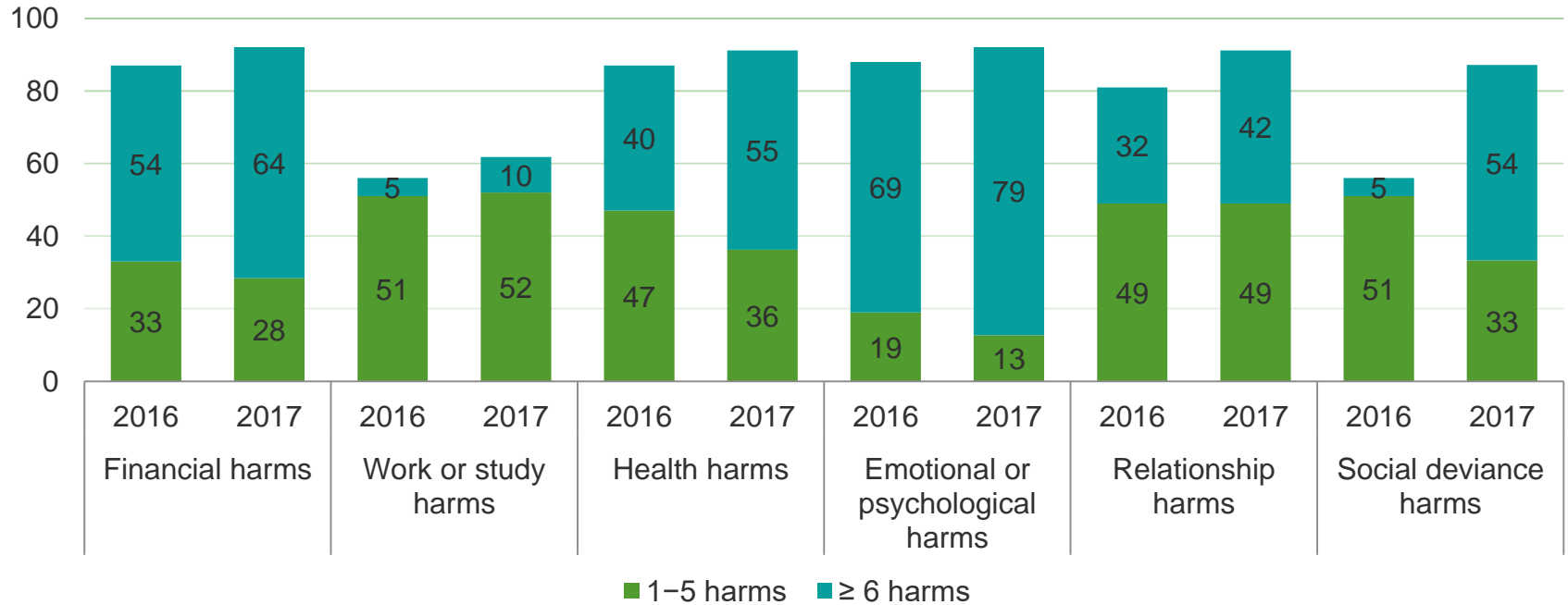


Fig 17. Gambling-related harms in 2016 (n = 119) and 2017 (n = 102) by harm category, clinical survey (%)

CLINICAL SURVEY: THE NUMBER OF GAMBLING-RELATED HARMS INCREASED

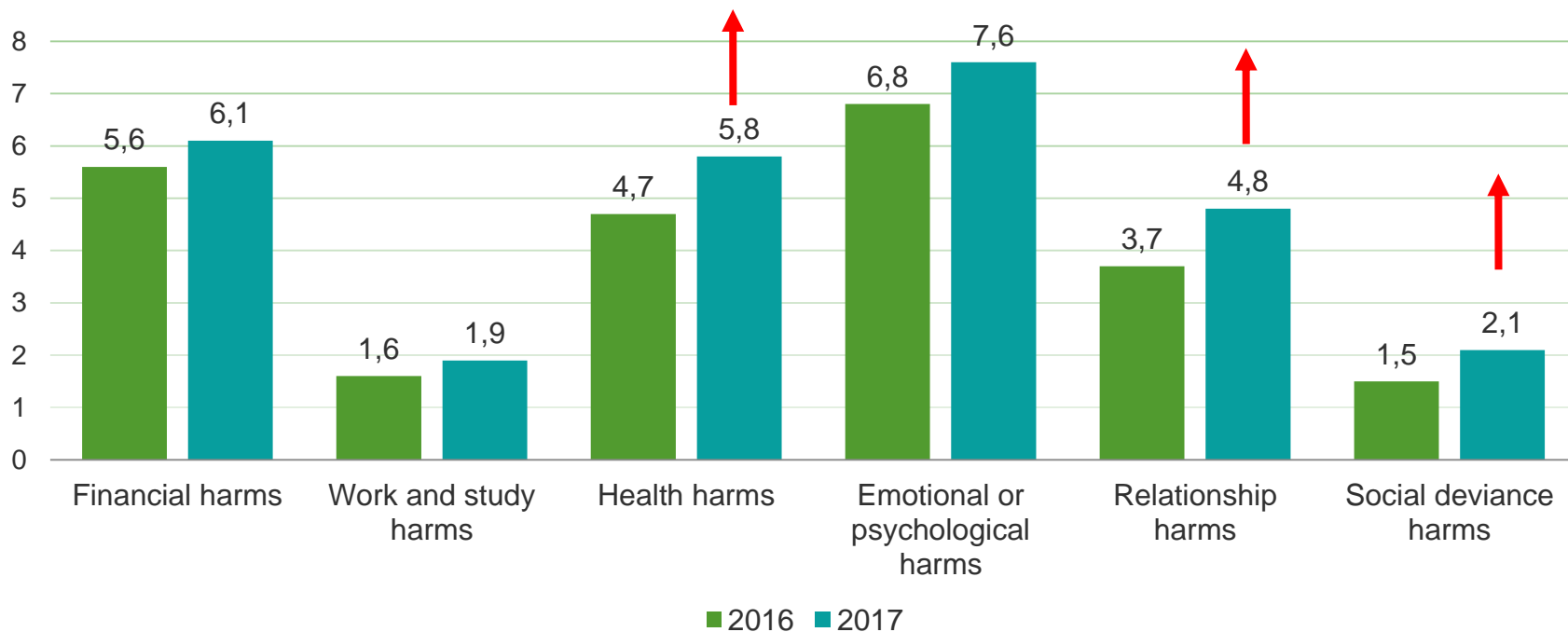


Fig 18. Number of gambling-related harms in 2016 (n = 119) and 2017 (n = 102), clinical survey (mean)

CONCERNED SIGNIFICANT OTHERS OF PROBLEM GAMBLERS (CSOs)

Population survey

- 12% of the respondents (women 12%, men 11%) were identified as CSOs in 2017.
- The proportion of CSOs decreased from 12.9% to 11.5% in 2016–2017.
- Harms experienced due to the gambling behaviour of a significant other remained unchanged.

Clinical survey

- 47% of the respondents were identified as CSOs in 2017.
- The proportion of CSOs did not change between 2016 and 2017.

GAMBLING MARKETING IN CONNECTION WITH THE FINNISH GAMBLING MONOPOLY REFORM

IN 2017, GAMBLING MARKETING WAS SEEN EXCESSIVE MORE OFTEN THAN IN 2016

- **Population and clinical survey:** The proportion of respondents who thought gambling Finnish monopoly operators' marketing and advertising was excessive increased between 2016 and 2017 (Fig 19 & 20).
- **Population survey:** Gambling marketing did not increase gambling (Fig 21).
- **Clinical survey:** Gambling marketing increased gambling (Fig 22).

POPULATION SURVEY: VIEWS ON GAMBLING MARKETING WERE MORE CRITICAL

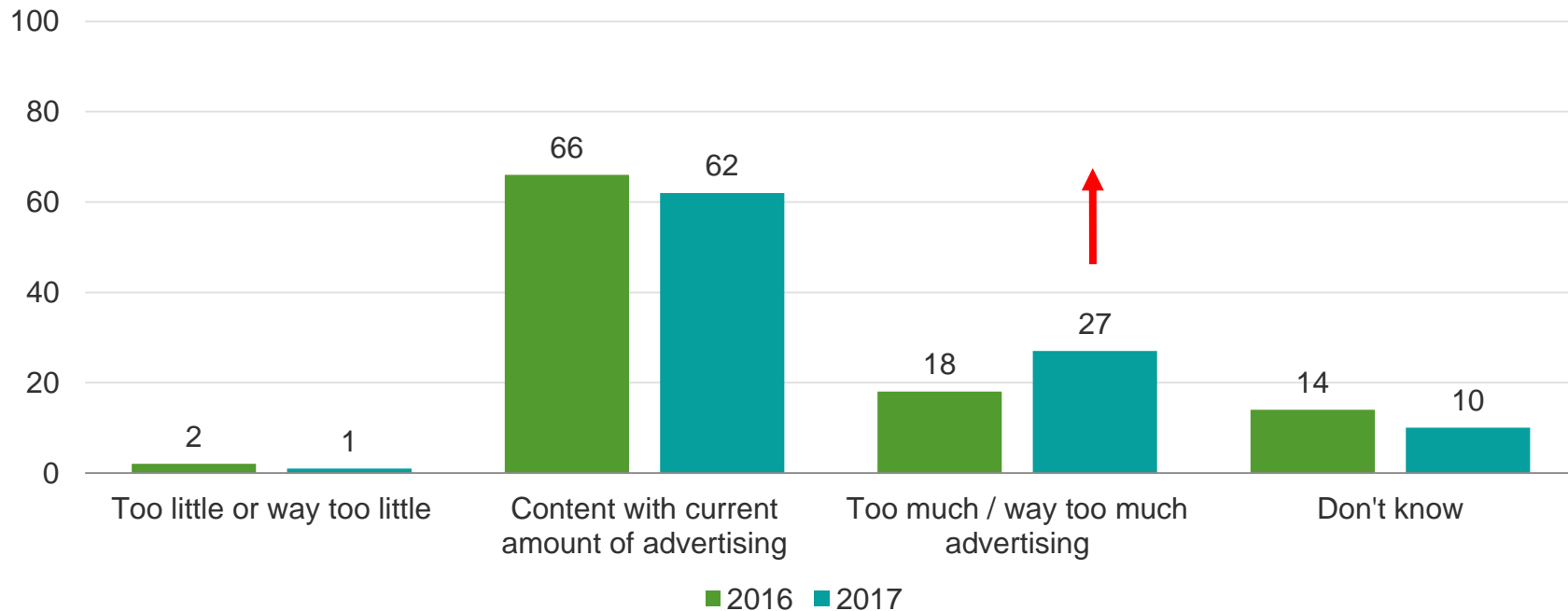


Fig 19. Respondents' views on Finnish monopoly operators' marketing and advertising in 2016 and 2017, population survey (% , n = 2624)

CLINICAL SURVEY: VIEWS ON GAMBLING MARKETING WAS EVEN MORE CRITICAL

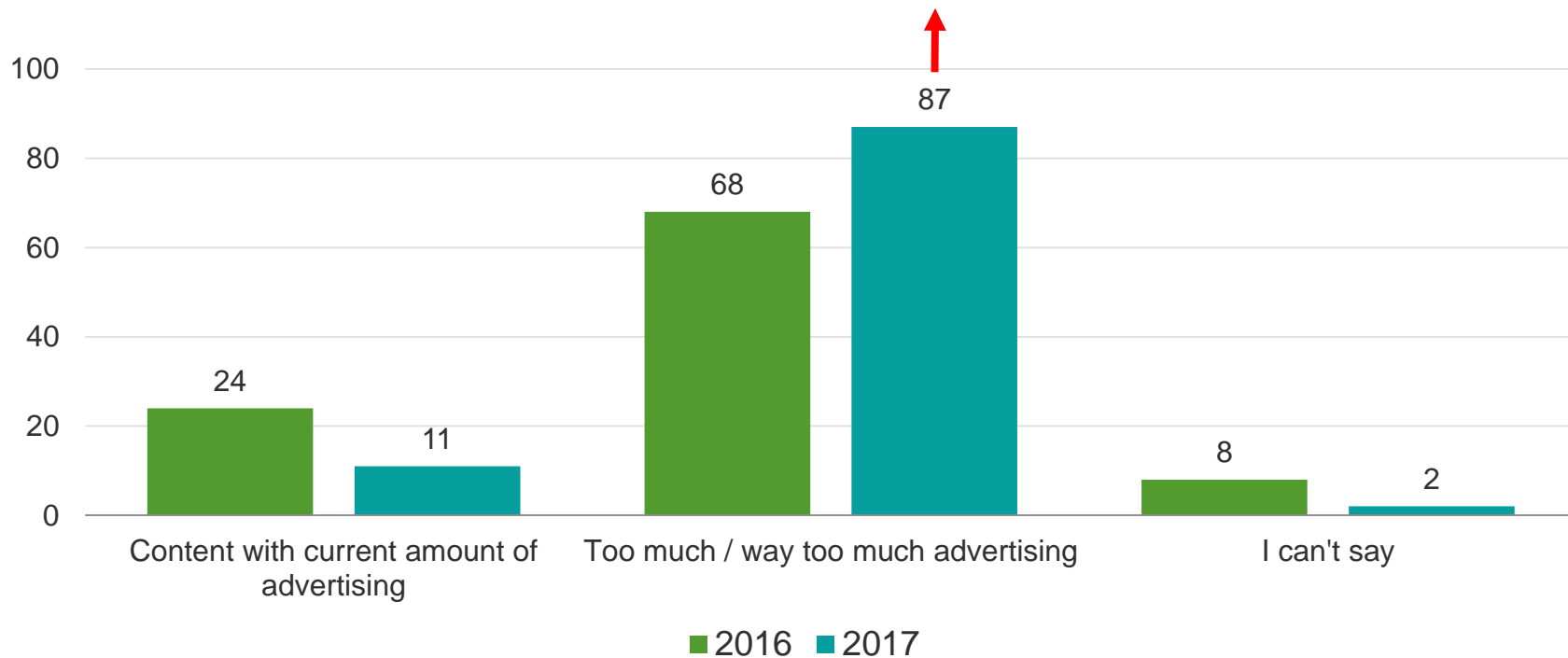


Fig 20. Respondents' views on Finnish monopoly operators' marketing and advertising in 2016 and 2017 (n = 102), clinical survey (%)

POPULATION SURVEY: MARKETING DID NOT INCREASE GAMBLING

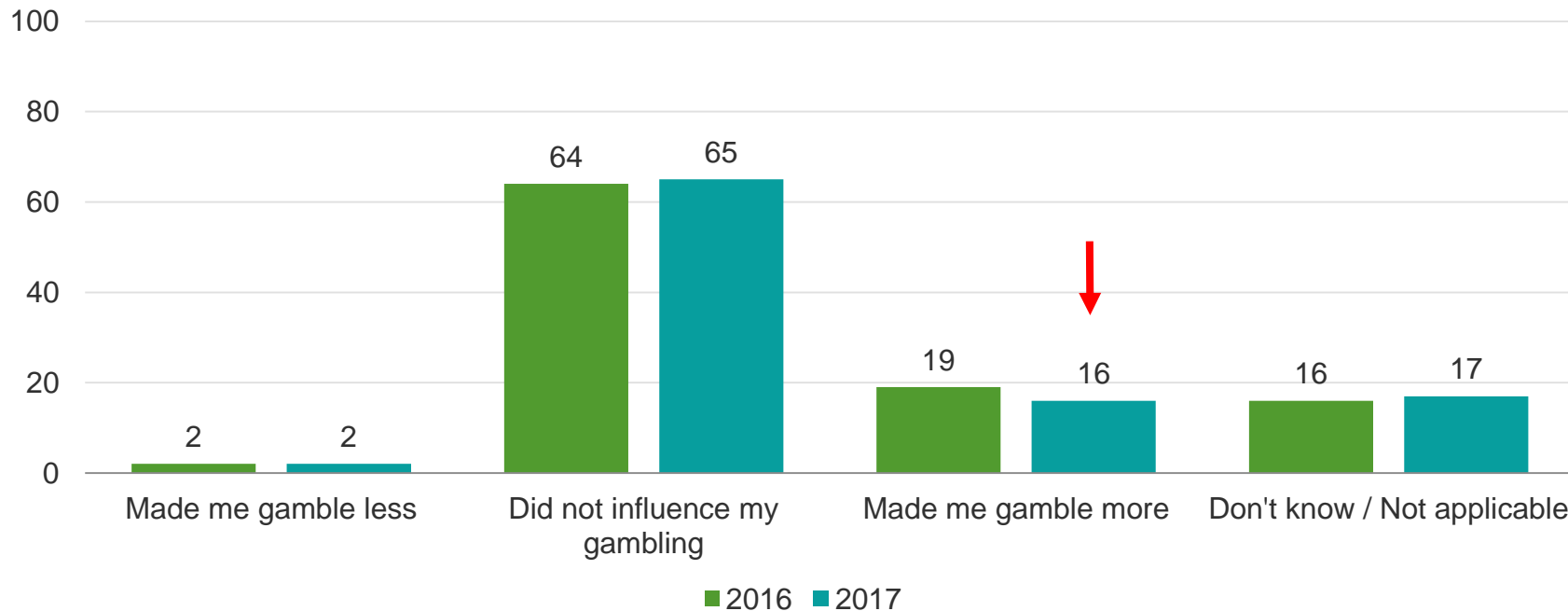


Fig 21. Respondents' views on the impacts of Finnish operator's marketing and advertising in 2016 and 2017, population survey (% , n = 2624)

CLINICAL SURVEY: GAMBLING MARKETING AND ADVERTISING INCREASED GAMBLING

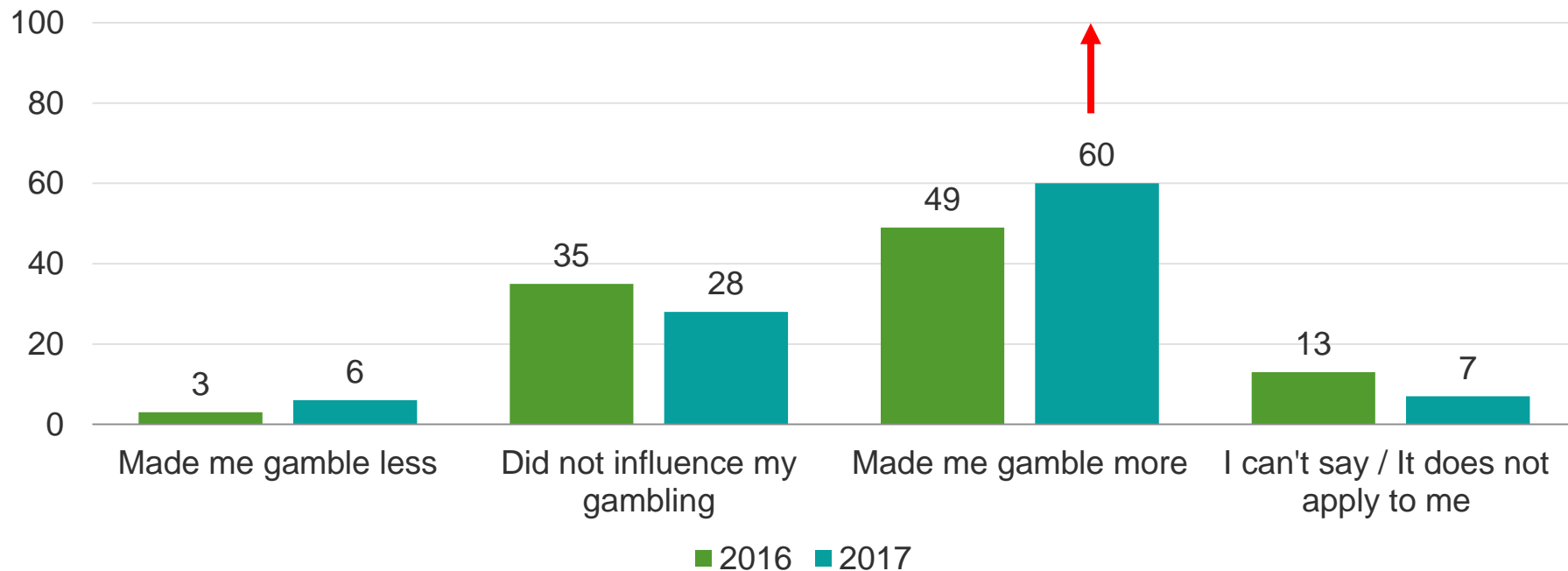


Fig 22. Views on the impacts of marketing and advertising by Finnish monopoly operator(s) in 2016 (n = 119) and 2017 (n = 102), clinical survey (%)

CONCLUSIONS: POPULATION SURVEY

- The proportion of gamblers decreased, also gambling weekly and gambling four or more game types decreased.
- Gambling habits changed – gambling online, at home and alone increased.
- The objective to reduce harms has not been completed yet; however, problem and pathological gambling decreased among men.
- The proportion of respondents who thought the marketing and advertising was excessive increased.

CONCLUSIONS: CLINICAL SURVEY

- No change was seen in gambling participation or habits, however, online gambling and non-monopoly gambling increased.
- The objective to reduce harms has not been completed, instead, gambling-related harms increased.
- The proportion of respondents who thought the marketing and advertising was excessive increased. Gambling marketing and advertising had increased their gambling.

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