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THE SOCIETAL IMPACT OF GAMBLING ON OVER-INDEBTEDNESS

ecdn
european consumer debt network

Contents

Editorial

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VENARI LAVARI LVDERE RIDERE OCCEST VIVERE.

Hunting, bathing, playing, laughing – that is life! reads the almost 2,000-year-old inscription on the forum of Timgad in northeastern Algeria. The concept of Homo Ludens (Latin for ‚the playing human') states that humans primarily develop their culture, language, science, and social structures through play. This theory was coined in 1938 by the Dutch historian Johan Huizinga. Playing serves no material benefit or direct survival purpose.

Gaming and gamification, on the other hand, are the technological further development of what Huizinga described as the primal need of humans. Gamification instrumentalizes and functionalizes play in a behaviorist manner for purposes unrelated to the game – and thus robs it of its soul. The features of gamification and gambling activate neurobiological reward systems in the brain, the so-called dopamine loop (action-reward-dopamine), rather than deliberate, rational decision-making.

When does the recreational activity of playing turn into a gambling disorder? When it shifts to a repetitive behavior disconnected from financial rationality. Gambling become rationalized, socialized and routinised. Gambling has rapidly developed into an omnipresent everyday commodity in recent years. Smartphones and online-casinos making gambling ubiquitous and accessible 24/7. Revolving loans and the possibility of repeated micro-transactions have increased the availability and use of gambling to a worrying extent. Most popular games include weekly lotteries, scratch cards/online lotteries, and slot machine games, horse, dogs and sports betting. Studies show that above all, the combination of online casinos and live sports betting carries the highest risk (up to 65%) for the development of risky gambling behavior and subsequent over-indebtedness (Tran et al 2024).

Through gambling, Homo Ludens changes into Homo Aleator (the dice-throwing/ gambling human).

When gambling becomes pathological, it is defined as behavioral addiction (DSM-5) or gambling disorder (ICD-11). Gambling disorder is characterized by loss of control, prioritization of gambling over other areas of life, and escalation despite negative consequences. The DSM-5 lists nine criteria, of which at least four must occur within twelve months: development of tolerance, withdrawal symptoms, unsuccessful attempts to control, preoccupation with gambling, escape behavior, chasing, lying and covering up, social and occupational jeopardy, financial bailout !

One of the most precise and timeless psychograms of a pathological gambler was created by Fyodor Dostoevsky (1866). His protagonist Aleksey Ivanovich goes through exactly the phases and criteria that define a pathological gambling disorder and lead to personal and financial ruin.

Worldwide, an increasing number of adults (~449 million) engage in risky gambling behavior or even have a gambling disorder that requires treatment (80 million). Reports are coming from many EU member states that private over-indebtedness is increasing due to gambling. Therefore, ECDN held a conference on the topic at the European Parliament in Strasbourg in April 2026. Experts from ten European countries presented research results, prevention, and therapy approaches, which are published in this issue.

The results indicate that gambling is a regulated leisure activity, a significant source of state revenue and illegal profit business, and simultaneously a rapidly growing public health concern.

Many countries respond to the problem with legal regulations. The challenge is to ensure effective compliance of the regulations, an effective control of the regulations and sanctioning mechanisms, as well as the reduction of the negative social impact of gambling.

In this setting the role of debt advisors is crucial, as they are often the first to come into contact with people in financial crisis. Early assessment tools like the Problem Gambling Severity Index or the new developed SPES Risk Index are helpful. For example, the SPES Risk Index is a first aid diagnostic tool designed to identify vulnerabilities before they escalate into irreversible insolvency.

Other tools include mechanisms to control gambling itself: apps that monitor behavior and flag risks, self-exclusion from platforms, and blocks on gambling websites. The various papers show that the prevention of over-indebtedness caused by gambling requires a multidisciplinary approach.

- Responsible gambling policies and limitations on gambling availability, including the introduction of voluntary debit card blocking on registered gambling websites
- Review of the sports sponsorship
- Prevent the illegal online gambling which generated revenue of over 80 billion euros
- Financial education regarding the risks of gamification and gambling
- Prevention and treatment programs for gambling addiction
- Research regarding the toxic relation between gambling and over-indebtedness
- Legal instruments for managing over-indebtedness crises
- Creation of specialized care centers

Effective gambling regulation and a targeted implementation of the CCD II, which also take the issue of gambling addiction into account, is needed in all countries.

The Lancet Public Health Commission on Gambling

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"Commercial gambling generates substantial financial harms – most notably heavy losses and debt – that contribute to wider social and health issues Strong policy and regulatory action is needed to prevent them."

The Lancet Commission on gambling brought together an international, interdisciplinary team that aimed to:

- Raise global awareness of the public health risks associated with commercial gambling
- Provide a set of recommendations for international, national and regional actors to help prevent global proliferation of gambling harms

Context

The context of the Commission is the enormous global growth and the rapid digital transformation of the gambling industry. It is driven by the growth of financial and communications technologies, digital marketing, and commercial partnerships between the gambling industry and sports and media organisations. All of this has increased the availability of high-speed games throughout populations, with smartphones making gambling ubiquitous and accessible 24/7. It has also normalised gambling, particularly amongst young people.

Global Overview of Harms

In this context, the Commission caried out a global overview to estimate the numbers of people harmed by gambling. We estimated that approximately 449 million adults worldwide experience 'any risk gambling', where individuals experience at least one symptom or adverse personal, social or health consequence of gambling. Of these, an estimated 80 million have a clinical diagnosis of 'gambling disorder'.

Some types of gambling are particularly problematic. Our analysis estimates that gambling disorder could affect 16% of the adults and 26% of the adolescents who use online casino or slot products, and 9% of the adults and 16% of the adolescents who use sports betting products. These are two of the most rapidly expanding areas for commercial gambling globally.
Because of the lack of data in many countries, these estimates are likely to be very conservative

Gambling harms

Beyond the measurement of clinical disorder is the broader category of harms, which include the adverse impacts from gambling on the health and wellbeing of individuals, their families, communities and society.

For every person who experiences problems with gambling, approximately 6–10 others are affected. The total numbers of people affected by gambling overall are far higher than the much narrower figures for clinical disorder.

These harms are financial, and they also include harms to interpersonal relationships and to mental health and wellbeing. These're interdependent and mutually reinforcing.

Financial

Key harm from gambling is financial and this underpins all others. The evidence on this is well established. General population studies show heavy gambling losses lead to various financial problems with resources diverted from essential

expenditure on things like food and clothing, and household utilities. This can lead to the depletion of savings, pensions, investments. This in turn results in debt, defaults on credit or mortgage payments, bankruptcies, evictions, and even homelessness.

Many people who gamble also resort to risky financial strategies, such as gambling on credit cards or taking out high-interest payday loans, which compounds existing financial problems. These impacts have long term effect on future financial wellbeing. People who spend more on gambling have lower rates of savings and lower contributions to pensions; they have worse credit scores, a higher risk of future unemployment; and are more likely to be struggling financially in later life than those who do not gamble.

Interpersonal Relationships

Research shows the financial burdens of the person who gambles impacts wider interpersonal relationships. Financial problems can have a knock on effect on family and friends, who can, for e.g be forced to forego necessities, cover or take on additional jobs to stabilize the household.
In turn, this is associated with the erosion of trust, relationship breakdown and divorce. Gambling is also associated with increased intimate partner violence, with women vulnerable to violence from male partners.

Children of people with gambling disorder are also vulnerable. They have higher levels of emotional distress than children whose parents do not have gambling problems and they also have a high risk of experiencing gambling problems themselves later in life.

Mental health

Gambling is associated with negative impacts on mental health, including depression and anxiety, and in extreme cases, suicide and suicidal ideation. The main mechanism through which gambling is linked to suicidality is related to indebtedness and financial loss, as well as with feelings of shame. Heavy losses and gambling-related debts can make people think that suicide is the only way out, and these have been identified as both a cause and/ or an important contributor to both suicide and suicide ideation.

Vulnerable groups

The Commission noted that some groups are particularly vulnerable to gambling harms.

There is a clear association between harms and socio-economic disadvantage, with people on low incomes living in deprived areas suffering the greatest financial impacts in a pattern that reflects wider social and health inequalities.
Children and young people are vulnerable in terms of the impacts of parental gambling, and they are also exposed to the marketing and normalisation of gambling in ways that were unprecedented before the digital revolution. We know that early exposure to gambling significantly increases the risk of developing gambling disorders later in life,

Impacts of gambling and UN SDGs

The Commission highlighted the ways in which commercial gambling might undermine progress towards the United Nations' Sustainable Development Goals.

SDG 1: No poverty Gambling harms can have a lasting effect on financial security and exacerbate both relative and absolute poverty, with resources diverted from essential household expenditure.

SDG 3: Health and wellbeing - ; Gambling has known risks for health and wellbeing; in extreme cases, being associated with suicide

SGD 5: Gender equality. As disordered gambling is more prevalent among men, intimate partner violence is more likely to be directed against women. In many cases, gambling can disproportionately reduce resources available to women who are economically dependent on men

SDG 8: Work and economic growth Gambling is associated with unemployment, and gambling harms are associated with poorer educational outcomes among young people compared with those who do not gamble, with legacy effects for their future prospects.

SDG 10 Reduce inequalities – people who are socially and economically disadvantaged are more likely to be harmed by gambling, and they also spend a greater proportion of their income on gambling; all of which entrenches inequalities

Recommendations

The Commission made a number of recommendations, including for the recognition of gambling as a public health issue, with policies focusing on the prevention of harm, rather than on economic, commercial motivations. It called for the use of policy and regulatory measures to prevent the harms of gambling throughout populations, and for these to be enforced through independent and adequately empowered regulators. The Commission urged UN entities and intergovernmental organisations to incorporate a focus on gambling harms into their strategies and workplans, and for the World Health Assembly to instigate a resolution on the public health dimensions of gambling.

- the full Lancet Commission can be read here:
The Lancet Public Health Commission on gambling –
The Lancet Public Health

Debt as a Clinical Signal of Gambling Addiction: From Financial Consequence to Early Detection Tool

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Historically, gambling has often been morally condemned – associated with excess, loss of reason, and financial ruin – yet it has never disappeared. Alongside these concerns, recreational gambling has always existed as well, embedded in social practices, leisure, and the search for excitement or hope of gain.
The issue has never been the existence of gambling itself, but rather where to draw the line. At what point does a recreational activity become harmful? Where should the threshold be set between acceptable use and problematic behavior?

"Gamble responsibly." The message is omnipresent, yet its meaning can be unclear. Unlike alcohol consumption, where excess can be defined in measurable units, responsible gambling lacks a concrete benchmark. Responsible in relation to what – time, frequency, or losses? In practice, the only meaningful threshold is often financial.

This ambiguity weakens prevention. Behavioral indicators are difficult to grab for gamblers, but financial imbalance is not. It is measurable, cumulative, and directly linked to harm. Budgetary ans then financial difficulties should therefore be understood not merely as a consequence of gambling addiction, but as one of its earliest and most reliable symptoms.

Debt: from consequence to recognized symptom

"I'm not even playing to win anymore, I'm playing to get my money back."
"The amount per month… I couldn't tell you, because whenever I won, I just played it again."
Financial distress is acknowledged in clinical definitions of gambling disorder. Indebtedness is not simply the endpoint of addiction—it is one of its core markers.

This perspective is already present in clinical frameworks. The DSM-5 includes among its diagnostic criteria "relying on others to provide money to relieve desperate financial situations caused by gambling." This wording is significant: it frames financial distress as part of the disorder itself.

More broadly, diagnostic tools capture financial imbalance through questions about increasing stakes, chasing losses, or the impact of gambling on financial stability. While framed behaviorally, they point to the same reality: a progressive loss of financial control.

Yet these signals are rarely used as primary detection tools. Financial data provides an objective trace of decisions over time. Debt marks the moment when gambling exceeds financial capacity and begins to destabilize everyday life.

A slow shift: from imbalance to loss of control

"Even now, whenever I get my salary, after two weeks I have nothing left, because I keep telling myself I'm going to win back what I lost."
«"Reject the rent, reject the electricity bill, just to have a bit of money… to try to pay things back."

Gambling addiction develops gradually. It often begins with ordinary, socially accepted practices. The turning point is rarely visible. Over time, emotional vulnerability, financial stress, or life events intensify engagement. Stakes increase, frequency rises, and budgeting weakens.
A key element must be kept in mind when addressing gambling addiction: once control is lost, individuals are no longer playing to win money, but to sustain a compulsive need. Gambling shifts from a goal-oriented activity to a repetitive behavior disconnected from financial rationality.

A progressive disorganization follows, where gambling expenses disconnect from fixed costs and income. The pursuit of losses reinforces this dynamic, as individuals attempt to recover what has already been lost. This phase marks a loss of control. Priorities shift, and gambling may take precedence over essential expenses. Debt emerges as the result of this gradual imbalance.

Financial instruments as accelerators: a false solution, a real trap

"It's so easy to do, these loans; they ask you for almost no supporting documents."
"And after that, it was credit, it was madness."

Once control weakens, financial tools help sustain the addiction. Consumer credit – and particularly revolving credit – plays a central role. It is easily accessible, quickly mobilized, and rarely questioned. As one participant noted: "It's easy, they don't ask why. You just click and you have the money."
This ease creates the illusion of a solution. Credit appears to absorb losses or allow continuation. In reality, it accelerates the process. Revolving credit is especially problematic: instant availability, small amounts, and deferred repayment align perfectly with gambling rhythms.
A self-reinforcing loop emerges: losses lead to borrowing, borrowing sustains gambling, and gambling deepens losses. Debt becomes embedded in the addiction itself.

Concealment strategies: making gambling invisible

"Crypto doesn't show on current accounts."
"I use neobanks… they never called me."

Beyond structural limitations, prevention models face a more fundamental obstacle: gambling practices and their financial consequences are often deliberately hidden. Individuals rarely present their situation openly. Instead, they develop strategies to maintain invisibility. These include multiplying bank accounts, using online banks without direct human interaction, shifting transactions across platforms, or relying on alternative payment methods. As one participant explained: "With online accounts, there's no advisor. You do what you want, no one asks questions."
These practices are not marginal. They reflect an active effort to fragment financial visibility and avoid detection. Gambling expenses are dispersed, disguised, or disconnected from the main account, making them harder to identify both by institutions and by relatives.
In this context, prevention systems based on isolated data or voluntary disclosure are inherently limited. They capture only fragments of behavior, while individuals actively organize their financial flows to remain unseen.

The double stigma: suffering, shame, and silence

"It weighs on you… shame, you can't say it."
"You don't sleep at night. You are under stress "

Concealment is not only strategic—it is also emotional. Individuals are often aware of their loss of control, but this awareness does not necessarily lead to seeking help. On the contrary, it can reinforce isolation. This creates a paradox : the issue is not a lack of awareness, but a lack of legitimacy to ask for help. Many individuals feel responsible for their situation and believe they do not deserve support. They endure financial deterioration in silence, avoiding both institutional and personal exposure.
The fear is not always debt itself, but the moment when it becomes visible: the blocked account, the inability to meet basic expenses, or the discovery by a partner. This moment is often described as a rupture—a point of no return.
In their own words, it is the moment when they "hit the wall."

From the financial wall to early intervention:

"The account was blocked. The card was blocked."
"Reject the rent… just to have a bit of money."

For many individuals, the turning point is not debt itself, but the moment when it becomes visible. The "financial wall" appears when accounts are blocked, payments are rejected, or everyday expenses can no longer be covered. At this stage, the problem is undeniable, but intervention comes late, often in crisis.
This limitation reflects the current focus of prevention on gambling operators. Yet gambling behaviors are fragmented, hidden, and increasingly difficult to capture at the level of platforms alone. At the same time, financial institutions and credit providers are already deeply involved in these trajectories, often without intending to be. Through consumer credit,

overdrafts, and especially revolving credit, they contribute—indirectly but structurally—to the continuation of gambling practices by providing liquidity at critical moments.

Financial institutions therefore occupy a paradoxical position. They both observe and, to some extent, finance the dynamics of addiction. Unlike gambling operators, they have a continuous and comprehensive view of financial activity. They can detect patterns over time and identify early signs of imbalance, even when behavior is dispersed across multiple channels.

This makes banks particularly well positioned to act earlier. Moving beyond a model centered only on operators allows prevention to rely on financial signals that are more stable and measurable. The role of financial institutions is not to monitor behavior, but to support financial stability. By integrating gambling-related indicators into existing approaches to financial vulnerability, they can help identify risk before it escalates.

Such an approach opens the way for earlier and more effective interventions, whether through alerts, budgeting support, or voluntary tools that help individuals regain control. It also invites a reconsideration of credit practices, particularly those that provide immediate and repeated access to funds without sufficient friction.

Acting at this level means shifting from reacting to crisis to anticipating it. In other words, it means acting before the wall.

About the study

This article draws on a two-year research-action project conducted in France by the Crésus Foundation (2024–2025), combining qualitative interviews and analysis of banking data to examine the financial trajectories of individuals experiencing gambling-related harm.

Gambling Patterns and Problem Gambling among the Irish Traveller Community: Preliminary Results from a National Traveller MABS Field Study (2025)

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Background and context

A national study carried out in 2023 by the Economic and Social Research Institute (ESRI) provides a gambling profile of the general Irish adult population, including in terms of the extent and nature of problem gambling, with the latter transpiring to be more prevalent than previously thought. However, in common with other such enquiries, 'hard to reach' or marginalised groups were not specifically included in the survey population. Therefore, we do not know if or indeed how gambling plays out among such cohorts and whether policy needs to be adapted to meet their needs.

One such cohort consists of Irish Travellers, a state-recognised ethnic community numbering approximately 33,000 with a distinctive identity and culture. Travellers are known to be among the most marginalised groups in Ireland and to experience negative outcomes across a range of demographic and socio-economic variables, including in terms of lower than average life expectancy and formal education levels, and higher rates of mortality, ill-health and unemployment.

Research motivation and design

Unsurprisingly given this backdrop, Travellers have also been identified as experiencing high levels of financial exclusion and over-indebtedness. As a result, an organisation tasked with addressing each of these issues has been established within the national Money Advice and Budgeting Service (MABS) network, in the form of National Traveller MABS. In recent years, the latter has become increasingly aware – albeit anecdotally - of concerns about problem gambling within the community, and thus decided to carry out exploratory research to get a sense of the nature of the problem relative to the population as a whole.

Hence, during the summer of 2025, the staff of National Travellers MABS conducted an exploratory survey during the normal course of their work. This consisted of a questionnaire survey of a convenience sample of a cross-section of 172 Traveller respondents, together with a series of 9 focus groups (consisting of 70 Traveller participants). Many of the national survey questions were incorporated to facilitate a degree of comparison with the population. While the results are more reflective than representative, they provide for the first time an indicative picture of how gambling 'plays out' among the Traveller community.

The academic literature

Gambling has consistently played a cultural and societal role in Ireland. State-supported elements (such as the historic Irish Sweepstakes and current National Lottery), have long been used to support good causes and services, but there also exists a considerable private sector. Gross industry revenue is estimated to be in the region of €6 billion to

€8 billion per annum according to the ESRI; the sector thus contributes significantly to the economy by way of employment creation and tax receipts. While gambling is recognised as having a social function in providing entertainment for many, it is estimated that nearly half of industry revenue in Ireland arises from people experiencing multiple negative effects from gambling. Further, gambling inducements and childhood exposure (either directly or through parents) have both been identified as increasing the risk of developing a gambling problem.

The academic literature further provides us with explanations as to how gambling problems can arise within a society. A key factor here is what is commonly referred to as the 'normalisation' of gambling i.e. the process of 'embedding' gambling within a society by accommodating, institutionalising and legitimizing it. This is facilitated by the creation of space within society for advertising, marketing and the broadening of opportunities to enhance accessibility and availability; it is further encouraged by peer and/or social pressure both within groups and indeed across society as a whole. As a result, phenomena such as gambling become rationalised, socialised and routinised in that they become taken for granted in an almost unconscious manner over time. Within this culture, dominant discourses emerge such as 'responsible' and 'problem gambling', thereby placing responsibility to a considerable extent at the individual's door.

Key concepts

'Gambling' is defined broadly in Ireland as follows:

Buying a lottery ticket or scratch card, playing lottery games online, gambling in a bookmaker's shop (licensed premises where betting is legally permitted), gambling online or by telephone, placing a bet at a horse or dog race meeting, playing games at a casino, playing a gaming/slot machine, playing card games for money with friends/family, and playing bingo.

'Problem gambling' (PG), a subset of general gambling, is conventionally defined as follows:

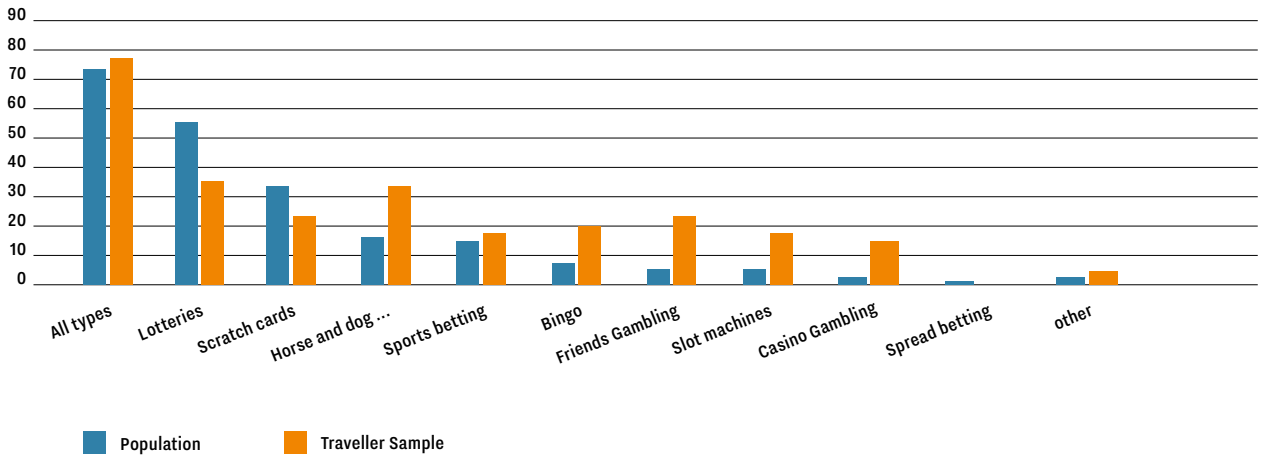
Gambling behaviour that is disruptive or damaging to individuals but that may fall short of a clinical diagnosis of 'gambling disorder'.

The population survey measured the latter phenomenon in accordance with the internationally recognized 'Problem Gambling Severity Index' (PGSI) which uses a self-reported, behavioural questionnaire to categorise respondents into four gambling types, namely: 'non problem'; 'low risk'; 'moderate risk'; and, 'problem gamblers'.

Gambling patterns among our Traveller sample

Through our survey, we found that the overall proportion of sampled Travellers who gambled (78%) was similar to that identified in the population study (74%). However, distinctive patterns emerged to Traveller gambling in that higher percentages of our sample bet by way of horse/dog betting, bingo, friends, slot machines, casino-type gambling and other forms, including Traveller-specific cultural events.

Proportion that spent money on gambling in the past 4 weeks



Source: National Traveller MABS Gambling Survey of Travellers, 2025

We also identified further divergences in that both online and in-person gambling were more prevalent among Travellers in our sample compared to the population findings. With the exception of lotteries, scratch cards and spread betting, Traveller sample percentages were considerably higher (overall, online and in-person), a finding which indicates greater use of most forms of gambling among surveyed Travellers compared to the general population.

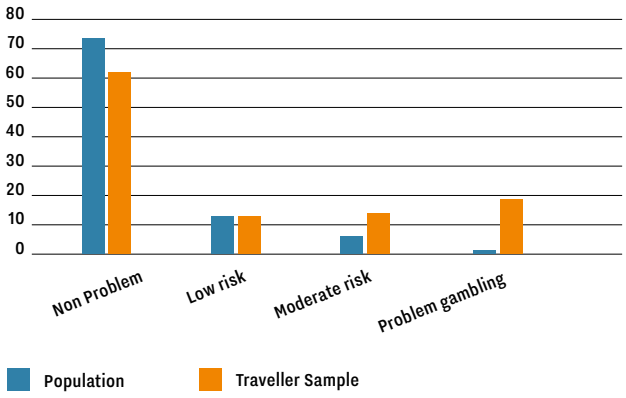
There was a clear gender dimension among surveyed Travellers with regard to the method used to gamble. Gender played a noticeable dividing role as regards the type of gambling used; while females were much more likely to gamble by way of lotteries, scratch cards and bingo, males were more prone to betting on horses and dogs, other sports, casino-type gambling and 'cultural events' (sulky racing and road bowls)

Problem gambling among our Traveller sample

There was also a striking gender dimension to problem gambling, with males in the sample much more at risk compared to females. This finding is in line with previous international research, although the gap may be narrowing among the population. Interestingly, other socio-demographic factors appeared to have a lesser impact on our sample cohort (e.g. age, marital status, location, employment status, main income source and education). This suggests that culture may be the key factor underlying different gambling behaviours among Travellers.

As to the degrees of gambling among Travellers within our sample, using the PGSI in line with the national study, we found greater percentages of both moderate and problem gamblers compared to the general population, the latter emerging as a particular concern.

Problem Gambling Severity Index Comparison



Source: National Traveller MABS Gambling Survey of Travellers, 2025

An interesting and perhaps unexpected finding from our enquiry was that within our Traveller sample, the number of sources used appeared to have little impact on levels of risk with respect to the PGSI. Across the three 'risk' categories (low, moderate and problem), it was common for Travellers to use around 3 sources on average. However, the frequency of their use had a considerable impact. Both moderate and problem level gamblers bet much more frequently than those in the 'no-risk' and 'low risk' cohorts. This suggests that one way of reducing the degree and risk of problem gambling may be to focus on reducing its **frequency** rather than concentrating on the number of sources.

Following on from the above, we also identified increased costs to surveyed Travellers which resulted from more extensive and frequent use of gambling compared to the population as a whole. We noticed particularly that in each PGSI category, Traveller respondents appeared to be **spending considerably more** than the general population counterparts. This was around doubly so in the 'low risk' and 'moderate risk' categories, which would suggest that reducing the spend (e.g. by half) would reduce the risk level.

Impacts of problem gambling on our Traveller sample

We also asked survey respondents to give a subjective estimate of problem gambling among their wider family; the majority of these responses clustered between 11% to 40% of family members, suggesting considerable concern among Traveller families about the extent of the issue. Furthermore, a majority of respondents reported some degree of related hardship and/or sadness, anger and anxiety, while significant minorities (44%, 47%, 28% and 39% respectively) stated that gambling has had at least some impact on relationships, social life, work/study and physical health.

As regards resolution, the findings from our focus groups indicate that Travellers would like to see more responsible practices, enhanced regulation, rigorous enforcement of the emerging rules, a cultural conversation led by Travellers for Travellers, and greater emphasis on peer-led and culturally specific supports to help individuals cope with existing problems and to prevent others from developing them.

Frequency of gambling	Total number of reports	No risk cohort (%)	Low risk cohort (%)	Moderate risk cohort (%)	Problem gambling cohort (%)	Total (%)
Less than once a week	198	44.4	35.9	12.1	7.6	100
About once a week	258	28.7	21.7	19.0	30.6	100
2–3 days a week	144	18.8	20.8	24.3	36.1	100
4–5 days a week	50	12.0	18.0	34.0	36.0	100
Every day or almost	50	0.0	2.0	24.0	74.0	100

Source: National Traveller MABS Gambling Survey of Travellers, 2025

Policy conclusion

In a policy context, we were struck by the extent to which our findings mirror the concerns expressed by many (including ECDN) in the lead-up to the Global Financial Crisis (GFC) in 2008. We now know that a combination of imprudent industry practices and non-intrusive regulation were the key factors that brought about the particular crisis in Ireland. Against this backdrop, cultural factors such as the importance attached to home ownership, and individual borrowing and spending behaviour, also played a part. These four dimensions could provide a useful policy framework for tackling problem gambling as well as over-indebtedness. A societal focus on 'promoting responsible practice', 'rigorous regulation', 'cultural conversations', and 'financial wellbeing' would enable member states to address each phenomena in an inclusive and comprehensive manner.

- Sources available on request

From Gambling to Financial Sobriety: Interdisciplinary Approaches to Financial Addictions in Poland

Malwina Silva da Mota
Lawyer
SKEF

"Recovery from gambling addiction and over-indebtedness requires integrated support. Effective help combines therapeutic treatment addressing the addiction with debt advisory. Debt work must be treated as part of the recovery process."

Introduction

"19th century was an era of neuroses, the 20th century of depression, and the 21st century is the age of addictions." (Unknown author). Despite growing knowledge about the mechanisms of addiction, prevention programs, and legal measures designed to protect against pathological gambling, the number of people with gambling addictions continues to rise. This is primarily due to the easy accessibility of online gambling, the weakening of social bonds, and personal difficulties in coping with stress.

Knowledge about addiction serves not only therapists but also gambling operators, who design games to maximize user engagement, extend playtime, and increase spending. For people who struggle with emotional regulation, this can accelerate the development of addiction.

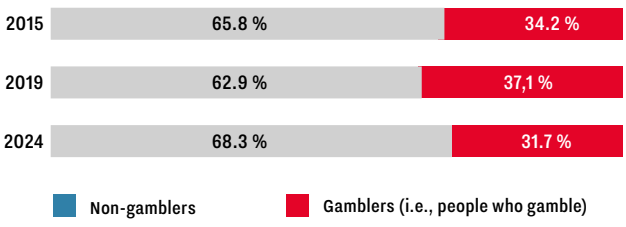
In gambling addiction, money ceases to be a tool and begins to function as an emotional regulator. A similar mechanism can be seen in shopaholism, compulsive borrowing, problematic investing, or monetization-based online games. The problem often begins with an unhealthy relationship with money, which is why financial education should not only focus on how to manage finances but also teach people how to recognize their own psychological pitfalls.

The Gambling Landscape in Poland

The gambling market in Poland is heavily regulated, though it simultaneously grapples with a widespread gray market. The Polish model is a hybrid: the state retains a monopoly on online casinos, lotteries, and number games, while the sports betting sector operates under a licensing system. The law provides for protective mechanisms such as self-exclusion, setting betting limits, advertising restrictions, and high taxes and financial penalties.

Data from 2023–2024 show that 31.7% of adult Poles participated in gambling, which represents a decline compared to 2019. However, another trend is cause for concern: the percentage of people engaging in moderate-risk gambling is now 4.2%—the highest since records began. Low-risk gambling, in turn, affects 8.2% of players.

Participation in gambling for money during the last 12 month from the date of the survey



Source: KCPU Research Report 202372024, National Center for Addiction prevention-CEBOS Survey, 2023/2024-p. 31

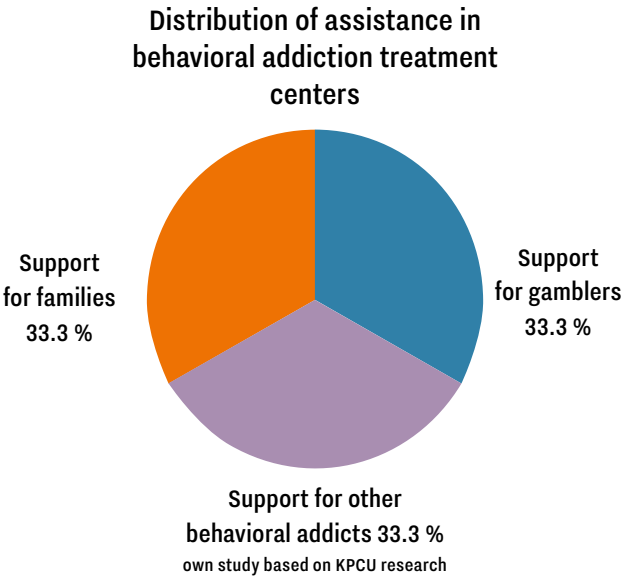
Young men under the age of 24 remain the most vulnerable, especially those with lower levels of education. Attention is also drawn to the high prevalence of the problem among young athletes and those working in the gambling industry. The problem is exacerbated by the fact that gambling is still often perceived not as a form of entertainment, but as a way to invest.

Support system for people with addictions

In Poland, the main institution coordinating the support system is the National Center for Addiction Prevention (KCPU), which manages the Fund for Solving Gambling Problems. The system includes 268 stationary facilities, a helpline with access to a psychologist and a lawyer, and self-help groups. Treatment is free and provided both through the National Health Fund and by non-governmental organizations. Assistance is directed toward the addict and their family.

It is estimated that approximately 40% of addiction treatment centers offer legal support, and 19% provide financial and legal counseling. In 2023, 3,332 people were diagnosed with gambling addiction, of whom approximately 80% were involved in sports betting.

At the same time, only one in ten people with the problem seeks out a specialist, which illustrates the scale of the issue. This is why the role of debt advisors is crucial, as they are often the first to come into contact with people in financial crisis. The ability to recognize the signs of addiction, quickly refer individuals to the appropriate institutions, and collaborate with addiction therapists becomes essential in this context. In practice, this means the need to incorporate simple screening tools into daily work to identify the problem as early as possible.



Interdisciplinary Intervention Model: The Role of the Debt Advisor

Effective gambling therapy requires combining a cognitive-behavioral approach with debt restructuring, technological blocks, a relapse prevention plan, family support, and rebuilding a life free from gambling, including a healthy relationship with money.

In this model, cross-sector collaboration is key, and the psychotherapist determines when it becomes possible to address the debt. Addressing the debt itself is part of the therapeutic process, not a separate stage.

The debt advisor plays a complementary role here: they support therapy by creating realistic debt repayment plans and reducing financial stress, which often perpetuates addictive behaviors.

New Tools to Help People with Addictions

In modern prevention efforts, technology is playing an increasingly important role—not only by limiting access to gambling, but above all by controlling access to money, since money is what fuels addiction.

The most important tools include mechanisms to control gambling itself: apps that monitor behavior and flag risks, self-exclusion from platforms, and blocks on gambling websites.

At the same time, measures to control access to money should be implemented, e.g., through the use of tools such as: accounts with spending limits, transfer restrictions, voluntary blocks on gambling transactions, or power of attorney for account access granted to close relatives.

The third level concerns access to credit. Much remains to be done in this area, which requires close cooperation with financial institutions. The goal should be to limit the ability of individuals with gambling problems to take on further debt—from blocking access to new loans and closing credit lines to refraining from offering increased limits or additional credit products.

In this context, financial institutions are no longer to be neutral observers. They have data that allows them to identify risky spending patterns early on. They can also actively support prevention—from alerts about recurring risky transactions, through the ability to block gambling payments, to procedures limiting credit offers to people in crisis.

The Work of a Debt Advisor

The first and most crucial step in working with an indebted person is raising their awareness of their situation and the potential legal and financial consequences. Without this, the actions taken by the person are often driven by fear and avoidance. The primary role of a debt advisor is to develop a personalized debt relief plan based on a thorough analysis of the individual's financial situation and debt structure.

In the case of individuals addicted to gambling, the question of the appropriateness of filing for consumer bankruptcy arises relatively quickly. Since March 2020, Polish law has provided for the possibility of declaring bankruptcy for any insolvent debtor, regardless of the source of the debt. A key element of the proceedings, however, is establishing a repayment plan, in which the court assesses the degree of fault. In practice, if addiction is recognized as a significant factor, the repayment plan typically ranges from 12 to 36 months. In cases where the debt is deemed the result of gross negligence, this period is extended to 36–84 months. In extreme situations, the court may also refuse to discharge the debt, finding that the obligations were incurred intentionally.

In specific cases, legal measures such as appointing a guardian or declaring legal incapacity may also be applied. From the perspective of working with an addicted individual, preventing relapse through budget monitoring and the timely detection of new debt is just as important as debt restructuring.

Working with the Family (Codependents)

When working with the families of addicted individuals, it remains crucial **to break the myth that paying off the gambler's debt** can solve the problem. Such an intervention brings, at best, temporary relief and a false sense of control, without addressing the root cause of the problem. In fact, it may even reinforce the addiction cycle by creating the illusion that "the situation is now under control."

However, family involvement is crucial, especially during the stage of establishing a shared, gambling-free budget and restricting access to financial resources. Partial control over the budget, spending limits, or even a temporary return to cash transactions can effectively support the treatment process and reduce the risk of relapse. It is essential to clearly separate finances, secure assets, and take control of the most important payments.

The family can also utilize legal tools such as marital property separation, alimony, appointing a guardian, and, in extreme cases, petition for the partial or full incapacitation of the gambler.

Recommendations

To effectively counter the wave of financial addiction, systemic changes are necessary:

1. **For financial institutions:** Monitoring gambling-related spending patterns and issuing alerts, offering easy-to-use blocks on gambling transactions, and prohibiting the offering of increased credit limits to at-risk individuals.

2. **For debt advisors:** Implementing screening tools for early problem detection; training on working with individuals with addictions.

Work on debt management should be an integral part of treatment. Integrated, cross-sector collaboration is crucial. Debt serves as both a trigger and a factor that supports gambling-related behaviors. Budgeting and developing a debt repayment plan help the individual regain a sense of control over their life and finances.

Gambling Addiction and Over-Indebtedness: A Toxic Relationship

Luca Rizzitano
Founder – Rizzitano Lavina
Soluzioni per il sovraindebitamento

"In Italy, the Corporate Crisis Code allows, through the consumer debt restructuring plan to help compulsive gamblers restructure their debt. This law, therefore, is transforming into a treatment system that brings together different professional skills"

Gambling and economic vulnerability

The correlation between gambling, usury, and over-indebtedness is an increasingly significant area of contemporary socio-economic analysis. The expansion of both legal and illegal gambling—driven by digitalization and widespread availability—has led to heightened financial vulnerability among problem gamblers. In these contexts, gambling-related debt can evolve into chronic over-indebtedness and, in severe cases, drive individuals toward illegal credit circuits, including usury. This phenomenon lies at the intersection of behavioral economics, law, and criminology, involving individual psychological dynamics, financial mechanisms, and organized criminal activity. Understanding these interrelations is essential for developing effective prevention policies and protective frameworks.

Pathological gambling, from a clinical perspective, is the result of persistent gambling behavior in an individual vulnerable to addiction. These individuals often exhibit pre-existing alterations in reward systems, impulse control, and related cognitive functions. This constitutes dysfunctional behavior rooted in psychological dependence, almost invariably leading to a significant impairment of the individual's financial stability.

When gambling becomes compulsive or pathological, it carries severe economic consequences for both the individual and their household.
Scientific literature identifies several factors contributing to the economic vulnerability of players, as:

- Cognitive distortion: Leading players to overestimate their chances of winning.
- The „chasing losses" mechanism: A drive to continue gambling in an attempt to recover lost funds.
- Easy access to credit: Both through formal (legal) and informal channels.

These elements can rapidly lead to debt accumulation, especially when gambling is used as an illusory strategy to resolve pre-existing financial difficulties, which only serves to exacerbate the original crisis.
So Over indebtedness causes gambling addiction or g.a. causes o.i.?
Is The so called „screw-mechanism", and, in reality, both dynamics are true.
The relationship between over-indebtedness and compulsive gambling is a self-reinforcing mechanism: an individual may gamble because he is over-indebted, or becomes over-indebted because he gambles. This is a toxic relationship

where one distress feeds the other. In advanced stages of compulsive behavior, it is nearly impossible to distinguish the primary motivation, as both elements coexist.
Gambling is often a primary trigger or aggravating factor in this condition.
Economic losses related to gambling typically generate a debt spiral characterized by:

- Depletion of personal savings.
- Reliance on bank loans or formal financing.
- Extensive use of credit cards and consumer credit.
- Requests for informal loans from family or acquaintances.

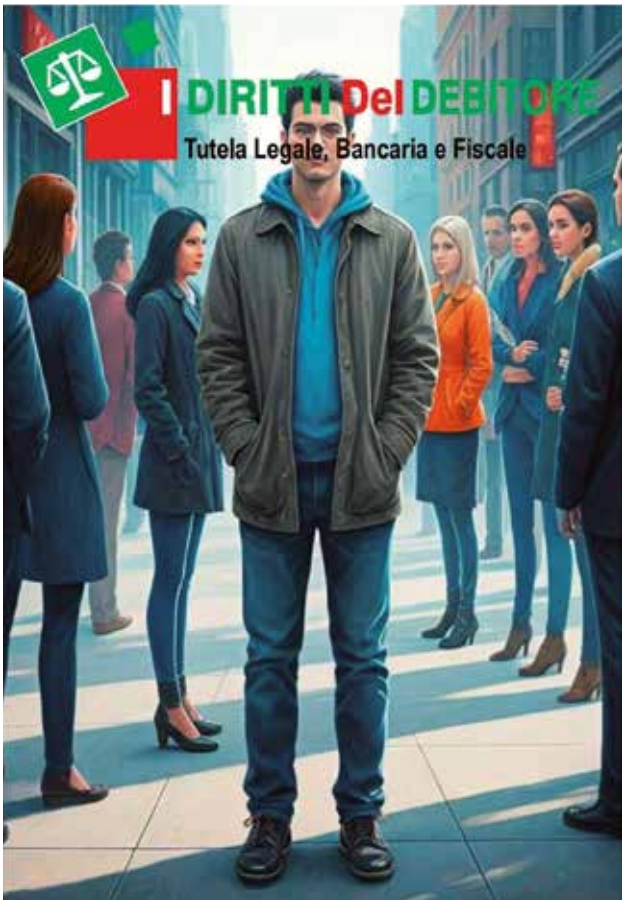
Once these resources are exhausted, the gambler is often excluded from the formal credit system due to a loss of creditworthiness. This exclusion is a primary driver toward illegal financing.

The Italian situation (gambling statistics in Italy)

It is estimated that 1.3 to 1.5 million people in Italy suffer from gambling disorder.
Approximately 1.5 million Italians are considered pathological or highly dependent gamblers, yet only a small fraction receives medical assistance and legal assistance too
Some Key data:

- Market Scale: Over €150–170 billion is wagered annually on slots, betting, lotteries, and online gambling.
- At-Risk Population: Including „at-risk“ players, the figures rise to:
- Pathological gamblers: ~1.3–1.5 millions.
- Problematic/At-risk players: ~3–4 millions.

This certainly has an impact on the family context



Impact on the Family Context

Gambling addiction is often defined as a „family disease“ because the consequences affect the entire household. This is true under various profiles wich can be summarized as follows:

- Economic Profile: Accumulated debts, hidden mortgages, and depleted family savings.
  In extreme cases loss of the primary residence.
- Psychological Stress: Family members often suffer from anxiety, depression, guilt, and a total loss of trust.
- Family Conflict: Frequent arguments, divorces, and estrangement from children.
- Impact on Children: Exposure to economic instability, domestic tension, and emotional/behavioral issues.

It is noteworthy that among the effects of gambling addiction are several factors that trigger over-indebtedness independently of the addiction itself—such as divorce. This creates a ‚double burden‘: the gambler must face both the direct financial losses of the habit and the secondary economic shocks (legal fees, alimony, asset division) caused by the collapse of the family unit.“

As for the psychological state of the compulsive gambler we must underline that Gambling addiction is a "non-substance" addiction, but it manifests itself with the same personality characteristics as drug addiction. Gambling addicts are manipulative, deny their problem or belittle it, often refusing to ask for help from the competent Addiction Help Center. With this target of users, the psychological support work offered focuses on the motivation for treatment and on the assumption of responsibility.
It is estimated that every pathological gambler directly affects 5 to 7 people (partners, children, close relatives). In Italy, 4 out of 10 citizens are victims of „passive gambling," resulting in an estimated 7.6% decrease in quality of life for both the player and their family.

It is clear that the decrease in life quality translates into a decrease in well being and commercial investment.

Prevention and Legal Protection Tools

Preventing these phenomena requires a multidisciplinary approach:

- Responsible gambling policies and limitations on gambling availability.
- Prevention and treatment programs for gambling addiction.
- Legal instruments for managing over-indebtedness crises.
- Anti-usury solidarity funds.

The effectiveness of these instruments depends on the ability to identify risk situations early and provide ***integrated*** assistance to those involved. „Integrated" is, in this case, the key term.
The most effective interventions must be multidisciplinary, involving both psychological support for addiction treatment and legal and financial tools for debt restructuring.

In Italy, public services such as the Servizi per le Dipendenze (SerD) Addiction services, offer treatment paths for gambling disorders, while Organismi di Composizione della Crisi (Crisis Composition Bodies) help citizens find sustainable solutions for debt repayment.
But what is the main regulatory instrument provided by italian law to fight over-indebtedness of compulsive gamblers? The primary regulatory tool used in Italy for restructuring the debts of a pathological gambler is the „Consumer Debt Restructuring Plan" (required by Articles 67 to 73 of the Crisis and Insolvency Code). I would like to underiline that the Crisis and insolvency Code is the main body of legislation that collects the provisions regarding financial distress and debt restructuring of private individuals and companies.

Case law considers the pathological gambler as an individual in a clinical condition; therefore, they are not deemed to have caused their over-indebtedness through willful misconduct, fraud, or gross negligence.

To access this restructuring plan, the individual must have undertaken a certified recovery program and possess official documentation of their addiction status.
In this regard, a significant passage from Ruling No. 117 of 2025 of the Court of Palermo ratified a consumer debt restructuring plan for a pathological gambler.
The court held that the diagnosis of the pathology establishes the requirement of „worthiness" and, consequently, the absence of gross negligence, bad faith, or fraud. The ruling established that The over-indebtedness was „determined by a pathological state of significant severity, which led to a substantial reduction in disposable income and the subsequent assumption of various obligations to extinguish previous ones contracted to fuel the gambling habit."

And that

"For compulsive gamblers to be eligible for over-indebtedness relief, the gambling addiction must not be negligent, but rather the result of a genuine medical condition, preferably also verified by the local health authority".

This ruling follows the established orientation of the Court of Catania (Ruling of June 6, 2024) and the established orientation of other important italian Courts (Rome, ruling of march 12 2024 or Santa Maria Capua Vetere, ruling of january 6 2024)

According to both courts, approval of the debt restructuring plan is granted thanks to a proven treatment process, and pathological gambling addiction excludes gross negligence in the origin of the debt. Furthermore, a lender that has granted

the loan without properly assessing the applicant's creditworthiness, which often happens when the applicant is a gambling addict, cannot challenge the plan's suitability compared to the liquidation alternative (Article 69 of crisi Code)

The petition for debt restructuring may also be filed by a legal guardian or a court-appointed administrator (amministratore di sostegno).

From this last point of view, the aim of protecting the entire family unit emerges strongly, given that the support administrator is often a family member of the compulsive gambler who is indirectly affected by the gambling addiction.

Conclusions

The link between gambling, usury, and over-indebtedness is a powerful example of how individual behavior, economic dynamics, and criminal phenomena intertwine, resulting in severe social consequences.

Pathological gambling can be the starting point of a debt spiral that leads progressively to financial marginalization and vulnerability.

It is no coincidence that the original version of the law on over-indebtedness (Law No. 3 of 2012), today entirely contained in the Crisi Code, was titled "Provisions on Usury and Extortion, and on Resolving the Over-indebtedness Crisis" Under the conditions described, the Consumer Debt Restructuring Plan provides a legal way out.

It is increasingly common for the treating psychologist to recommend debt restructuring as an essential tool for recovery and „rebirth." From this perspective, we are working directly, as Association and as Rizzitano Lavina law firm to disseminate knowledge among psychologists of the legal instrument of "the consumer debt restructuring plan" as a structural element of the therapy of compulsive gamblers and as a means of helping their families.

This represents perhaps one of the first absolute cases where a legal provision becomes a form of cure.

At the same time, it is the best representation of the practical application of Article 81 of the recitals to the CCDII (Consumer Credit Directive II) considering that the same Article provides, in fact, that specialized and personalized assistance to consumers who encounter difficulties in meeting the financial commitments undertaken may include social and psychological assistance.

Through the regulatory instrument just illustrated, the legal approach includes and supports the psychological and social one, restoring the active economic role and dignity to the compulsive gambler and his family members.

The SPES Project: A Proposal for Tackling Over-Indebtedness and the Impact of Gambling on Financial Vulnerability

Silvia Ricci
Lawyer
Perugia Bar Association

"The Risk Index offers a preliminary approach to detecting potential over-indebtedness, including risks related to gambling. It aims to support early prevention and inform strategies for addressing and tackling over-indebtedness."

Introduction

In the current European landscape, societies face socio-economic shifts that necessitate proactive strategies to prevent severe social exclusion. Over-indebtedness is increasingly recognised not merely as a mathematical imbalance between income and expenditure, but as a multifaceted condition rooted in systemic and individual fragilities. The SPES Project (Support for Preventing Exclusion from Social life caused by over-indebtedness) was conceived from this holistic understanding. Co-funded by the European Union under the Erasmus+ programme, SPES is a Small-Scale Partnership in Adult Education. Coordinated by the Perugia Bar Association in cooperation with the European Consumer Debt Network, the project provides tools for both vulnerable adults and frontline operators tasked with their support. SPES addresses over-indebtedness through a comprehensive approach, within which the study of gambling emerged as a critical focus.

SPES: Gambling Vulnerabilities

The SPES initiative has culminated in three primary structural outputs:

1. Multidisciplinary Training Modules for frontline operators and individuals experiencing over-indebtedness.
2. The establishment of a Local Multidisciplinary Network of Stakeholders, facilitating cross-sectoral synergy.
3. The development of the SPES Risk Index, a diagnostic tool for the early detection of debt crises.

Through its implementation, the SPES Project presented two interconnected realities. First, gambling emerged as both cause and consequence of financial distress, leading to its integration as a key variable in the SPES Risk Index. Second, the project highlighted that psychological assessment is a prerequisite for effective counselling and support, a necessity for tackling general over-indebtedness and gambling addiction. Furthermore, attention focused on the Risk Index structure, which forces individuals to face sensitive personal issues. A psychological approach is a practical necessity equipping operators to navigate difficult conversations and build essential trust.

The Psychological Paradigm

Operational efficacy in debt mitigation demands a robust psychological framework. The SPES training program targeted local frontline operators—such as Caritas volunteers, consumer union representatives, and public social workers—covering a spectrum from basic financial literacy to the identification of predatory lending and usury. The psychological approach served as a cornerstone. When exacerbated by gambling, over-indebtedness is fortified by a wall of silence constructed from shame, isolation, and fear of domestic conflict. Frontline operators were trained to navigate the stages of change model, guiding individuals from pre-contemplation to action.

Training emphasised active listening and suspension of judgment, as trust is paramount to dismantling the stigma of addiction. Sessions were facilitated by Health Service psychologists specialising in behavioural addictions, ensuring gambling is treated within clinical parameters of dependency.

Gambling in Italy

The prioritization of gambling within the SPES framework responds directly to a structural emergency. In Italy, economic impact is unprecedented: in 2024, total gambling turnover exceeded €157 billion, approximately 7.1% of national GDP (Associazione 2025). An estimated 1.5 million Italians are classified as problem gamblers, with an additional 1.4 million at moderate risk (Wardle et al 2024). The phenomenon is expanding among the elderly (over 65) (Osservatorio 2024) and among 15-to-19-year-olds, with over 50% reporting involvement at least once in their lifetime (Mosconi et al 2026). Recent reports from anti-usury foundations indicate 50% of those who turn to them identify gambling as the primary catalyst for financial collapse (Consulta 2024). Among local stakeholders involved are the Umbria Foundation for the Prevention of Usury and local Offices of the Prosecutor. Their involvement reflects the intrinsic link between financial vulnerability, gambling-driven insolvency, and risk of criminal exploitation.

The SPES Risk Index

The SPES Risk Index is a First Aid diagnostic tool designed to identify vulnerabilities before they escalate into irreversible insolvency. Created in Excel format, the index allows operators to generate immediate risk profiles based on empirical data. The tool comprises 33 mixed-method indicators across six dimensions, each evaluated on a severity scale from 0 to 4:

Dimension	Scope of Assessment
1. Income Status	Stability, adequacy, and sources of revenue
2. Financial Management	Budgeting skills and household economic control
3. Liabilities (Debt)	Volume of debt, interest rates, and creditor types
4. Psychological State	Indicators of distress, anxiety, and depression
5. Risk Behaviors	Specifically focusing on Gambling and Compulsive Spending
6. Support Network	Presence of familial or institutional safety nets

The assessment identifies three categories of vulnerability: Minor Vulnerability, when the situation presents limited difficulties; Integrated Vulnerability, when there is moderate vulnerability with issues in several areas; and Social Emergency, when the situation is critical, requiring immediate intervention. For each category, the risk index provides frontline operators with general guidelines.

The Nexus of Mind and Wallet

The SPES Index integrates psychological health and financial behaviour. Financial failure is often perceived as a failure of the self. Consequently, the Index utilises Section 4 (Psychological State) as a diagnostic gateway to Section 5 (Risk Behaviours). Section 4 monitors markers such as anxiety, hopelessness, and intense guilt. When an operator detects high scores in psychological distress, it serves as a red flag. This prompts a non-judgmental exploration of hidden dependencies. Then, the assessment proceeds to Section 5. A stepped-care approach is required: only when alliance allows, it is possible to scale up to direct inquiry. (e.g., Do you gamble using funds required for essential expenses?, Do you lie to family about losses?, Has recovering losses driven you to borrow?). If a high-risk profile emerges, strategy shifts to redirection to specialised Addiction Services, ensuring intervention addresses the underlying pathology.

Cfr. Associazione Libera, *Rapporto Azzardomafie 2025,* https://www.libera.it/documenti/schede/gioco_d_azzardo_web.pdf; CGIL & Federconsumatori, *Libro Nero dell'Azzardo* https://files.cgil.it/version/c:YmQwYjg5OWEtZDliZS00:MjNjY2U0NDItZjUwOS00/LN2_RevFinale_24maggio2024.pdf.

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Testing Risk Index

The SPES Index underwent field testing with individuals in severe socio-economic distress, involving Caritas Perugia in Italy and ECDN partners in Belgium, Finland, Germany, and Poland. Although preliminary and based on limited testing, qualitative feedback offers plausible outlooks on the tool's potential:

- Tool Efficacy: The Index shows the ability to identify complex risk profiles, with the majority of cases falling into the category of Integrated Vulnerability.
- Usability Feedback: Operators noted that the questionnaire can be lengthy and difficult for users to fully comprehend. This provides clear directions for future refining.
- The Relational Barrier: Testing confirmed that direct inquiries regarding gambling are perceived as invasive. Consequently, indirect indicators from other sections proved to be vital entry points.

Conclusions

The SPES Project shifts from crisis management to early prevention. In Perugia, a Support Network promotes its local implementation. To facilitate widespread adoption, the SPES model—incorporating the Risk Index, Guidelines, and Training Curricula—is available through EPALE and Erasmus+ platforms, designed to be tested, adapted, and refined across different contexts. Dissemination aims to foster collaborative dialogue, inviting professionals and volunteers to contribute to tools in the fight against over-indebtedness.

"Funded by the European Union. Views and opinions expressed are however those of the author(s) only and do not necessarily reflect those of the European Union or the National Agency Erasmus+ INDIRE. Neither the European Union nor the granting authority can be held responsible for them.

FINLAND: Gambling, Debt and Financial Recovery

Aura Pylkkänen
Guarantee Foundation

"Financial recovery is about rebuilding a balanced relationship with money; it also means that despite financial hardship or large debts caused by gambling, a person can live a meaningful and rewarding life."

Overview: Key Aspects of Finnish Gambling Culture

Finland has one of the highest rates of gambling in Europe, with roughly 70% of adults having gambled in the past year. Men in all age groups gamble more than women. Most popular games include weekly lotteries, scratch cards/online lotteries, and slot machine games.

Gambling is deeply integrated into daily life. Slot machines have traditionally been visible in supermarkets, kiosks, and gas stations. While most gambling is moderate, it is estimated that 2.5% of gamblers account for roughly half of the total gambling expenditure. Gambling problems affect hundreds of thousands of people, and the prevalence of concerned significant others of problem gamblers is as high as 20%.

Historically controlled by a state monopoly (Veikkaus), the culture is shifting toward a licensed, competitive system in 2027 to address gambling harm and digital trends, especially the rise of online gambling.
While widely normalized, public opinion on gambling is becoming more critical.

At Guarantee Foundation, our goal is to promote financial literacy to reduce gambling harm, and, in accordance with the national Gambling Policy Programme, prevent gambling debt.

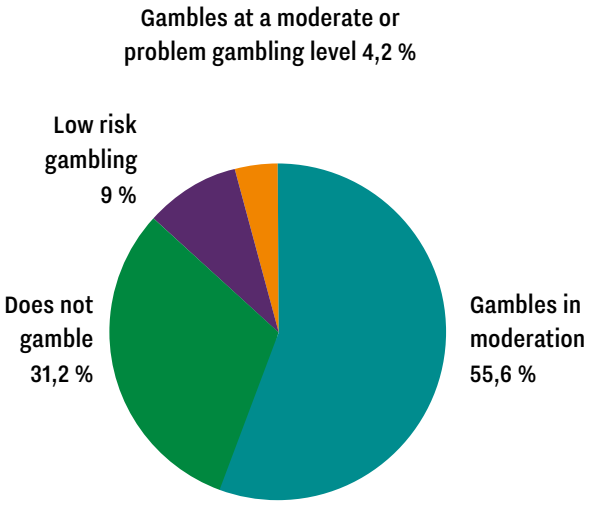
The Severe Financial Consequences of Gambling harm

Gambling harm creates profound and often devastating financial consequences that go beyond mere loss of money, frequently resulting in the inability to meet basic living expenses, depleted savings, reliance on payday loans and long-term debt. These consequences of excessive gambling often affect entire households. Financial hardship can also lead to income-generating crimes like fraud or theft.
Gambling-related debt often includes high-interest loans, credit cards, and loans from friends and family. At Guarantee Foundation, our gambling clients are typically young men, who have accumulated tens of thousands of euros worth of unsecured credit. Many don't seem to acknowledge the role of gambling as the source of their financial difficulties. This is something that should be addressed more, since Finnish studies have shown that people with unsecured loans gamble more heavily and loose more money than those who don't have unsecured credit.

Problematic gambling often goes hand in hand with debt. 40 % of the clients of the national gambling helpline (Peluuri) report having gambled with unsecured credit. 80 % of applicants for their internet-based therapy program, Time to Fold, report gambling-related debt.

Defining Financial Recovery: Listening to the Voice of Lived-Experience

Getting out of gambling-related debt is often a time-consuming process. Generally, it means long lasting financial scarcity, financial stress and lack of prospects. The concept of financial recovery, which is still new and somewhat unestablished, refers to overcoming the financial harm associated with gambling, finding a solution to financial problems at some point and getting one's finances back in order. However, this sort of definition leaves out the complex underlying mechanisms and focuses on technical solutions. People with lived experience have described long-term struggle with money, lack of positive examples and guidance when growing up, as well as deep-rooted feelings of shame and anxiety.



Gambling in Finland

At Guarantee Foundation we wanted to make the voices of people with lived experience heard. Together we visualized the journey in the metaphor of steps, where control over money matters is gradually re-instated. Getting rid of debt, however, is not the goal of financial recovery. Rather, it's leading a good and meaningful life despite the financial harm and having a more balanced relationship with money. The means to re-instating control is strengthening financial literacy and financial self-esteem, which in turn enhance possibilities for debt restructuring and turn them into sustainable solutions in the future.

Testing Different Methods of Support for People with Gambling-related Debt

Treatment and support for problem gambling and financial and debt advice have traditionally been viewed as separate entities. However, failure to address financial hardship can lead to relapses and impair treatment. We wanted to test if we could develop concrete tools that could benefit both recovering gamblers and the professionals who see to their treatment.

First, we developed reflection exercises for gambling problem treatment groups. Participants were encouraged to visit their financial history and financially motivated aspirations associated with gambling, as well as to identify current resources and shortcomings, hopes and dreams for the future, and any small steps they might feel proud of. The groups were facilitated by an expert by experience.

Next, as we received encouraging feedback from the groups, we constructed an online course that offers information, exercises and peer stories. Participants have reported improved self-confidence and trust in their ability to overcome financial harm as well as increased feelings of hopefulness towards future. The course is also currently used alongside the Time to fold- treatment program.

We also updated a section on our partner's toolkit for peer support facilitators, shifting the focus towards individual resources and financial recovery instead of technical solutions for debt. Thematic entities can be used in a group setting or as a part of one-on-one support relationship.
Trained experts by experience also participated in a try-out where our loan guarantee applicants were offered individual support. Participants had weekly calls or meetings with an expert with lived experience and simultaneously support from our financial advisor. With glowing feedback, we witnessed improvement in several areas, such as perceived ability to handle difficult feelings and thoughts without gambling and ability to prevent relapses. We continue to show a special interest in our gambling clients, and further test new approaches for intervention and support.

Tackling gambling-related debt – together

The undeniable strength of Finland is the active collaboration that crosses sector boundaries, as researchers, authorities and NGOs work together to prevent and reduce gambling harm. The network has also established dialogues with new stakeholders, such as banks and other financial institutions.
One key aspect of harm prevention is the ability to frame gambling as a financial question and raise public awareness about financially sustainable gambling consumption and the risks generally involved in any frequency of gambling, so people can make informed decisions. Finland has started to implement lower-risk gambling guidelines, since research shows that the risk of experiencing gambling harm starts to rise once a person gambles more than 2 percent of their monthly net income.
The focus of preventive work is also shifting strongly to address the phenomena that surround the emerging gambling generation. The young gamble a lot too, and gambling is often associated with affluent lifestyle and risky financial strategies, such as trading cryptos. Therefore, we see a growing demand for promoting digital financial literacy, supplying teachers and youth workers with concrete tools for early intervention, and informing parents about the reality that their young face online. A lot of joint advocacy work is also done to try to ensure that the young are sufficiently protected in the new gambling legislation.
Finally, the role of problem gambling support and treatment professionals is essential in the promotion of financial recovery. Therefore, a guide has been co-written and developed in collaboration to raise awareness among professionals who traditionally view gambling as a health-related issue.

In Conclusion: Looking Ahead with Lessons Learned

Having immersed ourselves with the financial consequences of excessive gambling for the last couple of years, some observations can be raised.
Since gambling happens mainly in digital platforms, we should incorporate financial literacy's digital aspects, such as understanding the role of marketing and algorithms, or dark patterns of user design, when we raise awareness of the risks involved. Knowing that unsecured credit accelerates harmful gambling, we should target people who have access to it - the working age population, especially those currently employed.
But for those who have already suffered financial consequences of excessive gambling, financial recovery can serve as a road map out of financial harm. The concept helps to verbalize the process that often takes place after the gambling itself has stopped and takes into consideration the aspects of agency and individual resources.
All in all, if there is to be any kind of success with preventive actions, it involves building mutual trust and understanding between stakeholders, including the people who have first-hand knowledge and experience and working together towards a shared objective.

Gambling Regulation, Vulnerability, and Problem Gambling in Hungary: A Contemporary Overview

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MA in Psychology
MBA in Quality Management
Owner and Managing Director of Cognative Ltd.

Introduction

Gambling occupies a complex position in Hungarian society: it is a regulated leisure activity, a significant source of state revenue, and simultaneously a public health concern. While the legal framework is strict—particularly regarding the protection of minors—recent national surveys reveal that problematic gambling affects a non-negligible share of the adult population. Understanding the historical, cultural, and epidemiological context is essential for designing effective prevention and treatment strategies.

Protection of Minors: A Central Pillar of Hungarian Gambling Policy

Hungarian law unequivocally prohibits gambling for individuals under 18 years of age. This restriction reflects a broad scientific consensus: minors are more vulnerable to developing gambling related disorders and more susceptible to the associated harms.

All licensed gambling operators in Hungary enforce age restrictions across every sales channel. Online registration is blocked for minors through mandatory age-verification systems, and land-based operators are required to deny access to anyone under 18.

To support families, the National Media and Infocommunications Authority recommends a range of child-protection filtering software. These tools help parents and guardians limit access to harmful online content, manage screen time, and reduce exposure to gambling-related material.

Help and Treatment Options for Gambling Addiction in Hungary

Hungary maintains a diverse network of institutions and community-based programs that offer support to individuals struggling with gambling problems. Key service providers include:

- Gyula Nyírő National Psychiatric and Addiction Institute (OPAI) – Minnesota model inpatient and outpatient treatment.
- Gamblers Anonymous (GA) – peer-support community following the 12-step model..
- TÁMASZ Outpatient Clinic – addiction counselling and therapy.
- MMSz FOGADÓ Psycho-social Service – psycho-social support for individuals and families.
- Megálló Group Foundation – long-standing NGO supporting addiction recovery.
- Szerencsejáték Zrt., Hungary's largest state-owned gaming operator, supports a free, anonymous Helpline operated in cooperation with ELTE PPK's Department of Clinical Psychology and Addiction and the Pro Psychology Foundation. The service is accessible via email and through the "ELTE Gambling Helpline" Microsoft Teams ID, offering crisis intervention and guidance.

- "Game with Borders" Program. Launched in 2012, the Játék határokkal ("Game with Borders") program is the country's most extensive prevention and treatment initiative. Coordinated by the Hungarian Ecumenical Charity Service with the involvement of Caritas "Rév" and other partners, the program provides nationwide, primarily telephone-based support.

In 2017, the program expanded with Information Points in seven cities (Budapest, Debrecen, Miskolc, Kaposvár, Orosháza, Sopron, Szolnok). These centers offer local assistance, build professional networks, and strengthen cooperation among institutions dealing with gambling addiction.

Historical Context: Gambling in Post Socialist Hungary

The evolution of gambling in Hungary differs markedly from Western Europe. Under socialist ideology, which rejected individual enrichment through luck, most forms of gambling were abolished after World War II. Only horse betting survived, albeit with ideological reservations.
Key milestones include:

- 1947 – Introduction of Toto Pools to finance Olympic preparation.

- 1957 – Reintroduction of the National Lottery, which quickly became a cultural phenomenon. Monthly draws offered scarce luxury goods–cars, flats, televisions–providing a symbolic escape from enforced economic equality.

- Early 1990s – Market liberalization following the political transition. Lottery games, scratch cards, sports betting, casinos, and gambling halls proliferated, rapidly aligning Hungary with Western European gambling markets.

This compressed historical trajectory — rapid expansion after decades of restriction — continues to shape gambling beha-viours and vulnerabilities in the population.

Problem Gambling in Hungary: Findings from the NSAPH/OLAAP 2019 Survey

The Problem Gambling Severity Index (PGSI) is a nine-item scale, used to identify different subgroups of problem gamblers with different levels of risk status (none, low, moderate, and problematic).
The instruction is that: „Answer the following questions when thinking about your gambling behaviour over the past 12 months“

1. Have you bet more than you could really afford to lose?
2. Have you needed to gamble with larger amounts of money to get the same feeling of excitement?
3. Have you gone back on another day to try to win back the money you lost?
4. Have you borrowed money or sold anything to gamble?
5. Have you felt that you might have a problem with gambling?
6. Have people criticized your betting or told you that you had a gambling problem, whether or not you thought it was true?
7. Have you felt guilty about the way you gamble or what happens when you gamble?
8. Has gambling caused you any health problems, including stress or anxiety?
9. Has your gambling caused any financial problems for you or your household?

The scale points are: Never=0; Sometimes=1; Most of the time=2; Always=3

PGSI categorizes individuals into four risk levels:

- 0 points – non problem gambling
- 1–2 points – low risk
- 3–7 points – moderate risk
- 8 + points – problem gambling

Importantly, these categories reflect risk, not clinical diagnosis.

Prevalence figures

Prevalence of gambling participation in the Adult Population (18–64 years)

- Lifetime prevalence: 67.0%
- Past year: 39.7%
- Past month: 30.1%

Prevalence of problematic gambling

- Any level of problematic gambling: 9.2%
- Low risk: 4.3%
- Moderate risk: 2.5%
- Problem gambling: 2.3%

A consistent pattern emerges: men face more than double the risk compared to women.

Among Past Year Gamblers the percentage of moderate or problem gambling reaches 12.7 percent. Again, male risk is roughly twice that of females.

Young Adults in Budapest (18–34 years)

The Budapest Longitudinal Study (BLS 2019) with young adults in Budapest, aged 18-34 years, shows lower prevalence than the national average.

Prevalence of gambling participation in the young population (18–34 years)

- Lifetime: 57.3%
- Past year: 32.4%
- Past month: 23.3%

The prevalence of moderate or problem gambling is 3.1 percent.
Gender differences are even sharper here: men are nearly four times more likely to exhibit problematic gambling than women.

Demographics and Psychological Correlates

Analyses of the moderate and problem gambling group (N=65) reveal:

No significant differences in:

- age
- settlement size
- education

Protective factors are female gender with a 73 percent and religiosity with a 98 percent lower risk.

On the other side, there are several major risk factors:

- Higher life satisfaction (OR = 2.70)
- Larger household size (OR = 2.21)
- More family risk behaviours (OR = 1.39)
- Sensation seeking (OR = 1.14)
- Rumination (OR = 1.13)

One surprising finding stands out: higher life satisfaction is associated with a 2.7-fold increase in risk, contradicting parts of the international literature and suggesting a culturally specific pattern.

International Comparison

Globally, PGSI based prevalence of problem gambling ranges from 0.3% to 3.2%.
Hungary's rate of 2.3% (±0.81) places it squarely in the mid-range internationally.

Consistent international patterns include:

- Higher male vulnerability
- Religiosity as a protective factor
- Family risk behaviours as predictors
- Sensation seeking and rumination as psychological vulnerabilities

Age effects, however, remain inconsistent across countries.

Conclusion

Hungary's gambling landscape is shaped by a unique historical trajectory, strict regulatory protections for minors, and a growing but still moderate prevalence of problematic gambling. The national support system—ranging from clinical institutions to community-based programs and nationwide helplines—provides a robust safety net, though rising trends underscore the need for continued monitoring and prevention.
The 2019 national survey highlights both familiar international patterns and culturally specific findings, such as the unexpected association between higher life satisfaction and increased gambling risk. As gambling opportunities continue to evolve, evidence-based policy and targeted interventions will remain essential to protecting vulnerable populations and mitigating harm.

The author thanks the most reputable Hungarian expert on addictions, Prof. Dr. Zsolt Demetrovics, for his support with this article.

The Euro is here, Gambling Addiction remains – Bulgaria: A System still lagging behind its own Consequences

Willy Pierre Abbal
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Introduction

With 8.7% of young people aged 15 to 16 at risk of gambling addiction according to the 2024 ESPAD study, Bulgaria holds one of Europe's highest rates of problematic gambling behaviour among minors. For comparison, the rate stands at 2.8% in the United Kingdom, 2.9% in France, and 4.0% in Sweden. Since 1 January 2026, Bulgaria has adopted the euro. This major monetary change was meant to symbolize economic modernization and stronger integration into the European framework, but in the gambling sector it has not corrected the existing imbalances.

The year 2026 represents an inflection point for the sector. The adoption of the euro facilitates cross-border financial flows, while new European obligations on consumer credit and financial surveillance increase regulatory pressure. At the same time, the digitalization of gambling continues to accelerate young people's exposure, creating a growing gap between economic regulation and behavioural reality.

Yet solutions already exist. The European Credit and Debt Network (ECDN) and the Bulgarian Temida Foundation have developed prevention and support protocols for debt linked to gambling. The Bulgarian state does not even need to invent anything – it simply needs to fund what already works elsewhere.

The Euro Changes the Currency, Not the Mechanics

The transition to the euro has had three immediate effects on the gambling sector. First, a complete standardization of gaming systems has taken place, with stakes, jackpots and transactions now denominated in euros, simplifying cross-border financial flows with European operators.

Second, operator margins have come under increased pressure. Since the 2026 budget, the tax on Gross Gaming Revenue (GGR) has increased from 20% to 25%, making Bulgaria one of the highest-tax jurisdictions for gambling in the region. Based on an estimated annual GGR of around €1.1 billion, this increase should bring an additional €30 to €35 million to the state this year.

Third, a subtle but important psychological effect has emerged. The switch to the euro changes the perception of amounts, and some operators have taken advantage of the transition to round up minimum stakes – what behavioural economists call „rounding inflation". A stake that was previously 0.50 leva (approximately €0.25) and is now presented as €0.50 has in fact doubled in real terms. This effect is particularly dangerous for young or vulnerable players who may not mentally adjust to the new currency.

A Concentrated Market Structurally Dependent on Sport

The Bulgarian gambling market represents approximately 3 to 4 percent of GDP, a high proportion for a country of this size, comparable to the European economies most dependent on gambling. The sector is dominated by a few vertically integrated private groups, which combine sports betting, online casinos, physical venues and sports sponsorship.
Unlike in many Western European countries where gambling operators are often publicly traded companies with dispersed ownership, the Bulgarian market is characterized by concentrated and often opaque ownership structures. The three main private operators are all Bulgarian-owned, which has significant implications for regulation and political influence.

Efbet, part of the Efbet Entertainment Group, is historically one of the market leaders. The company has a strong presence in sports betting, physical casinos and online platforms, and is a major sponsor of Bulgarian football, including CSKA Sofia.

Winbet, registered as Winbet EOOD, has become a dominant player in online casinos and engages in aggressive digital marketing within the limits of the law. The company also sponsors multiple football clubs and sporting events.

Palms Bet, operating as Palms Bet AD, maintains a significant physical and online presence and is known for sponsoring smaller clubs and regional competitions.

Alongside these private operators, the Bulgarian Sports Totalisator, which is state-owned, runs the national lottery. It is the only operator allowed to broadcast traditional television commercials and holds a monopoly on lottery-style games. Critics argue that the national lottery blurs the line between harmless lottery games and more dangerous forms of gambling, creating a false sense of security among players.

The fact that the main private operators are Bulgarian-owned rather than international groups means that profits largely remain in the country, political connections are stronger and harder to challenge, and the risk of regulatory capture is real. This ownership structure also explains why successive governments have been reluctant to impose stricter regulations on the sector.

The Economic Mechanism: Asymmetric Value Redistribution

The Bulgarian gambling system operates on a logic of asymmetric value redistribution. Operators capture the gross gaming margin after taxes, while the state collects direct and indirect taxation. Sports clubs receive sponsorship money, which buys them visibility and social legitimacy. Banks and fast credit providers collect interest on the debt induced by gambling. Households bear the direct losses and diffuse social costs, while the healthcare system ends up providing non-specialized addiction care. This decoupling between value creation and cost absorption is at the heart of the sector‘s structural imbalance.

The Media Paradox: Banned, Yet Everywhere on Screen

Bulgarian law has banned traditional gambling television commercials since May 2024. Yet gambling operators‘ names such as Efbet, Winbet and Palms Bet remain constantly visible on screen. The explanation lies in sports sponsorship, which is explicitly permitted under the law. Logos on jerseys, LED boards around pitches and broadcaster banners are all filmed for free during matches. This is not considered „advertising“ in the legal sense but rather „sports content“. The only legal constraint is the obligation to display health warnings, but these are typically marginal and barely visible on screen.

This legal loophole has a powerful effect on young viewers. For a teenager watching a football match, gambling is associated with sport, success and the players they admire. No advertising spot is needed to normalize gambling when the jersey of their favourite team carries a bookmaker‘s logo.

The Digital Shift: When Gambling Becomes Continuous

Today, more than half of the sector‘s revenue comes from online gambling. This digitalization has transformed the very nature of exposure. Players now have 24/7 access via mobile devices, can place repeated micro-transactions with stakes as low as €0.50 or €1, and can engage in real-time betting on sporting events. Interfaces are gamified with notifications and personalized bonuses, creating a behavioural continuum where the boundary between entertainment and compulsive repetition becomes blurred.

Unlike physical casinos, where gambling is a one-off event that requires travel and conscious effort, online gambling is always present in the pocket of every smartphone user. This constant availability is particularly dangerous for young people, whose impulse control mechanisms are still developing. The shift from occasional gambling to continuous gambling is perhaps the most important structural change in the sector over the past decade, and Bulgaria has been particularly exposed to this trend due to its rapid digitalization and the absence of effective online safeguards.

The Real Cost: An Invisible Dependency Economy

The sector's tax revenues are significant for the state, running into several hundred million euros per year. But these revenues tell only part of the story. In comparable European countries, public health studies estimate that the social cost of problematic gambling represents between 0.5% and 1% of GDP. This cost is not limited to medical expenses. It includes lost productivity through absenteeism, unemployment and school dropouts. It includes household debt, with individual losses potentially equivalent to several years of salary. It includes mental health impacts such as chronic anxiety, depression and suicide, as documented by the World Health Organization and the UK Gambling Commission. It includes family breakdown through divorce, domestic violence and child placement. And it includes judicial costs related to financial crimes committed to fund gambling addictions.

In the Bulgarian case, with a GDP of approximately €90 billion, this means the gambling economy likely generates an annual social cost of between €450 million and €900 million. A large part of this cost is absorbed by households themselves or by non-specialized public systems that are not equipped to handle gambling addiction specifically. In other words, gambling finances the state, but generates equivalent social costs that it does not compensate for. This is the core paradox of the Bulgarian model.

Strong Regulation on Paper, Weak on Consequences

Bulgaria does have a relatively strict regulatory framework on paper. The law includes a broad ban on classical gambling advertising, although this is circumvented by the sports sponsorship loophole. There is strengthened fiscal supervision of operators, a national self-exclusion register whose minimum duration was increased to 365 days in April 2025, and financial compliance obligations including an identification threshold set at €2,000.

But this regulation acts mainly on the economic supply side, not on health consequences. What is still cruelly missing is a comprehensive care infrastructure. There is no public care center for gambling addiction anywhere in the country. There is no national network of cognitive behavioural therapy for gambling disorder. There is no financial support system for over-indebted gamblers. There is no structured school prevention program, despite 8.7 percent of 15 to 16 year olds being at risk. And millions of euros allocated for prevention and treatment remain frozen due to the absence of a regulatory framework to spend them.

Solutions Already Exist in Bulgaria and Europe

Contrary to common belief, Bulgaria is not lacking in expertise. Local actors connected to European networks have been accumulating operational knowledge on the link between over-indebtedness and gambling addiction for years.

The Temida Foundation is a leading Bulgarian organization on debt and consumer protection issues. Temida works on the articulation between over-indebtedness and problematic gambling, provides legal and financial support for victims, and advocates for better transposition of European directives. Despite its expertise and its recent recognition as an official partner of the Ministry of Finance, Temida struggles to secure sustainable financial and political sponsorship. The need for its work is beyond debate, but without stable funding, even the most competent civil society organizations eventually run out of capacity.

The opportunity for Bulgaria is therefore not to reinvent solutions but to adapt what already works elsewhere. The frozen funds – millions of euros – could be used to finance this adaptation, provided the state agrees to cooperate with civil society rather than treating it as a communication partner.

Concrete Recommendations for 2026–2027

Faced with the urgency of 8.7% of young people at risk and an non-transposed European Consumer Directive, Bulgaria needs to act on several fronts simultaneously.

First, the country should create specialized care centers. A realistic target would be three pilot centers in Sofia, Plovdiv and Varna by the end of 2027, modelled on the French CSAPA centers or the United Kingdom's NHS clinics. These centers could be financed by allocating just 5 percent of the €30 to €35 million annual revenue from the GGR tax increase.

Second, Bulgaria must impose evidence-based care protocols. The current Ministry of Health draft ordinance is too vague and does not specify which treatment methods are eligible for public funding. The law should require that funded structures use only validated methods such as cognitive behavioural therapy, motivational interviewing and psychological follow-up, drawing on the ECDN protocols presented in Strasbourg in April 2026.

Third, digital protection tools need to be strengthened. Inspired by the Swedish model, Bulgaria should make deposit limits mandatory – for example, a maximum of €500 per month – as well as time limits on gaming sessions. These limits must be impossible to change without a latency period, typically seven days, to prevent impulsive decisions.
Fourth, the self-exclusion register must be made effective. Currently, even the approximately 50,000 people on the register can often play again because operators do not systematically verify identities. Bulgaria should mandate mandatory identity verification before any online gambling, coupled in real time with the national self-exclusion register.

Fifth, school-based prevention should be launched as a mandatory program from the fifth grade, when children are aged 11 to 12, before the age of first risk. The program should be adapted from the „Unplugged" model, which has been validated across Europe, with a specific module on the risks of online casinos and micro-stakes.

Sixth, the sports sponsorship exception must be reviewed. At a minimum, Bulgaria should require visible health warnings covering at least 20% of the advertising surface with a readable font. It should ban the sponsorship of youth teams under 18 and football academies. And it should study a transition fund to help clubs diversify towards non-addictive sponsors over a period of five to ten years.

Seventh and most urgently, Bulgaria must transpose the Consumer Credit Directive without further delay. The European Directive (EU) 2023/2225 on consumer credit was to be transposed by Member States by November 2025. In April 2026, Bulgaria has still not completed this transposition – a delay of five months.

Conclusion

In April 2026, Bulgaria illustrates a contemporary European paradox. It is a country fully integrated into the European economy, now using the euro, with a highly structured and taxed gambling sector – but the social consequences of that sector remain largely unabsorbed by the public system.

Bulgaria now has the money from the tax increase to 25 percent, bringing in an additional €30 to €35 million per year. It has the diagnosis, with European-record addiction rates documented by ESPAD. It has the legal framework of the European Directive, even if it is five months late in transposing it. It has the single currency, which simplifies transactions and attracts investors. And it has the expertise of Temida Foundation and the ECDN, with tested protocols ready for adaptation.
What is still missing is the political will to transform these resources into a genuine care system, to move beyond the hypocrisy of sports sponsorship that exposes young people to gambling as a normal activity, and to respect European commitments. The real issue is no longer to regulate the market further but to rebalance a system where gambling profitability is institutionalized but its social effects remain externalized.

The European Directive should have been transposed five months ago. Every month of delay exposes more over-indebted gamblers to irresponsible loans. The urgency has never been greater.

- Sources are available on request.

The Legal Framework Concerning Gambling in Romania: Licensing and Authorization Regimes, Responsible Gambling, and Self-Exclusion Mechanisms

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Introduction

Gambling in Romania is regulated, starting with 2009, through the entry into force of the first normative act in the field, subsequently amended and supplemented. The regulations adopted in the period 2023–2026, provide for enhanced consumer protection, based on the principle of preventing addiction and limiting risk behaviors. These strengthen the obligations of operators in the field of responsible gambling, through the establishment of mechanisms such as self-exclusion, monitoring of player behavior, and the restriction of aggressive commercial communications. At the same time, the new regulations reflect the principle of transparency and increased compliance, through strict licensing and authorization requirements, as well as through the intensification of control exercised by the competent authority. At the same time, there is an emphasis on the protection of the public interest and the reduction of the negative social impact of gambling, including through territorial limitations and discouraging fiscal measures.

Relevant legal norms (Sedes materiae)

The basic legislation currently consists of a series of normative acts which, starting from 2009 up to and including this year, have consolidated the regulation in the field:

- Government Emergency Ordinance – GEO no. 77/2009 on the organization and operation of gambling, approved by Law no. 246/2010,
- Law no. 326/2022 for the amendment and supplementation of GEO no. 77/2009,
- Government Emergency Ordinance no. 82/2023 for the amendment and supplementation of GEO no. 77/2009, as well as for the amendment of GEO no. 20/2013 regarding the National Office for Gambling – NOG,
- Law no. 107/2024 approving GEO no. 82/2023, also referred to as the "Slot Machines Law", which eliminated slot machines from small localities, and
- Government Emergency Ordinance no. 7/2026 for the amendment and supplementation of certain normative acts, including GEO no. 77/2009.

The regulations in the field of gambling are complemented by those from related domains such as Law no. 363/2007 on combating unfair commercial practices of traders in relation to consumers and harmonizing regulations with European consumer protection legislation, Regulation (EU) 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data (GDPR).

The Romanian system in the field of gambling is one of a strict administrative authorization regime, meaning that the law imposes a rigid and exhaustive framework, based

on strict criteria, divided into stages. The central institutional pillar of regulation is the National Office for Gambling – NOG, an institution subordinated to the Ministry of Finance. It has the role of authorizing, monitoring, and controlling operators.
The State holds exclusive control over the market through regulation, licensing, authorization, control, and sanctioning, while operation is carried out by licensed private operators. The State monopoly over gambling operation includes the following competences of the public authority: exclusive right of regulation; authorization; sanctioning; setting of taxes and guarantees; combating the illegal market; national database for self-excluded persons and administration of the public online register. Exceptionally, certain lottery-type games are operated exclusively by the National Company "Loteria Română" S.A.

Licensing

The organization license implies the application of the principle of distinct licensing by type of activity and differentiates types of games (e.g. betting, casino, slot-machine, online, etc.) and the principle of direct operation by the license holder, not by hidden operators. The principle of separation between Class I and Class II operators is also applied.
Class I: game operators.
Class II: provide related activities – IT, payments, software, audit, hosting, etc.
In order to operate legally on the Romanian gambling market, entities must obtain a prior, distinct, specific license for Class I and Class II from NOG. The difference between Class I and Class II is fundamental: the first is for game organizers (operators), and the second is for related activities (providers). The license is the legal condition for market access and each type of game requires distinct licensing.
The express condition is that online operators must have a relevant legal presence in Romania or have a permanent establishment here. A prohibition is established on providing services to unlicensed operators and a prohibition for Class II providers to facilitate access to gambling for operators without a Class I license, the applicable sanction in such cases being a fine and the revocation of the Class II license.

Authorization

The operating authorization implies the application of the principle of distinct authorization for the concrete operation. The authorization is granted for each location or online platform individually and is renewed annually. Therefore, the authorization is necessary for slot machines – per device/location and/or online – per platform, is granted for a limited period, involves monthly or annual fees, allows permanent control, respectively NOG monitoring, including technical monitoring.

A relatively recent amendment prohibits the opening of gambling halls (slot-machine type) in localities with a population of less than 15,000 inhabitants. The purpose is to limit gambling in rural and small urban communities.

More recently, a dual authorization system has been introduced:
- license and operating authorization from NOG,
- local operating authorization issued by the local public administration authority for certain activities carried out in physical venues.

Therefore, the national license from NOG is no longer sufficient for the operation of a gambling hall; local authorization is also required.

The local council may adopt a decision allowing the conduct of gambling activities within the administrative-territorial unit and may also establish:
- the areas where gambling halls may operate,
- -areas where they are prohibited (for example near schools, public institutions, etc.),
- the annual fee for the local authorization.

If the activity is permitted, the operator must obtain an annual operating authorization from the municipality.

The transitional regime for existing gambling operators, who already had authorizations obtained from NOG, consists in the fact that they may continue their activity until the expiry of the existing authorization, and after its expiry they must also obtain the local authorization.

Responsible gambling practices of operators established for the protection of players

These consist of:
- Clear identification of the operator by indicating the license and its identification data.
- Transparency of the operator's activity through the establishment of the obligation to disclose the essential wagering conditions and the granting of bonuses, these being essential information that must be presented clearly and visibly. The operator may not grant financial benefits to an unidentified client (KYC – Know Your Customer), as it must prevent fraud/money laundering.

- Marketing rules for gambling were consolidated in 2023 and 2024. The basic principle reflected by the regulations is: advertising must not incite gambling, but must inform, with a prohibition of misleading practices being established. Any campaign suggesting that gambling is a source of income or a solution to financial problems, promising guaranteed winnings or suggesting enrichment, social success, may be classified as misleading advertising.

- Protection of minors consists of the implicit and explicit prohibition of advertising addressed to minors and the association of gambling with social success for minors. Advertising that affects minors, exploits their credulity, associates gambling with minors and targets minors is prohibited. Commercial practices that exploit the vulnerability of a group (e.g. minors) are prohibited.

- Rules for online communications – the prohibition is regulated of sending promotional messages to persons who have not given their explicit and informed consent. Excessive sending of messages (spam) may be interpreted as harassment and pressure on the player, and each communication must contain a simple and free method of unsubscribing, i.e. an easy refusal of future communications.

Record in the NOG register of self-excluded persons

At the level of NOG, a register of self-excluded persons has been established, a centralized database which includes players who have voluntarily requested not to have access to gambling (for a determined period or permanently).

Distinct from these, there are also persons whose access may be restricted by operators, who may adopt their own measures regarding the practice of gambling, as a result of fraud, inappropriate behavior, etc.

Self-exclusion procedure

GEO no. 77/2009 provides that gambling operators have the obligation: to implement responsible gambling measures; to establish procedures for self-exclusion and restriction of access for participants; to prevent access of persons who have requested self-exclusion.
NOG Order no. 79/2025 expressly regulates the self-exclusion procedure, this meaning the voluntary request of a person to be prohibited from participating in gambling. The person may submit the request, the standard form, as follows: physically at NOG, electronically, with a qualified electronic signature, by declaration given before a notary/lawyer or may submit the request through the operator. The effect of self-exclusion becomes effective after registration in the register and consists in the prohibition of participation in gambling, a prohibition which becomes opposable to all licensed operators. The request for removal from the register is submitted to NOG under the same conditions as the self-exclusion request.

Obligations for operators arising from registration

Operators have the obligation: to consult the register, not to allow access to the self-excluded person, to apply the prohibition in all types of gambling (online and offline).
On the online platform or in the gambling hall, the operator's IT system must integrate through API – Application Programming Interface with the NOG database.
For online: at the moment when a player enters the username and password, the system must automatically query the register. If the personal identification number appears there, access to gambling must be blocked instantly.

Land-based operations

Each location must have a terminal (tablet/PC) connected to the register. Staff are obliged to scan the identity document of each client upon entry and not to allow access to the registered person.

Electronic register

Operators must keep a digital record of all persons who have entered, correlated with the queries made in the database of excluded persons.
Once a person is registered in the register, they must be automatically removed from newsletter lists, SMS or any promotions of operators.
NOG carries out controls at operators through "Mystery Shopper" or system audit and may apply sanctions for cases of breach of self-exclusion rules. The operator who allows a self-excluded person to gamble, and that person incurs losses, may be sued by that person for recovery of damages.

Conclusions

Following the present study, we find that the regulations in the field have acquired greater coherence and a higher degree of harmonization both at national level and in relation to the requirements of European Union law, being predominantly oriented towards strengthening consumer protection and the accountability of operators. The challenge is the application of these in the future in order to ensure effective compliance, increase the efficiency of control and sanctioning mechanisms, as well as reduce the negative social impact of gambling, in particular through the prevention of addiction and the protection of vulnerable persons.

We note that, in 2026, NOG, in its capacity as a specialized authority of the central public administration, responsible for administering the gambling sector, launched the first call for projects, based on the urgent need to manage the social and public health risks associated with gambling. These generate considerable social and economic costs, including family breakdown, severe financial problems, deterioration of mental health and an increase in the rate of suicide attempts. The program aims to mobilize the resources of civil society, academia, the public and private sectors in order to develop and implement integrated and sustainable solutions to counteract the negative effects of gambling. It is anticipated that this approach will contribute to the establishment of effective prevention and intervention mechanisms, to the substantiation of public policies on empirical bases and to the strengthening of inter-institutional cooperation in order to reduce the prevalence of addictive behaviors and the associated social impact.

The article is based on the normative acts indicated in its content.

Banking on support for Problem Gambling in Ireland

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"The Common Commitment of Care is helping to make a positive difference to those customers who need additional support and their families, who often live with the consequences of Problem Gambling.
Voluntary Card Blocking works."

Introduction

In August 2024, AIB, a leading retail Bank in Ireland and a member of the Irish Banking Culture Board (IBCB), announced a series of measures to support customers who were challenged by problem gambling, including the introduction of voluntary debit card blocking on registered gambling websites. This simple but powerful intervention enabled individuals to take an immediate step to reduce the financial harm.

What began as a single-bank initiative prompted a wider industry response which led to the IBCB undertaking a review into the nature and scale of problem gambling in Ireland. The findings supported concerns that problem gambling was a significant and growing challenge, affecting not only individuals, but families, workplaces and communities.

In response, the IBCB, in partnership with its member banks, AIB, Bank of Ireland and PTSB developed the Common Commitment of Care for Problem Gambling, which was launched in September 2025. The aim sets out to help those customers struggling with problem gambling and ensures that any customer, regardless of which bank they use, can access consistent, practical and compassionate support.

Rebuilding Trust Through Action

The Irish Banking Culture Board was established in 2019 as an independent body, in response to a prolonged erosion of public trust originally following the 2008 Great Financial Crisis and thereafter, subsequent industry challenges that faced the domestic banks. The IBCB mission is to rebuild trust and confidence among customers, while restoring pride in the sector for the 20,000 staff working across Ireland's main retail banks.

Today, its member banks include AIB, Bank of Ireland and PTSB. While the banking landscape has evolved in recent years, the determination to support the customer has remained constant. Initiatives such as the Common Commitment of Care demonstrate how the sector can work collectively to respond to complex social challenges in a meaningful way.

Understanding Gambling in an Irish Context

Gambling has deep cultural roots in Ireland. From horse racing and sporting events to community-based activities such as bingo or card games, it has long formed part of social interaction and local identity. For many, it remains a recreational activity enjoyed responsibly.

However, the landscape has shifted. The traditional experience of placing a bet in a physical location has increasingly been replaced by online platforms, driven by smartphone technology and digital accessibility. This evolution has brought convenience—but it has also reduced barriers to entry, increasing exposure and risk for some individuals.

While the majority of people engage in gambling without harm, a significant minority experience behaviours that can escalate into serious financial and emotional consequences. It serves as a reminder that Problem Gambling is recognized as a significant public health issue. It is a behavioural addiction characterized by persistent, uncontrollable gambling that causes harm to the individual, their family and society posing health problems, financial difficulties and social harms.

The Scale of the Challenge

Research from the Economic and Social Research Institute (ESRI) provides a clearer picture on the size of the cohort in Ireland:

- 3 percent of adults, approximately 130,000 people, are experiencing problem gambling
- A further 7 percent of adults, or 280,000 individuals, report problematic behaviours.
- There are also 15 percent, equating to around 600,000 people, who have experienced at least one negative gambling-related outcome.
- Fortunately, 75 percent of adults engage in gambling without evidence of harm.

These figures underline a critical point: while gambling is widely participated in, there is a substantial cohort for whom it presents real and escalating risks.
The impact extends far beyond the individual. Problem gambling can damage relationships, disrupt employment, place strain on finances and significantly affect mental health. It is, in many cases, a hidden issue—one that often remains unspoken until its consequences become severe and overwhelming.

Financial and Human Impact

The financial implications are stark. In Ireland, average net monthly income is c.€3,000, while those individuals who are struggling with problem gambling spend c.€1,000 per month on gambling activities. For many, this level of expenditure is simply unsustainable without reliance on additional credit or other forms of financial coping mechanisms.

This is particularly concerning in the context of ongoing cost-of-living pressures, which continue to rank among the top financial concerns for households. The IBCB undertakes an annual Éist Public Trust in Banking survey with the cost of living regularly featuring as the most pressing financial concern for consumers. The combination of financial vulnerability and gambling behaviour can create a cycle that is difficult to break without support.
The human impact is equally significant. Evidence from the Institute of Public Health has linked gambling to a number of suicide cases in Ireland, reinforcing the seriousness of this issue and the need for coordinated, accessible intervention.

A Collective Response: The Common Commitment of Care

Against this backdrop, the IBCB and its member banks came together to develop the Common Commitment of Care, which is a practical framework of measures, designed to support customers experiencing gambling-related harm. At its core, the framework ensures that every customer can expect a consistent level of support, regardless of their bank. This is delivered through six key components:

1. Dedicated Web page : Highlighting relevant background information and how individuals can seek help and support. A mainstream web page is an important step towards helping to destigmatize problem gambling.
2. Dedicated customer support, offering empathetic, non-judgemental assistance through trained help desk teams
3. Specialist staff training, front-line and call centre staff typically attended training sessions with individuals with lived in experience of problem gambling to help them better relate to customers.
4. Signposting to external support services, including organizations who provide counselling services 24/7 and debt guidance.
5. Voluntary card blocking, enabling customers to restrict gambling transactions, supported by cooling-off safeguards
6. Commitment to ongoing enhancements via technology and innovation, including the potential role of data and AI in strengthening future support

Together, these measures not only provide immediate assistance and reduce the risk of financial harm but also set out to reduce stigma and encourage earlier engagement with support services.

Pictured: Marion Kelly CEO IBCB and Minister Robert Troy at the launch in September 2025.

Early Impact and Progress

Six months on from its launch, the Common Commitment of Care is making a tangible difference. Nearly 10,000 customers have activated voluntary card blocking, demonstrating both awareness of and demand for practical tools that support behaviour change.

Feedback from customers, families and advocacy groups has been overwhelmingly positive. In some cases, individuals have described the intervention as life-changing, highlighting the real-world impact of relatively simple but well-designed support mechanisms.

The initiative has also been recognized by the Gambling Regulatory Authority of Ireland as an example of effective industry collaboration and emerging best practice.

Looking Ahead

While progress is encouraging, this remains a long-term challenge. Gambling behaviours continue to evolve, and the tools used to support customers must evolve alongside them.

The IBCB is committed to extending the principles of the Common Commitment of Care beyond its current member banks, including engagement with other financial institutions such as credit unions. There is also significant potential to harness technology and data in a responsible way to further enhance customer protections.

Ultimately, this initiative represents more than a set of interventions—it signals a shift in how the banking sector can approach customer well-being. It demonstrates that meaningful collaboration, underpinned by a shared sense of responsibility, can deliver tangible outcomes for individuals and society.

As the sector continues to rebuild trust, initiatives such as this play a critical role in showing that banks can be proactive partners in addressing complex social issues—supporting customers not only in managing their finances, but in navigating the challenges that can impact their lives more broadly.

Towards a stronger protection of the public: the evolving role of the Netherlands Gambling Authority

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Kansspelautoriteit / Netherlands Gambling Authority

"Preventing gambling harm means recognizing early signals and protecting people before gambling contributes to serious financial, social and health-related problems"

Introduction

In recent years, gambling has increasingly been recognized as a public health issue rather than solely a matter of individual responsibility. In the Netherlands, this shift has become particularly visible following the regulation of the online gambling market in 2021, which has both expanded access and exposed the scale of gambling harms. As risks have become more evident, expectations of the Netherlands Gambling Authority have evolved accordingly. This article examines how the Authority is strengthening its role in protecting the public, moving towards a more proactive and prevention-oriented approach to reducing gambling harm.

The scale and nature of gambling harms in the Netherlands

In 2024 there were 2,700 people in treatment for gambling harms (Ladis , 2024), but this is just the tip of the iceberg. In the same year there were 179,000 people at high risk of problem gambling, 326,000 people at moderate risk and 756,000 people at low risk of gambling harms. With 5.1 million people who gamble in the Netherlands (excluding lotteries) one in four people who gamble belong to a risk group. For people who gamble online this is one in three and with young adults it is almost half (Ipsos I&O, 2024).

From individual responsibility to a public health approach

The Lancet Public Health Commission on gambling states that gambling is a public health issue and governments should prioritize protecting health and well-being over competing economic motivations. The Commission also states that, from this perspective, universal measures as well as selective and targeted interventions in high-risk areas, are needed to prevent and reduce harm (Wardle, Degenhardt, Marionneau, & al., 2024). The Netherlands Gambling Authority is trying to do just that. In addition to its ongoing regulatory activities, the Gambling Authority is continuously assessing how improvements can be made, for example on the duty of care and the disruption of the infrastructure of illegal gambling platforms. Player protection is at the heart of the organization and informing the public and preventing gambling harm is one of its main tasks.

Gambling harms are not a matter of personal choice. Gambling products are not neutral environments but are deliberately designed to maximize engagement and prolong play. Features appeal to automatic psychological responses rather than deliberate, rational decision-making. This means that, while personal responsibility remains relevant, the capacity to make fully informed and controlled choices is inherently constrained by the design of the gambling environment. The gambling system, however, is still largely based on the responsibility of the person who gambles. In the player interface people can set their own limits. There are measures that offer some protection. For example, there is a 7-day waiting period after increasing gambling limits. The Gambling Authority introduced a policy rule in 2024 and set

a net deposit limit (€300 for young people and €700 for others). The effects are being monitored and people are losing less money. Despite the net deposit limit people can still lose more money than they can afford, especially those with lower incomes, smaller saving buffers and lower financial resilience. 91 percent of people who gamble do so exclusively on legal gambling platforms (Kansspelautoriteit, 2026). That's why duty of care is so important in reducing gambling harm and debt, but it should not be left solely to gambling operators.

Addressing the illegal market: from enforcement to ecosystem disruption

In terms of GGR (Gross Gambling Revenue), the size of the legal market is estimated at 53 percent. This suggests that people who gamble at illegal gambling platforms experience significantly higher losses than those who gamble on legal platforms (Kansspelautoriteit, 2026). It is difficult to take illegal websites offline, because the Gambling Authority is not legally empowered to take swift action in this regard. That is why the Gambling Authority has established an alliance with, among others, affiliates, tech companies and financial institutions to work together on disrupting the ecosystem and infrastructure of illegal gambling platforms.

Expanding player protection beyond regulation

Player protection forms a key pillar of the organization's work. The Gambling Authority administers the Addiction Prevention Fund, from which a large number of projects and studies are funded and organized. Gambling harms affect people who gamble, those around them and society as a whole (Wardle, Degenhardt, Marionneau, & al., 2024). These harms can manifest itself in various areas of life, including financial resources, physical and mental health, and social relationships (Trimbos Instituut, 2025). People need to be reached in ways appropriate to different target groups. The nationwide platform OpenOverGokken (translated as: Open About Gambling) was developed to inform the public about the risks of gambling. On this platform, people who are interested in gambling, people who gamble as well as those around them can find information, advice and help. They can contact accessible support helplines via OpenOverGokken. From 2027 onwards OpenOverGokken will be the central channel for all campaigns aimed at raising public awareness of gambling.

The Gambling Authority coordinates the self-exclusion register, which will soon be offered in combination with free blocking software. In this way people can exclude themselves from both legal and illegal gambling platforms.
Together with other organizations, implementing interventions, the Gambling Authority aims to reach target groups via education, municipalities, football clubs and employers.

Early detection as a key strategy

In addition to directly reaching the public and specific target groups, the Gambling Authority also seeks to support professionals. The Trimbos Institute, an independent Dutch research institute focused on mental health, substance use and addiction, has established a Centre of Expertise on Gambling. It aims to enhance scientific knowledge on the prevention of gambling harms.
The Trimbos institute, together with health prevention organizations and a debt support organization, has created a partnership for early detection of gambling harms. Gambling problems are often identified at a late stage, resulting in problems escalating. Early detection of gambling problems and harms by professionals is therefore crucial.
In addition to these large projects, an e-learning course has been developed to support professionals in addressing gambling problems and a multidisciplinary treatment guideline on behavioural addictions such as gaming and gambling is being developed.

Protecting vulnerable groups: young people and minors

Groups that deserve special attention in relation to gambling harms are young people and minors. Young people represent a vulnerable group due to a combination of factors, including ongoing development of impulse control and increased sensitivity to rewards and short-term gains (Nigro, Cosenza, & Ciccarelli, 2017) (Cosenza, Ciccarelli, Griffiths, & al, 2016). Although minors are not allowed to gamble, they are exposed to online gambling ads and content, streamers and gambling-like elements in games. It is important that parents and education professionals are aware that gambling is an issue and understand the associated risks. They need to recognise the warning signs and know what to do when students gamble. The educational programme Helder op School (translated as: Clear minds at school), developed

[1] *A self-exclusion register is a system that allows people to voluntary ban themselves from accessing legal gambling services for a set period to help manage or prevent gambling harm.*

by the Trimbos Institute, provides guidance for parents and education professionals on recognising signals, starting conversations, and finding appropriate support. It is important to realise that, although it may sometimes seem so, not all students gamble according to statistics. Therefore, although it may be tempting, the Trimbos Institute advises caution with direct awareness-raising and education on gambling for students. This is to avoid contributing to the normalisation of gambling. This also applies to financial education related to gambling.

Conclusion

The scale of gambling harms in the Netherlands highlights a complex and growing public health challenge. At the same time, it is clear that the Netherlands Gambling Authority has significantly strengthened its role in recent years in addressing these risks. Since the regulation of the online gambling market, player protection has become a central pillar of its work, reflected in measures such as deposit limits, enhancing duty-of-care requirements, active monitoring of both legal and illegal gambling markets and a focus on public information, awareness-raising, and prevention initiatives aimed at reducing gambling harms.

The Gambling Authority does not act in isolation. Through collaboration with research institutes, health organizations and other relevant organizations, it is helping to build a more coordinated and evidence-based prevention system. Initiatives such as OpenOverGokken, the self-exclusion register in combination with blocking software, the partnership for early detection of gambling harms and professional training demonstrate a growing focus on accessibility, prevention and early intervention.

Challenges remain, particularly in reaching high-risk groups and tackling the illegal market. However, the Gambling Authority is increasingly moving from a reactive regulator towards a proactive organization that prioritizes harm prevention and public health.

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