The WAGER, Vol. 29(8) - Counting feelings: A qualitative validation of quantified gambling harms among gamblers in Australia

August 6, 2024

Despite rising popularity, gambling remains a risky behavior that costs the U.S. an estimated \$14 billion annually. One reason these costs are so high is because of the pervasiveness of gambling harms. Like other addictive behaviors, harms from gambling can stretch across multiple domains including social, occupational, health, financial, and even criminal. To minimize gambling harms, it is necessary to identify gamblers who might benefit from self-help tools or professional support, ideally before they experience severe consequences. One available screening tool is the Gambling Harms Scale 10 (GHS-10). One potential weakness of the GHS-10 is that it asks respondents to report whether they're experiencing each harm using a simple "yes or no" format, rather than allowing them to report on how severely they're experiencing a given harm. A person's score is simply the total number of harms they're experiencing. This week, The WAGER reviews a study by Philip Newall and colleagues that explored the validity of this measure by studying the lived experiences of gamblers in Australia with different levels of problem gambling severity according to the GHS-10.

What was the research question?

Is the GHS-10 a valid gambling harm screener, in that the lived experiences of gamblers relate in a logical way to their scores on the GHS-10?

What did the researchers do?

The researchers re-contacted a sample of 30 individuals from a <u>previous study</u>. These participants were recruited based on problem gambling severity according to scores on the GHS-10 from the previous study. Additionally, all participants were age 18 or older and had reported gambling within the past year. The research team then conducted semi-structured interviews with participants to elicit information about the role that gambling has played in their lives, including positive and negative experiences and harms to themselves and society more

generally. The researchers grouped participants according to their GHS-10 scores (no-harm = 0 harms, low-harm = 1-2 harms, moderate-harm = 3-5 harms, and high-harm = 6-10 harms). Then they explored whether those with higher scores described having more severe negative experiences with gambling. This would support the idea that the GHS-10 is a valid measure.

What did they find?

Qualitative perceptions of gambling and experiences of harms were strongly related to participants' GHS-10 scores (Figure shows themes and selected responses). For example, participants in the no-harm category described gambling as similar to any other leisure activity, with one participant describing the financial impact as the same as "collecting stamps". In support of the GHS-10's validity, as GHS-10 scores increased, so too did the propensity for financial harms. At the low-harm level, financial impacts were within reason but could veer towards regrettable. Participants in the moderate harm category occasionally experienced severe financial harms and participants in the high-harm category described significant financial harms. Interestingly, many other themes were present at multiple levels of problem gambling severity (e.g., gambling to build relationships) albeit with some adverse consequences or risk as problem gambling severity increased.



Figure: Displays the subthemes identified by the research team at each level of problem gambling severity, according to the GHS-10. A selected quote is shown under each subtheme that represents one participant's understanding of each subtheme. Click on figure to enlarge.

Why do these findings matter?

These findings are important because they provide more evidence for the utility of gambling harm screens, and the GHS-10 in particular. Specifically, this study showed that even without inquiring about the severity of gambling problems, the GHS-10 is able to discriminate between severe and less severe cases. Researchers should consider using this type of <u>mixed methods approach that includes both quantitative and qualitative elements</u> when studying gambling, as it can provide a more holistic view to better understand lived experiences.

Every study has limitations. What are the limitations in this study?

The researchers note that their background as gambling addiction researchers (and beyond that the developers of the GHS-10) might have biased their interpretations of participants' qualitative responses. Additionally, though the overall sample contained 30 participants, no group of participants (i.e., across the no-harm, low-harm, moderate-harm, and high-harm gamblers groups) included more than eight participants, limiting the generalizability of this study.

For more information:

Individuals who are concerned about their gambling may find support through the <u>National Council on Problem Gambling</u>. Others may benefit from connecting with <u>Gamblers Anonymous</u>. Additional resources can be found at the BASIS <u>Addiction Resources</u> page.

—John Slabczynski
