

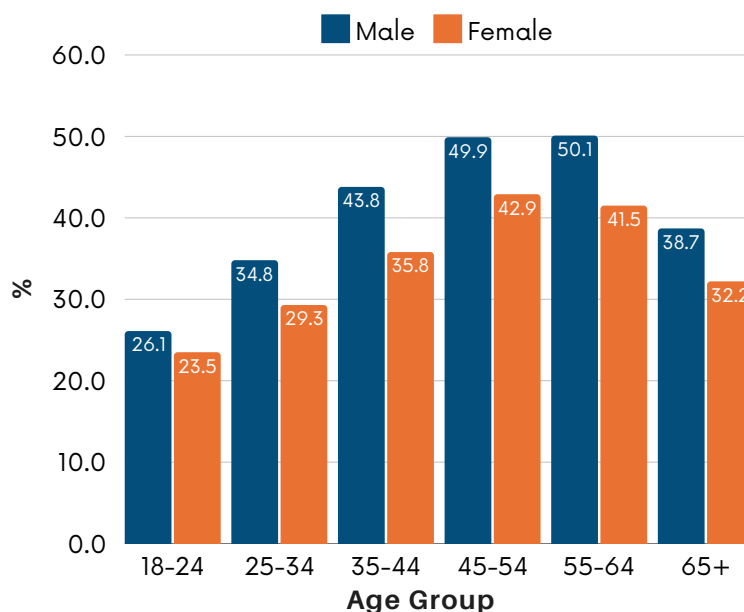
# GAMBLING IN OREGON

## 2023 Oregon Adult Behavior Risk Factor Surveillance System

### GAMBLING IS A POPULAR ACTIVITY

In 2023, 37.5% of Oregonians reported having gambled in the past year. Males were 20% more likely to gamble than females, with 40.7% of adult males reporting gambling compared to 34.0% of females. Age was also a significant factor in gambling engagement; the percentage of adults who reported gambling in the past year increased steadily with age, peaking in the 45-64 age group before tapering off in the oldest age bracket.

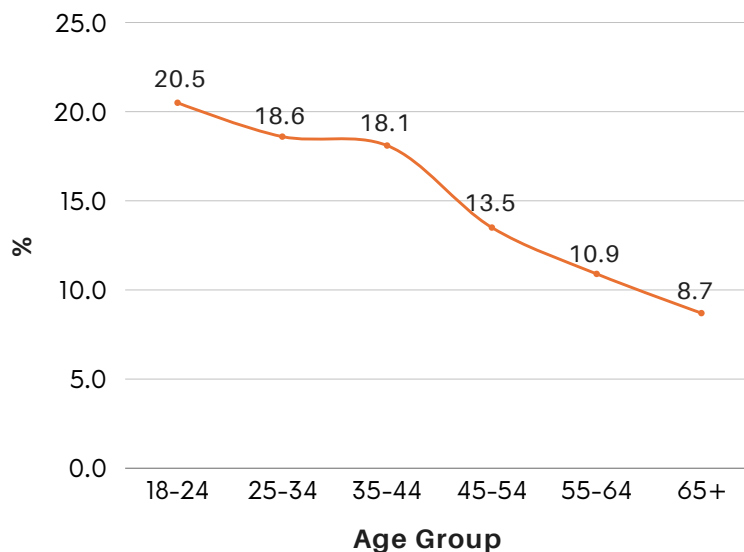
Among Oregonians Reporting to Have Gambled in the Past 12-Months, Gambling Engagement Rates, by Sex and Age



### YOUNGER ADULTS GAMBLE MORE THAN OLDER COHORTS

Over one-third of Oregon adults who gambled did so online or using an app. Males were 40% more likely than females to engage in online or app-based gambling activities, with males participating at a rate of 15.9% compared to 11.3% of females. The average age of participants who reported online or app-based gambling was 45; however, engagement consistently declined with age, highlighting a generational shift in gambling preferences.

Among Oregonians Reporting to Have Gambled in the Past 12-Months, Rates Placing Bets Online Or Using An App, by Age

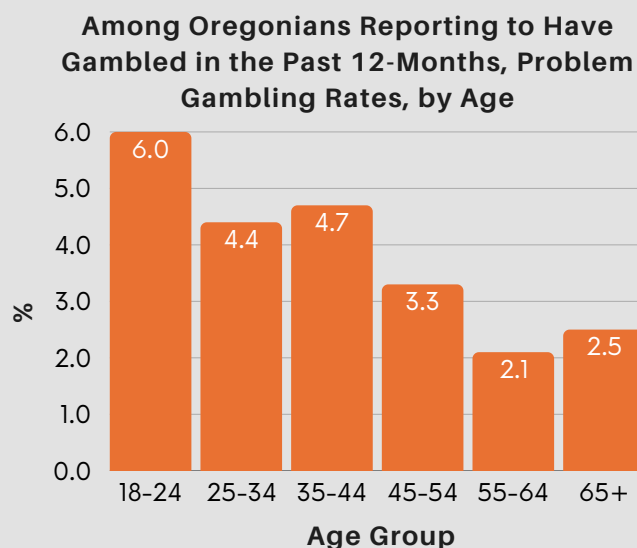


## FEW OREGONIANS GAMBLE IN THE UNREGULATED GAMBLING MARKET

About one-quarter of a percent (0.27%) of Oregon adults reported primarily wagering on an unregulated internet gambling site, including offshore casinos, sports books, or poker room sites. This finding does not support the argument that more legalized gambling opportunities are needed to compete with the unregulated market. Among survey respondents who gambled online or used a mobile application, 95% did so primarily within regulated gambling markets.

## ABOUT 1 IN 77 ADULT OREGONIANS REPORT EXPERIENCING GAMBLING-RELATED HARM

Among the 37.5% of Oregonians who reported gambling in the previous 12 months, 3.5% scored as at-risk for problem gambling based on the Brief Biosocial Gambling Screen (BBGS). Female rates of at-risk gambling were 10% higher than males; however, the results were not statistically significant. While females are generally less likely to gamble than males, those who do gamble might be at a higher risk of developing problem gambling behaviors.



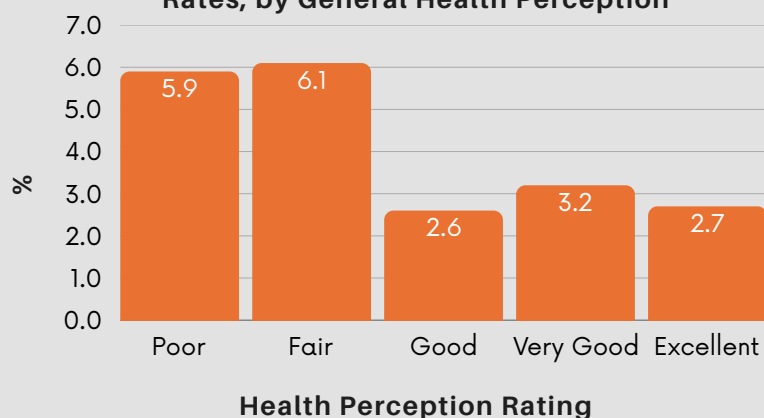
## RACIAL MINORITIES ARE AT HIGHER RISK OF GAMBLING PROBLEMS

Among racial and ethnic groups, Black or African American, Hispanic or Latino/a/x, and American Indian or Alaska Native individuals collectively had the highest at-risk rates for problem gambling, at 10.5%, 7.0%, and 4.3%, respectively. Interestingly, these findings on problem gambling risk do not fully correspond with overall rates of gambling engagement. That is, Black or African Americans reported the lowest rates of gambling engagement (28.5%) but the highest rates of problem gambling risk (10.5%). Unlike other findings from this report that correspond with the broader body of gambling research, this finding is unique. There is a complexity of factors that may contribute to the development of gambling problems in a population beyond simply having a large proportion of people gambling.

## PEOPLE WITH POOR HEALTH REPORT GREATER GAMBLING ENGAGEMENT AND HIGHER RATES OF GAMBLING PROBLEMS

Individuals who view themselves as being in excellent health were 17.0% less likely to have gambled in the past 12 months than those with all other perceptions of general health (e.g., poor, fair, good, or very good). Correspondingly, participants who self-reported poor or fair general health were more likely to be screened as at-risk for gambling harms. Further, those with chronic health conditions (e.g., diabetes, hypertension, high cholesterol, coronary disease) or who had experienced a stroke or heart attack were collectively more likely to report gambling than those who did not.

**Among Oregonians Reporting to Have Gambled in the Past 12-Months, At-Risk Problem Gambling Rates, by General Health Perception**

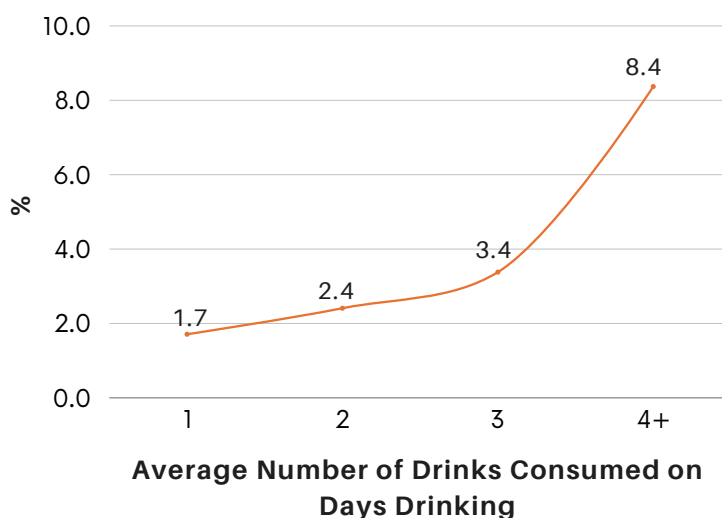


Likewise, individuals reporting poor mental health had higher problem gambling rates. As the number of poor mental health days increases, the rate rises steadily, peaking at 10.1% for individuals reporting 21 or more poor mental health days out of the prior 30. Additionally, among all the risk factors examined, cognitive impairments demonstrated some of the strongest associations with problem gambling risk.

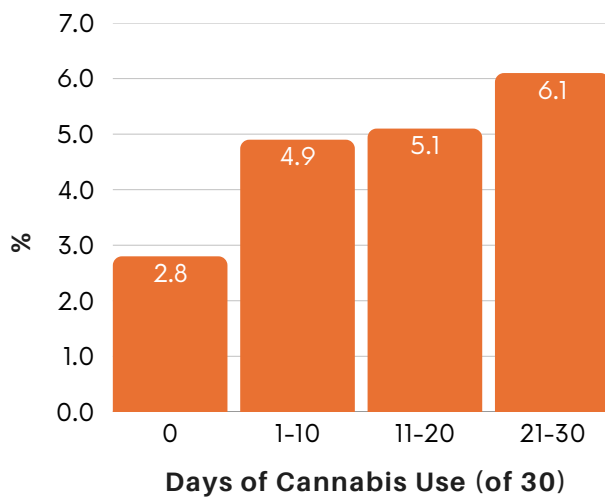
## TOBACCO, ALCOHOL, AND CANNABIS USE IS RELATED TO HIGHER GAMBLING PARTICIPATION AND PROBLEM GAMBLING RATES

Tobacco use was related to the highest rates of gambling (53.5%) and a 2.5X greater likelihood of reporting gambling-related problems than individuals who did not use tobacco; specifically, those who smoked cigarettes reported the highest rates of problem gambling behaviors (10%). Those using cannabis had the next highest rates of gambling participation (44.9%), followed by those using alcohol (43.4%). Rates of problem gambling behaviors tended to increase with greater consumption of alcohol and cannabis.

**Among Oregonians Reporting to Have Gambled in the Past 12-Months, At-Risk Problem Gambling Rates, by Alcohol Consumption**



**Among Oregonians Reporting to Have Gambled in the Past 12-Months, Problem Gambling At-risk Rates, by Cannabis Use**

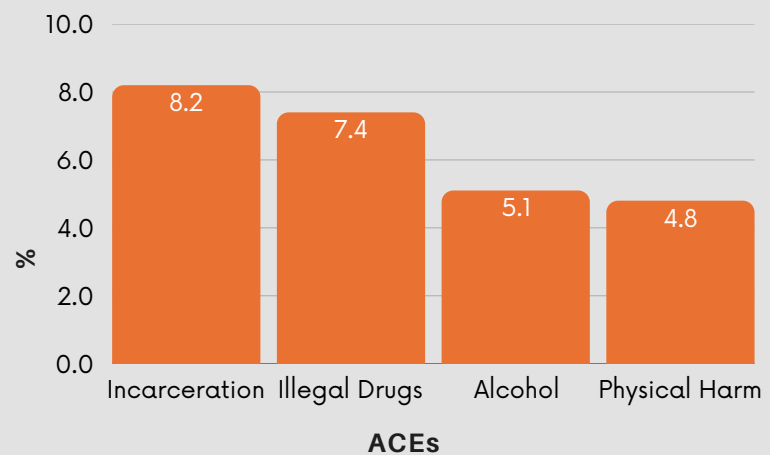


The data show that tobacco, cannabis, and excessive alcohol usage were all positively associated with engagement rates in online gambling and app-based activities. As online and app-based gambling is associated with higher problem gambling rates, the association between substance use and online gambling may partially explain the findings that substance use is positively correlated with problem gambling behaviors. Other contributors influencing these relationships may share underlying mechanisms, such as impulsiveness, stress, coping styles, or exposure to environments that promote both behaviors.

## ADVERSE CHILDHOOD EXPERIENCES CORRELATE WITH HIGHER RATES OF GAMBLING AND GAMBLING PROBLEMS

Individuals who experienced adverse childhood experiences (ACEs) were more likely to report participating in gambling activities and problem gambling behaviors compared to those who did not. While the average increase in gambling participation associated with ACEs was 22%, the average increase in at-risk gambling behavior was a substantial 145.4%. The heightened impact of at-risk problem gambling behaviors suggests that ACEs do more than just influence gambling participation by exacerbating the severity and harm of gambling. Individuals with a history of ACEs appear to be at higher risk for gambling in a way that is harmful, potentially as a means of coping with unresolved trauma or emotional distress.

**Among Oregonians Reporting to Have Gambled in the Past 12-Months, At-Risk Problem Gambling Rates, by ACEs**



### Question Wording for Select ACEs Assessed

- Did you live with anyone who served time or was sentenced to serve time in a prison, jail, or other correctional facility? (**Incarceration**)
- Did you live with anyone who used **Illegal street drugs** or who abused prescription medications? (**Illegal drugs**)
- Do you live with anyone who was a problem drinker or alcoholic? (**Alcohol**)
- Not including spanking, (before age 18), how often did a parent or adult in your home ever hit, beat, kick, or physically hurt you in any way? (**Physical Harm**)

## UNEMPLOYMENT, LOW INCOME, AND LESS EDUCATION ARE ALL ASSOCIATED WITH GAMBLING-HARM RISK

Unemployed individuals were 2.7 times more likely to screen positive for a gambling problem than employed persons. Additionally, student respondents (e.g., college) reported a relatively high rate of at-risk gambling, at 6.3%, which may reflect increased exposure to gambling through digital platforms like online sports betting or apps.

Higher average household income is associated with lower levels of at-risk problem gambling. Oregonians reporting an annual household income of \$15,000 or less screened positive for at-risk gambling at a rate of 10.4%.

Finally, lower education attainment is associated with an increased risk for problem gambling. The data showed that individuals who did not graduate from college screened positively for at-risk gambling at a rate of 10.1%, compared to a rate of 3.0% for individuals with a college degree.

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## CONCLUSION

The ability to link demographic, health-related, substance use, ACEs, and socioeconomic variables to gambling activities and at-risk problem gambling rates enables more focused and effective strategies for prevention, intervention, and policy development. Identifying specific factors associated with gambling behaviors sheds light on the underlying dynamics that contribute to problem gambling. For instance, the strong association between alcohol consumption and gambling suggests a need to address co-occurring behaviors while the impact of ACEs highlights the long-term influence of childhood trauma on adult risk-taking and coping mechanisms.

This research brief was based on a companion report.<sup>1</sup> Use the following link to find the full report and take a deeper dive into the content found within this brief:

<https://www.oregon.gov/oha/HSD/Problem-Gambling/Pages/Data.aspx>

1. Yamagata, G., Marotta, J. & Vazquez, P. (2024). 2023 Oregon Adult Health Survey: Special Report on Gambling. Oregon Health Authority, Problem Gambling Services. Salem, OR: Oregon Health Authority.