



EUROPEAN ASSOCIATION FOR THE STUDY OF GAMBLING

THE ADDICTIVE POTENTIAL OF SPORTS BETTING EMPIRICAL DATA FROM A GERMAN TREATMENT- SEEKING POPULATION

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(1) Sports betting - The current market situation in Germany

- Formally, the sports betting market in Germany is operated as a **monopoly** by the state government
- Legalised commercial sports betting is supplied by the **German lotto pool** (“Deutscher Lotto- und Totoblock“) which offers games such as sports pool betting (“**Toto**“) and - since 1999 - sports betting with fixed odds (“**ODDSET**“)
- Some **private agencies** obtained betting licenses and thus were also allowed to offer sports betting with fixed odds
- In addition, sports betting agencies without a license for the German territory opened local sports betting offices in order to accept bets and transfer them to their **head offices located overseas**



competition between state-run and private operators



(2a) The addictive potential of sports betting - Selective international evidence

Study	Sample	Findings
Griffiths et al. (1999) United Kingdom	1.644 callers of a gambling helpline	37% mentioned „off-course betting“ as a problematic gambling form
Petry (2003) USA	331 treatment-seeking pathological gamblers	9% wagered most problematically on outcomes of sporting events
Rush et al. (2002) Canada	1.197 people seeking treatment at specialised problem gambling treatment programs	20% identified sports betting as a problem gambling activity
Künzi et al. (2004) Switzerland	250 questionnaires sent out to counselling services	for 2% sports pool betting constituted a problem



(2b) The addictive potential of sports betting - Summarising international evidence

- Sports betting with fixed odds is more attractive than sports pool betting, and thus its addictive potential seems to be higher
- The greater the **availability** of legal and/or illegal sports betting products, the more gamblers with problematic sports betting behaviour are seeking treatment



(3) Objectives of the study

- (I) Does the introduction of sports betting with fixed odds lead to help-seeking behaviour in Germany?
- (II) Is sports betting rather a primary or a secondary problematic gambling behaviour?
- (III) What are the main characteristics of problem sports bettors?
- (IV) Do problem sports bettors seek more stimulation while developing gambling problems?





(4) Research design

Level	Sample	Measures	Period of time
1	Gamblers from inpatient and outpatient counselling or treatment services in North Rhine-Westphalia	Self-developed "Short Questionnaire of Gambling" (K-F)	01.06.2002 – 30.09.2004
2	Self-identified problem gamblers who indicated their sports betting behaviour as problematic (from level 1 and self-help groups)	Self-developed "Long Questionnaire of Sports Betting" (F-PS)	01.06.2002 – 31.01.2005
3	A subsample of problem sports bettors	Semi-structured interviews	01.08.2003 – 31.01.2005



(5) Instruments

Level	Instrument	Components
1	“Short Questionnaire of Gambling“ (K-F)	<ul style="list-style-type: none"> ▪ Gambling participation/frequency in the last 12 months <ul style="list-style-type: none"> ▪ Gambled for the first time ▪ Problematic gambling forms ▪ Socio-demographic variables
2	“Long Questionnaire of Sports Betting“ (F-PS)	<ul style="list-style-type: none"> ▪ Sports betting experiences and behaviour patterns <ul style="list-style-type: none"> ▪ Motivational and emotional aspects ▪ Cognitive aspects (modified version of the “GABS“; Breen & Zuckerman, 1999) <ul style="list-style-type: none"> ▪ Symptoms of pathological sports betting (DSM-IV criteria adapted to sports betting: Stinchfield, 2002; “KFG“ adapted to sports betting: Petry, 1996) ▪ Internal and external locus of control (Krampen, 1996) <ul style="list-style-type: none"> ▪ Socio-demographic variables
3	Semi-structured interviews	<ul style="list-style-type: none"> ▪ Interview contents and questions were pre-structured



(6) Results - Level 1 Sample

	Finally participating	Return of analysable questionnaires
Specialised health care services (outpatient)	3	130 (27%)
Other outpatient counselling/treatment services	38	303 (62%)
Inpatient treatment services	3	56 (11%)
	44	489 (100%)

- 90% male
- 16-74 years old (mean=38 years, sd=10 years)
- 79% considered 1 or 2 gambling forms as problematic



(7) Results - Level 1 Problematic gambling forms

Gambling form	Experienced as a problem (“yes“) (multiple nominations possible)
Gaming machines (pubs, amusement arcades)	79.3% (376 of 474)
Slot machines (casinos)	32.4% (148 of 457)
Roulette/Black Jack	16.8% (76 of 452)
Playing cards/dices for money	15.9% (72 of 452)
“ODDSET“	10.0% (45 of 450)
Lotto 6/49	6.0% (28 of 469)
Private betting shops ¹	5.1% (23 of 448)
“Toto“ (sports pool betting)	2.2% (10 of 446)

¹During the period of data collection, far less private betting shops were available compared to sales agencies for “ODDSET“



(8) Results - Level 1

Current gambling behaviour and problematic gambling forms

Gambling form	Participated in the last year (once/month) (n)	Experienced as a problem ("yes") (%)
Gaming machines (pubs, amusement arcades)	387	92.0
Lotto 6/49	253	11.1
Slot machines (casinos)	152	84.2
Playing cards/dices for money	118	51.7
"ODDSET"	110	39.1
Roulette/Black Jack	85	77.6
"Toto" (sports pool betting)	50	10.0
Private betting shops	44	47.7



(9) Results - Level 1

Problematic gambling forms: Rank order

	Rank 1	Rank 2	Rank 3	Rank 4	Rank 5	Rank 6	Total (n)
Gaming machines (pubs, amusement arcades)	296	31	10	4	1	---	342
Slot machines (casinos)	63	34	11	5	---	2	115
Roulette/Black Jack	29	25	11	2	3	---	70
Playing cards/dices for money	8	25	18	12	3	1	67
“ODDSET“	13	19	13	3	1	1	50
Lotto 6/49	4	13	5	5	2	1	30
Private betting shops	8	3	6	---	---	1	18
“Toto“ (sports pool betting)	---	2	4	1	3	1	11
Other gambling forms	45	34	19	16	6	5	
Total (n)	466	186	97	48	19	12	



(10) Results - Level 2

Sample characteristics

	Sports betting with fixed odds as a problem
n	20 (4 gamblers from self-help groups)
Gender	100% male
Age	19-49 years old (mean=36 years, sd=9 years)
Nationality	19 German 1 Turkish
Income	€ 500-1.000: 5 € 1.000-1.500: 7 € 1.500-2.000: 5 more than € 2.500: 3



(11a) Results - Level 2

Symptoms of pathological sports betting

Diagnostic criteria (life-span)	Sports bettors (n=20)
A ₁ : Preoccupation: Spent a lot of time thinking about betting	18 of 19 (95%)
A ₂ : Preoccupation: Frequently thought of ways to get money	13 of 20 (65%)
B ₁ : Tolerance: Needed to bet more often	9 of 20 (45%)
B ₂ : Tolerance: Needed to bet with larger amounts of money	6 of 20 (30%)
C ₁ : Tried to cut down or control his/her betting and found it difficult	15 of 20 (75%)
C ₂ : Tried to stop his/her betting unsuccessfully	13 of 19 (68%)
D ₁ : Withdrawal: Felt restless or irritable after trying to stop betting	11 of 18 (61%)
E ₁ : Betting as a way to escape problems	9 of 20 (45%)
E ₂ : Betting as a means to relieve uncomfortable emotions	11 of 20 (55%)



(11b) Results - Level 2

Symptoms of pathological sports betting

Diagnostic criteria DSM-IV (life-span)	Sports bettors (n=20)
F ₁ : "Chasing" one's losses when losing money	19 of 20 (95%)
F ₂ : "Chasing" one's losses when having large betting debts	17 of 20 (85%)
G ₁ : Lied to significant others about his/her betting	15 of 20 (75%)
G ₂ : Tried to hide betting from others	16 of 20 (80%)
H ₁ : Illegal acts – Forged a check or stole something in order to bet	6 of 19 (32%)
H ₂ : Illegal acts – Embezzlement/fraud to support betting habit	8 of 19 (42%)
I ₁ : Betting caused problems in social relationships	17 of 20 (85%)
I ₂ : Missed work, school or important social activities because of betting	12 of 20 (60%)
J ₁ : Wanted to borrow money because of financial problems due to betting	16 of 20 (80%)
J ₂ : "Bail-out" (other people paid his/her betting debts)	11 of 20 (55%)



(12a) Selection of results - Level 2 and 3

- 18 of 20 self-identified problem sports bettors could be classified as **pathological sports bettors** according to DSM-IV criteria;
- Most **significant symptoms** of problem sports betting are preoccupation, “chasing behaviour“, lying to conceal the extent of involvement in sports betting
- **Intense emotional reactions** are evident in case of losses, in case of winnings as well as independent of the outcome
- **Socio-demographic variables, cognitive biases, and an overwhelming interest in sporting events** seem to be most important for the development and maintenance of problematic sports betting behaviour



(12b) Selection of results - Level 2 and 3

- In contrast to sports pool betting there are greater **gambling incentives** in sports betting with fixed odds (e.g., the possibility of individual-odds betting, the higher likelihood of winning, variable stake sizes, wide range of betting options, high event frequency)
- These structural characteristics have implications for the bettors' motivation by **reinforcing their betting activities** and **satisfying their particular needs**
- The findings suggest three different **developmental pathways**:
 - problem sports bettors who begin betting with “ODDSET” and then change over to private betting offices
 - problem sports bettors who solely place their bets with “ODDSET”
 - problem sports bettors who indiscriminately realise every betting opportunity



(13) Conclusions and implications



- ✓ A small but significant number of gamblers within a German treatment-seeking population denominates sports betting with fixed odds as the “primary gambling problem”
- ✓ Empirical findings as well as theoretical considerations suggest that sports betting with fixed odds can be viewed as a “hard” form of gambling
- ✓ The tentative profile of pathological sports bettors accentuates that they place bets in order to change their level of arousal (seeking excitement) rather than to escape from stressful life events
- ✓ Sports betting with fixed odds offered via local betting offices and the internet represent one of the major challenges for the prevention of problem gambling



Thank you for your attention!



Tobias Hayer & Gerhard Meyer