

GAMBLING IN THE LGBTQIA2S+ COMMUNITY

Problem gambling is an underexplored issue in the LGBTQIA2S+ community, despite its significant potential impacts (Devault-Tousignant et al., 2023). This group faces unique challenges and stressors that can contribute to higher rates of gambling addiction compared to the general population. Factors such as discrimination, social marginalization, and mental health struggles can exacerbate the tendency to engage in problem gambling as a means of coping.

Additionally, the LGBTQIA2S+ community may experience a lack of focused support and resources, making it more difficult to seek help. Addressing problem gambling within this community requires a nuanced approach that considers these specific challenges, promotes inclusive support systems, and fosters a broader understanding of the intersection between identity and addiction.

DEFINING LGBTQIA2S+

It is critical to note that this acronym encompasses a variety of identities and groups, including but not limited to lesbian, gay, bisexual, trans, queer and questioning, intersex, asexual, and two-spirit individuals. These groups vary in biological sex, gender identity, gender expression, and sexual orientation, among other characteristics.



KEY TERMS

- **Biological sex** refers to the organs, hormones, and chromosomes that make up a person from birth.
- **Gender identity** refers to the way an individual views themselves, whereas **gender expression** describes how a person demonstrates their gender.
- **Cisgender** refers to a person whose gender identity aligns with the biological sex assigned at birth. **Non-binary** is a gender identity not categorized as solely male or female.
- **Sexual orientation** refers to whom a person is attracted to.

GAMBLING AMONG GENDER MINORITIES

Transgender identity and gambling behaviors have been studied in youth and young people populations, finding higher rates of problem gambling compared to cisgender peers (Zeeman et al., 2025). Research also finds that gambling behaviors are more strongly associated with the sex assigned at birth than gender identity. Specifically, evidence suggests that those assigned male at birth are more likely to engage in problematic gambling behaviors (Malkin & Stacey, 2023). However, with increasing rates of gambling among females in recent years, this deserves continued attention.

HIGHER RATES OF AT-RISK & PROBLEM GAMBLING

Research highlights that gender minorities, including transgender and non-binary, exhibit notably higher rates of gambling behavior compared to their cisgender counterparts (Lee & Grubbs, 2023). Studies show that trans and non-binary adolescents are particularly vulnerable, with a reported 3.6 times higher risk of problem gambling compared to cisgender youth (Noel et al., 2022). This elevated risk is partially attributed to minority stress theory, underscoring the impact of stigma and discrimination (Lick et al., 2013). Notably, problem gambling research on gender minorities is severely lacking (Hailey et al., 2025).

Minority stress theory proposes that people from minority or marginalized groups experience higher levels of stress due to sociocultural inequities and stressors.

GAMBLING AMONG SEXUAL ORIENTATION MINORITIES

Some evidence indicates higher rates of problem gambling among gay and bisexual men (Grant & Potenza, 2021), some show no differences (Bush et al., 2021), and others show the opposite (Aonso-Diego et al., 2025). Bisexual and lesbian women, however, consistently demonstrate higher rates of gambling disorder relative to their heterosexual counterparts (Broman et al., 2022; Klein & Dudley, 2014). Additionally, sexual minority women appear to be at a greater risk of experiencing gambling harm than sexual minority men (Zeeman et al., 2025). One study found that among young adults, although rates of problem gambling were lower than those of heterosexuals, problem gambling co-occurred with lower well-being and higher suicidality for sexual minorities (Moimoi & Roychoudhury, 2025).

Although some studies have observed correlations between problem gambling and the above identities, these relationships often dissipate after controlling for factors such as age, psychological distress, and social support (Lee et al., 2023). Examining risk factors specific to these populations may help explain these mixed findings.

RISK FACTORS FOR PROBLEM GAMBLING & GAMBLING HARM



EXPERIENCES OF DISCRIMINATION

Experiences with stigma and discrimination increase stress in the LGBTQIA2S+ community, while also decreasing trust in the health and mental health care systems. Researchers have observed that greater perceptions of identity-related stigma are linked with increased gambling-related harms (Zeeman et al., 2025).



MINORITY STRESS & RELATED RISK FACTORS

Compounded effects of minority stress (e.g., higher stress levels due to historic and present experiences of prejudiced and sociocultural oppressive factors) increase the rates of independent risk factors associated with gambling harms, such as higher rates of mental health concerns and substance use (Zeeman et al., 2025). In addition, gambling can be a way for people to cope with minority or identity stress (Bush-Evans et al., 2025).



DIFFERENCES IN GAMBLING HARMS & COGNITIVE DISTORTIONS

Some research has found that the experience of problem gambling differs for LGBTQIA2S+ individuals compared to their cisgender heterosexual counterparts. Specifically, gender and sexual identity minorities are more likely to experience fewer types of harm associated with gambling. Additionally, they are more likely to report certain experiences that make it difficult to stop gambling, such as perceived inability to stop and anticipate gambling wins (Zeeman et al., 2025).



ATHLETIC INVOLVEMENT

Research on student-athlete risk factors for problem gambling is generally mixed; however, LGBTQIA2S+ student-athletes appear to be at a greater risk for gambling problems compared to cisgender heterosexual peers (Richard et al., 2019).

Many risk factors for problem gambling in the LGBTQIA2S+ community are shared with other populations more generally, while other risk factors are unique to this community. This highlights the importance of conceptualizing risk on both general and individualized levels, taking into account key identity variables.

PROTECTIVE FACTORS AGAINST GAMBLING-RELATED HARMS

While general protective factors against gambling-related harms also apply, there are some factors that are of particular relevance to the LGBTQIA2S+ community.

SOCIAL SUPPORT

Access to a supportive community is a significant source of protection against gambling-related harms and problem gambling symptoms (Zeeman et al., 2025). Emotional support, positive socialization, and community connectedness are important protective factors (Bush et al., 2016).

RISK TRENDS VARY BETWEEN IDENTITIES

One study that looked at a variety of diverse gender and sexual orientation identities found that pansexual and queer identifying individuals were significantly less likely to experience problem gambling; notably, there were no other differences across gender or sexual orientation variables (Brodeur et al., 2025). Authors note that these identities represent *plurisexual*, compared to *monosexual* (e.g., gay, lesbian) identities, and may represent unique experiences in sexual identity and connection to the larger LGBTQIA2S+ community, which appear to serve in a protective role against gambling harm.

LGBTQIA2S+ identities are often underrepresented in data and collapsed into one group of gender and sexual orientation minority status.

There is a need for research that examines unique identity factors and experiences within the subgroups that represent this incredibly diverse community.

DISCRIMINATION & EXCLUSION WITHIN GAMBLING VENUES

Qualitative research with LGBTQIA2S+ on gambling experiences captures the way in which many feel excluded and discriminated against in offline gambling venues, noting hypermasculine marketing and hostility, especially relating to sports betting (Bush-Evans et al., 2025). As a result, some may be pushed to online gambling; however, discriminatory and non-inclusive rhetoric is cited in many of these spaces, too.

PROBLEM GAMBLING PREVENTION AND INTERVENTION STRATEGIES

The LGBTQIA2S+ community is diverse, meaning that preventionists and providers should be aware of unique identities and the impact of intersectionality. Experiences of discrimination cause help-seeking hesitation that the health field can help combat with culturally-responsive care, outreach, and inclusive materials.

PREVENTION

- Service barriers are greater among historically and currently marginalized communities, including LGBTQIA2S+. Low awareness of resources paired with discriminatory experiences in healthcare creates a strong barrier against seeking help; this is further compounded by additional intersectional identity factors. **Consistent culturally-responsive and trauma-informed care is critical**, not only for getting people into care, but to stay engaged.
- There is a critical lack of qualitative research exploring gender identity experiences and gambling (Zeeman et al., 2025). This type of research should be prioritized, as it will help lay important groundwork for culturally-informed prevention efforts.

INTERVENTION

- Problem gambling treatment spaces should be affirming of LGBTQIA2S+ communities. Tailored services are needed in order to ensure people feel safe and welcome, and to reduce unintentional harm during the therapeutic process.
- Providers should participate in culturally-specific training and consultation, as needed, to understand how unique identities and experiences contribute to clinical presentations.

KEY FINDINGS

- Research can be mixed when it comes to problem gambling rates and risk levels among gender and sexual minority communities. There appear to be trends among particular identities, such as a **greater risk among biological males and sexual minority women**.
- LGBTQIA2S+ community members' problem gambling risk depends on a number of factors, such as particular identity variables, mental health, substance use, sociocultural stressors, and isolation. Some research suggests that this group may tend to experience **fewer gambling-related harms** compared to a cisgender heterosexual population; however, the impact may come with **more severe consequences**, such as greater impact on wellbeing and suicidality.
- Negative experiences in healthcare, the gambling industry, and sociocultural stressors in general can deter LGBTQIA2S+ individuals from seeking help. **Prevention and treatment efforts should ensure they are identity-affirming and trauma-informed.**

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