MENTAL HEALTH AND PROBLEM GAMBLING

Across studies, problematic gambling appears to be related to mental health. Individuals who engage in problem gambling behaviors are at least twice as likely to experience a psychiatric condition at some point in their life.¹

Problem gambling behaviors may coexist with mental health concerns including mood disorders, suicidality and self-harm behaviors, personality disorders, anxiety disorders, attention-deficit/hyperactivity disorder (ADHD), as well as other harmful behaviors.

Compared to the general population, among those in mental health, drug and alcohol, family violence, and financial counseling services are between two and 21 times more likely to also present with problematic gambling behaviors.²⁴⁵

Having experienced clinical anxiety or depression increases the risk of developing problematic gambling behaviors later on among women.¹

Young adults who are at-risk of and those who are engaging in problematic gambling behaviors are at an increased risk of mental health disorder onset.⁵

Among adolescents, symptoms of anxiety, depression, aggression, and antisocial behavior have been related to being at risk for developing problematic gambling behaviors.⁶

75% of individuals who seek treatment for problem gambling have a psychiatric comorbidity.⁷

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*For more information regarding youth at risk and mental health please see the Impacts of Gambling on Youth At Risk brief.
MOOD DISORDERS AND PROBLEM GAMBLING

An estimated 23.1% of individuals seeking treatment for problem gambling also have mood disorders like major depression and bipolar disorders.7

MAJOR DEPRESSIVE DISORDER

- Within a community sample, approximately 32.4% of individuals who engaged in problematic gambling met the criteria for major depressive disorder8. Similarly, among individuals who were seeking treatment for problematic gambling, 29.9% met the criteria for major depressive disorder.7

- Depressive symptoms have been shown to predict the onset of gambling behaviors one year later.10

- People who engage in problem gambling and have depression are more likely to report greater severity of problems associated with gambling, history of childhood abuse and neglect, lower family functioning, and lower levels of extraversion, agreeableness, and conscientiousness compared to those who engage in problem gambling without depression.8

BIPOLAR DISORDER

- Roughly 8.8% of individuals seeking treatment for problem gambling also had a bipolar disorder diagnosis.7

- Individuals with a bipolar diagnosis are four times more likely to have moderate to severe gambling problems than the general population.11

- Individuals meeting criteria for problem gambling and bipolar disorder reported lower quality of life compared to those with bipolar who did not engage in problematic gambling.12

SUICIDALITY, SELF-HARM AND PROBLEM GAMBLING

- Among individuals with problematic gambling behaviors, suicidal behaviors (e.g., suicide attempts, completed suicides) are more common among those who also engage in disordered substance use than those who engage in problem gambling without disordered substance use.\(^\text{13}\)

- Suicidality is 5.3 times higher in individuals with problematic gambling than those without problematic gambling behaviors.\(^\text{14}\)

- Even after controlling for conditions such as depression, substance use, ADHD, and anxiety, suicidality rates remained 2.9 times higher in those with problematic gambling than in the general population.\(^\text{14}\)

- Although the research is limited, some data suggest a positive relationship - that is, when one increases so does the other - between non-suicidal self-harm (e.g., cutting, self-burning, or self-mutilation) and problem gambling.\(^\text{15}\)

PERSONALITY DISORDERS AND PROBLEM GAMBLING

- Nearly one half (47.9\%) of individuals seeking treatment for problem gambling had comorbid personality disorders, with the most prevalent being narcissistic (16.6\%), antisocial (14.0\%), avoidant (13.4\%), obsessive-compulsive (13.4\%), and borderline (13.1\%) personality disorders.\(^\text{7}\)

- In a large epidemiological study of over 10,000 adults, individuals with problematic gambling were significantly more likely to be diagnosed with a comorbid personality disorder (42.96\%) than individuals who do not problem gamble (7.3\%).\(^\text{16}\)

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ANXIETY DISORDERS AND PROBLEM GAMBLING

An estimated 17.7% of individuals seeking treatment for problem gambling have an anxiety disorder. Of those engaged in problematic gambling, individuals are twice as likely to experience any anxiety condition (i.e., PTSD, panic disorder, phobia, generalized anxiety) than the general population. \(^7\)

GENERALIZED ANXIETY DISORDER

- Approximately 14.4% of individuals seeking treatment for problem gambling also have a generalized anxiety disorder. \(^7\)

- Generalized anxiety has been shown to predict problem gambling 1 year later. \(^10\)

POST-TRAUMATIC STRESS DISORDER

- A recent review found that across studies, PTSD symptom severity heavily contributed to gambling disorder severity. \(^17\)

- Approximately 12.3% of individuals who sought treatment for problem gambling met the criteria for post-traumatic stress disorder. \(^7\)

- People who engage in problematic gambling with a history of PTSD are more likely to use gambling to cope with unwanted emotions. \(^18\)

OTHER ANXIETY-RELATED DISORDERS

- Roughly 13.7% of individuals who sought treatment for problem gambling also had a diagnosis of panic disorder. \(^7\)

- 14.9% of individuals who sought treatment for problematic gambling also had a social phobia. \(^7\)

- An estimated 8.2% of individuals seeking treatment for problematic levels of gambling also have obsessive-compulsive disorder. \(^7\)

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ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) AND PROBLEM GAMBLING

- One in five individuals with problem gambling having clinical levels of ADHD symptoms.19

- Individuals who engage in problem gambling are 4.18 times more likely to have ADHD than those who do not engage in problem gambling. Individuals with ADHD were 2.85 times more likely to experience problem gambling than individuals without ADHD.19

- 18.46% of individuals who engage in problem gambling also have ADHD and 11.75% of individuals with ADHD also engage in problem gambling.19

- Among males with ADHD, impulsivity traits (1) lack of premeditation and (2) sensation seeking are not significant risk factors for problem gambling.20

OTHER HARMFUL BEHAVIORS AND PROBLEM GAMBLING

- Problem gambling is significantly related to intimate personal violence (IPV), with one-third of individuals with problem gambling reporting being a survivor of IPV or perpetrators of IPV.3

- Individuals who engage in problem gambling are more likely to lose control of their anger and engage in aggressive behaviors than individuals who do not problem gamble.21

- There is an increased risk for lying, cheating, and stealing with those who engage in problem gambling compared to those who do not.22
Given the harmful relationship problem gambling has with mental health, prevention strategies and methods to intervene are important for community stakeholders to know about.

- Learn more about the harmful relationship between mental health and problematic gambling, including prevention, treatment, and ways to support individuals who are seeking help.

- The sequence of comorbidity onset for mental health symptoms and problematic gambling differ between sexes. Females tend to begin gambling after the onset of depression, anxiety, and/or substance use problems; conversely, males tend to initiate gambling behaviors prior to mental health symptom onset.¹

- Integrate the harmful impact of problem gambling into education opportunities when discussing mental health concerns and/or developing partnerships.

- Use a brief assessment measure to identify gambling problems such as the Brief Biosocial Gambling Screen (BBGS) and assess functionality in areas of life (e.g., occupational, financial, social, interpersonal, and intrapersonal).²⁴²⁵

- Develop a harm minimization strategy. Take a responsible gambling approach and collaboratively plan what best aligns with their goals, while also promoting health and reducing harm.²⁴

### Interventions and Treatment

- Brief, early intervention (e.g. motivational interviewing or motivational enhancement)
- Social support groups such as Gambling Anonymous (GA) or SMART Recovery
- Cognitive-behavioral therapy from specialists in addictive behaviors
- Improve problem gambling behaviors by integrating gambling screening and referral processes into substance abuse and mental health treatment.¹²²⁶
- Gambling-specific treatments may be most beneficial for treatment success of problem gambling behaviors, including in a substance use treatment setting.²⁶

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PROBLEM GAMBLING AND MENTAL HEALTH: RESEARCH CONTRADICTING THE LARGER BODY OF WORK

Some research suggests that the relationship between problem gambling and mental health is not consistent.

- Among adults over the age of 40, severity of specific phobias were negatively associated with gambling activity. In fact, that the more severe the phobia, the less often individuals engaged in gambling.27

- Among young adults (adults under 40), greater use of substances, and excessive computer use were associated with less gambling.27

Key Findings

- Those who engage in problematic gambling and also have a comorbid mental health condition, specifically PTSD or depression, are more likely to use gambling as a coping strategy.

- Individuals at-risk of and who engage in problematic gambling are at an increased risk of suicide and self-harm behaviors.

- Gambling behaviors are strongly associated with mental health conditions. Studies consistently report that there are high comorbidities between individuals who engage in problematic gambling and mental health conditions.

- For women, there is a greater risk of psychiatric and problematic gambling comorbidities.1

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