Gambling Availability and Advertising in Canada

Focus on Youth and Young Adults





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Presented by

Greo Evidence Insights

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The Partnership Symposium 2025





About Us

Greo Evidence Insights is a Canadian, independent, notfor profit organization that has been working in gambling research and harm reduction for over 20 years.



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Conflicts of Interest

No conflicts of interest to declare



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Presentation Goals

- Describe how recent changes to the availability and advertising of gambling in Canada may be a concern to public health, particularly youth and young adults
- Describe what should be done to mitigate these harms.

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Recent policy changes have led to increased gambling availability and advertising

Recent Policy Changes

- June 22, 2021, the Canadian Senate approved Bill C-218 (the Safe and Regulated Sports Betting Act) which gives provinces and territories discretion to conduct and manage single-event sports betting within their jurisdictions
- In April 2022, the Ontario market was opened to large,
 private, international gambling corporations

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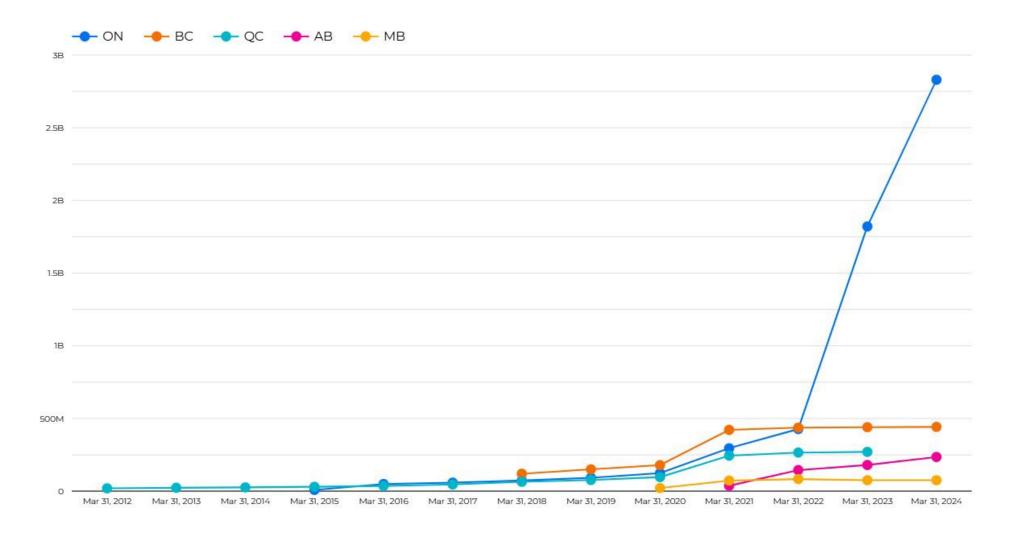
As a result of these changes

- More gambling advertising
 - 48% of Canadians agree that volume of gambling advertising is excessive and should be cut back¹
- More gambling participation
 - Amount wagered on online sites registered in Ontario:
 - FY 2022-23: \$35.5 billion
 - FY 2023-24: \$63 billion
 - Total amount wagered by Ontarians increased more than 300% from \$4.08 billion in Q1 (2022-23) to \$17.8 billion in Q4 (2023-24)²

1 https://www.ipsos.com/en-ca/how-much-too-much-nearly-half-canadians-think-gambling-ads-have-gotten-out-hand 2 https://igamingontario.ca

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Online gambling net revenue by province



Is it simply a shift from illegal to legal market?

- Best estimate from before market liberalization → 1.5% of Ontarians participated in illegal online gambling¹
 - This is equivalent to 165,560 people living in Ontario in 2018
- In its first year, \$35.5 billion was wagered.
- If this \$35.5 billion was simply a shift from illegal to legal (market capture), then each person would have been spending more than \$200,000/year
- This does not seem plausible

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¹ Mackey-Simpkin, S., Williams, R. J., Shaw, C. A., & Russell, G. E. H. (2023). Prevalence and predictors of illegal gambling in Canada. International Gambling Studies, 23(3), 387–402. https://doi.org/10.1080/14459795.2022.2149833

Concerns

Concerns

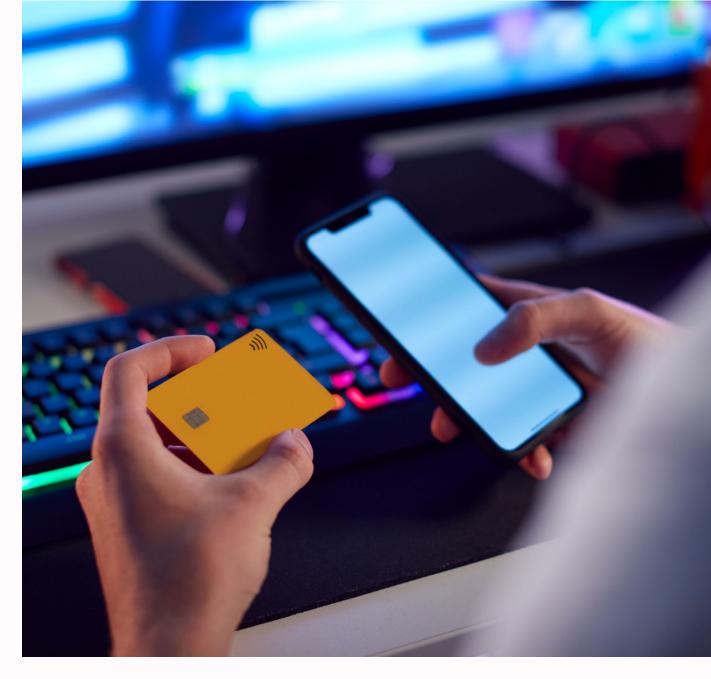
- There is a potential for **increased gambling** participation and increased gambling-related harm;
- The **types of gambling being promoted** (online and sports betting) are associated with greater risk of harm;
- The **"normalization" of gambling** leads to gambling being seen as healthy, "normal" behaviour that "everybody" engages in; and
- Impacts on **youth and young adults.**



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Increased Gambling Participation

Gambling on apps available in the palm of your hand 24 hours a day, 7 days a week



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Increased Gambling Participation

The greater a person's gambling participation, the more likely they are to experience gambling harm.

Table 4. Change in risk from reference group (i.e., <=0.1%) occurring when gambling expenditure (%) per month predicts financial, relationship, emotional and psychological, and health harms (N=59,099)

	≤0.1%	0.11 to 0.50	0.51 to 1.00	1.1 to 2.0	2.1 to 3.0	3.1 to 4.0	4.1 to 5.0	5.1 or more
Sample size in category	17,634	15,926	7,708	6,250	2,988	1,700	1,082	5,811
HARM								
Financial								
Sample reporting harm (n)	335	535	429	507	337	221	144	1,510
% reporting harm	1.9%	3.4%	5.6%	8.1%	11.3%	13.0%	13.3%	26.0%
Risk relative to reference group		1.8X	3.0X	4.3X	5.9X	6.8X	7.0X	13.7>
Relationship								
Sample reporting harm (n)	173	249	207	287	178	129	99	1,045
% reporting harm	1.0%	1.6%	2.7%	4.6%	6.0%	7.6%	9.1%	18.0%
Risk relative to reference group		1.6X	2.7X	4.7X	6.1X	7.7X	9.3X	18.3×
Emotional/psychological								
Sample reporting harm (n)	441	638	460	616	374	250	178	1,551
% reporting harm	2.5%	4.0%	6.0%	9.9%	12.5%	14.7%	16.5%	26.7%
Risk relative to reference group		1.6X		3.9X	5.0X	5.9X	6.6X	10.7>
Health problems								
Sample reporting harm (n)	142	221	157	219	133	87	76	776
% reporting harm	0.8%	1.4%	2.0%	3.5%	4.5%	5.1%	7.0%	13.4%
Risk relative to reference group		1.6X	2.5X	4.4X	5.5X	6.4X	8.7X	16.6



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Increased Gambling Participation

Like alcohol, growing evidence of a reliable association between the total consumption in the population and the level of harm within that population.



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2

Type of Gambling Promoted

In-play sports betting and online gambling are faster with frequent betting

- Previously, bets were made on a set of outcomes (parlay)
- Now, bets can be made on who wins the coin toss, the next faceoff, first penalty, etc.



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WHEN GAMBLING, WHAT YOU PLAY MATTERS

GREATER RISK





Some types of gambling, such as electronic gaming machines or online poker, are faster paced, involve frequent betting and encourage you to play more often and for longer periods of time, and to spend more money.

LESS RISK





Other types of gambling, such as lottery tickets, are slower paced, less intense and involve less spending. For example, someone might buy a ticket weekly or monthly.



LRGG

Lower-Risk Gambling Guidelines

WHEN YOU GAMBLE,

think about the type of game you're playing. The choices you make can make it easier or harder to stick to Canada's Lower-Risk Gambling Guidelines.



EFFECT SIZES FOR PROBLEM GAMBLING RISK FACTORS

Internet gambling EGM and slot machines (excluding casino) EGM and slot machines (including casino) Poker Gambling Activity

Psychosocial

Substance Use

Socio-Demographic

Medium E	Effect Size			
Attempted suicide	Games of skill			
Casino table games	EGM and slot machines (casino only)			
Cardrooms				
Daily lottery	Ever been incarcerated			
Problems due to alcohol/drugs	Horse, harness, or greyhound			
Keno	races			
Problems due to alcohol	Internalizing symptoms			
Casino gambling (EGM, slots,	Depression issues			
table games)	Illicit drug use			
Suicidal thoughts	Daily tobacco use			
Card games	Ever been arrested or detained			
Pulltabs	Any mental health problem			
Pari-mutual (sports/races)	Sports select			
Cocaine use	Binge drinking			
Sports (all)	Marijuana use			
Anxiety issues	Private betting: card/board games with friends/family			
Family member ever had a				
gambling problem	Bingo			

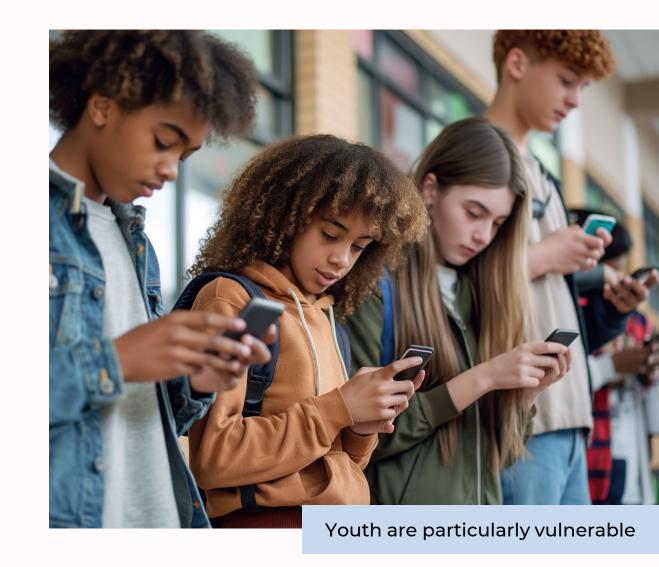
Small Effect Size				
Sports pools				
Instant win/scratch				
Sports events				
Poor physical health				
Out-of-province casino				
Ethnicity				
Age				
Ever filed bankruptcy				
Gender				
All lottery games (weekly, pulltab, instant)				
Marital status				
Education				

3

Normalization Of Gambling

Sports betting promotes the normalization of gambling – part of being a "good fan"

- Sports are considered an important, healthy activity by most cultures
- Repeatedly pairing sports with sports betting → gambling on sports integral part of sport and a healthy, "normal" behaviour



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4

Impact on Young People

- Youth are widely exposed to gambling ads, especially during sports broadcasts and on social media, despite regulations prohibiting targeted advertising to minors.
- Young people are particularly vulnerable to advertising due to impulsivity, lower self-control, and difficulty distinguishing between promotional and informational content.¹
- Sports betting ads often target young men, promoting gambling as a marker of masculinity, expertise, and loyalty—shaping positive attitudes and motivation to gamble.²
- Early exposure to gambling ads is linked to earlier gambling onset and greater risk of harm, highlighting the need for national advertising standards to protect Canadian youth.³

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^{1.} Pechmann, C., Levine, L., Loughlin, S., & Leslie, F. (2005). Impulsive and self-conscious: Adolescents' vulnerability to advertising and promotion. Journal of Public Policy & Marketing, 24(2), 202-221. https://doi.org/10.1509/jppm.2005.24.2.202; Sandberg, H., Gidlof, K., & Holmberg, N. (2011). Children's exposure to and perceptions of online advertising. International Journal of Communication, 5, 21–50. https://ijoc.org/index.php/ijoc/article/view/716/502

Lopez-Gonzalez, H., Estévez, A., & Griffiths, M. D. (2018). Controlling the illusion of control: A grounded theory of sports betting advertising in the UK. International Gambling Studies, 18(1), 39–55. https://doi.org/10.1080/14459795.2017.1377747; Jones, C. M., & Noel, B. (2021). Skin in the game — Erroneous beliefs and emotional involvement as correlates of athletes' sports betting behavior and problems. Journal of Behavioral Addictions, 10(3), 412–421. https://doi.org/10.1556/2006.2021.00034.

Gupta, R., & Derevensky, J. L. (1998). Adolescent gambling behavior: A prevalence study and examination of the correlates associated with problem gambling. Journal of Gambling Studies, 14, 319–345. https://doi.org/10.1023/a:1023068925328; Volberg, R., Gupta, R., Griffiths, M. D., Olason, D. T., & Delfabbro, P. (2010). An international perspective on youth gambling prevalence studies. International Journal of Adolescent Medicine and Health, 22(1), 3–38. https://pubmed.ncbi.nlm.nih.gov/20491416/

Impact of Recent Policy Changes on Adults and Youth

Impact of Policy Changes

We do not really know

- Last comprehensive national survey was in 2018
- Gambling and problem gambling was decreasing

Currently no systematic monitoring and surveillance of gambling-related harm in Canada

- Gambling-related bankruptcy
- Gambling-related divorce
- Gambling-involved suicide
- Problem gambling treatment demand
- Gambling-related crime

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Journal of Gambling Studies (2024) 40:705-715 https://doi.org/10.1007/s10899-023-10268-1

ORIGINAL PAPER



Brief Report: The Rise of Online Betting in Ontario

Nigel E. Turner^{1,2} - Lindsay Sinclair^{3,4} - Flora I. Matheson^{5,6}

Accepted: 15 November 2023 / Published online: 13 December 2023 © The Author(s) 2023

Abstract

In this paper we examine the nature of calls for the Ontario Problem Gambling Helpline from June 2021 to Jan 2023 to determine if the increased marketing of online and sports gambling has changed the nature of calls to the helpline. An interrupted time series model comparing the monthly calls before and after the expansion of online gambling and advertising (April 2023), found a significant effect. Calls related to the other games examined did not have a significant interrupted time series effect of from the expansion and advertising of online gambling. The results of this analysis clearly indicate an association between the expansion of legalized gambling and gambling advertising with the number of people who call the helpline for problem related to online gambling.

Keywords Helpline data · Crisis calls · Sports gambling · Online gambling · Time series analysis

Calls to Ontario Problem Gambling Helpline

Turner et al., 2023

Limited data suggest increased availability and advertising is having a negative impact on population health

 Number of people calling Ontario
 Problem Gambling Helpline has increased significantly since 2021.

Turner, N. E., Sinclair, L., & Matheson, F. I. (2023). Brief report: The rise of online betting in Ontario. Journal of Gambling Studies. https://doi.org/10.1007/s10899-023-10268-1

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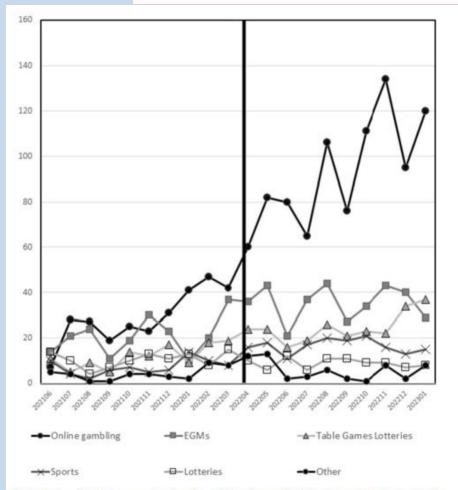


Fig. 1 Number of calls per game type from June 2021 to January 2023. The change in legislation is indicated by the solid vertical bar, April 2022

Helpline Calls

Turner et al., 2023

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The need for a pan-Canadian strategy to address gambling-related harms

National Strategy to Address Gambling-Related Harms



Ordinary Commodities?



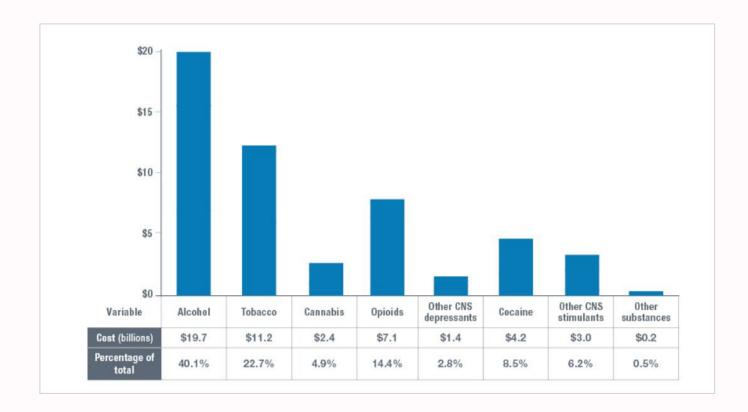


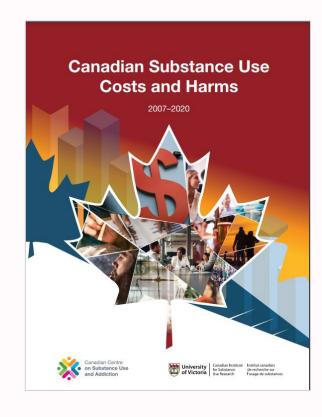




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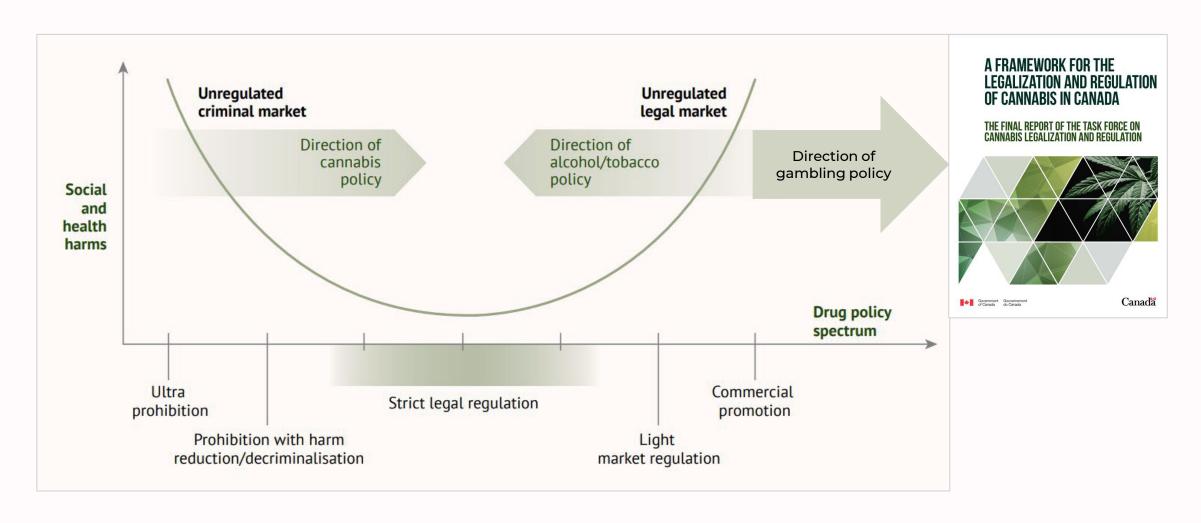
Legal substances are responsible for greatest costs to society





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Regulation/control vs Social and Health Harms



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The advantage of state monopolies





WEBINAR OVERVIEW Alcohol monopolies: what does it take for alcohol monopolies to work?

18 October 2023 | 13:00-14:00 CET

Background

There is solid and compelling evidence that alcohol monopolies hold significant advantages for public health and welfare by way of limiting the availability of alcohol (1-3). An alcohol monopoly is a government-controlled system for all or a segment of the alcohol supply chain (i.e., import, production, distribution, sales and/or export of alcohol) (1, 4). Retail alcohol monopolies are widespread and implemented in varied ways for distilled spirits, beer and/or wine (1).

Despite their known advantages, alcohol monopolies are somewhat of a unicorn among alcohol policy interventions actively implemented. Monopoly systems are found in only a handful of contexts. This includes most prominently the Nordic area (Sweden, Norway, Finland, Iceland, and the Faroe Islands), where the model of monopolies implemented serves as the backbone of their alcohol control This webinar sets out to spotlight alcohol monopolies policies for the betterment of public health. Other contexts with varied models of monopoly systems include the United States of America and Canada (2, 5). Each context has taken a tailored approach to design its monopoly systems through state-owned retailers like Alko in Finland (6), Systembolaget in Sweden (7), or jurisdiction-specific liquor corporations in Canada like the Liquor Control Board of Ontario. The regulation of retailers in this way enables the use of other mechanisms, such as restrictions on opening hours, bans on advertising, and the strict enforcement of age limits (3).

Alcohol retail monopolies evolve over time. There has been a tendency towards increased private ownership of retail locations, either entirely or through the gradual increase in the share of private retailers (i.e., grocery stores) for beer and/or wine sales (8, 9). There is also growing pressure to introduce other changes, such as to allow alcohol sales via the Internet. Advocates of these changes present them as seemingly minor exceptions. However, these changes ultimately risk eroding the unique advantages of an alcohol monopoly (2).

The consequences of deviating from a true monopoly system are well-studied. The evidence suggests the continued public ownership of alcohol retail systems leads to substantial improvements in population health and reduced economic costs (8, 10, 11). In contrast, deregulating the alcohol market risks considerable increases in the selling points for alcohol and, ultimately, increasing economic burdens on healthcare and criminal justice systems, among other known consequences of increasing the accessibility of alcohol. Novel modelling and scenario forecasting have also been used to quantify these effects, demonstrating increases in sales volume, alcohol use per capita, and increased hospital admissions and deaths (e.g., 2, 8, 12).

About the webinar

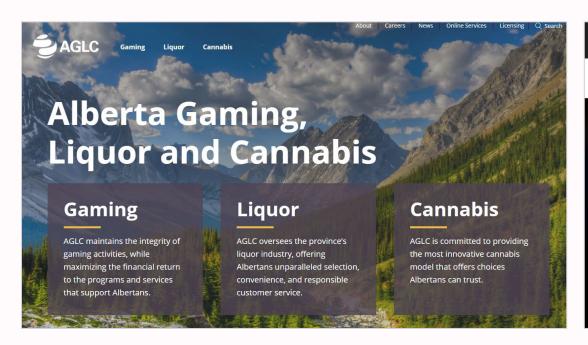
and the contemporary challenges they must overcome to ensure these systems remain fit for purpose. It continues the dialogue initiated earlier in the Less Alcohol Webinar Series on restricting alcohol availability and alcohol consumption and socioeconomic inequalities. Leading experts on alcohol monopolies will share the best available evidence and discuss these systems in different contexts, including Canada, Finland, Sweden and other Nordic countries, We will discuss the threats monopolies face at present and ultimately reflect on the global mechanisms, including the 2030 Sustainable Development Agenda (13) and global action plan on alcohol (14), that can support countries in their continued implementation of alcohol monopoly

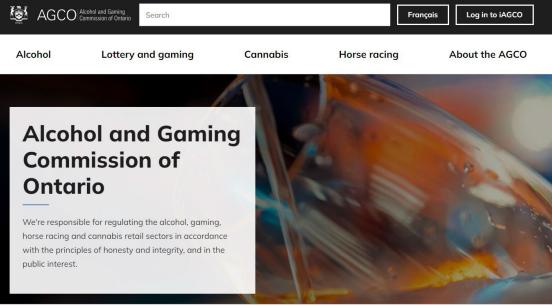
What do we aim to achieve?

This webinar aims to raise awareness of the unique advantages of alcohol monopolies, highlight the latest scientific evidence, and create a platform for discussing the future of monopoly systems.

Slide 30 of 50 greo.ca

Ordinary Commodities?







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National Strategies?



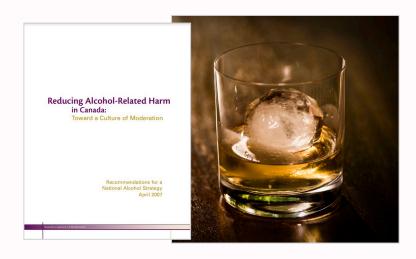




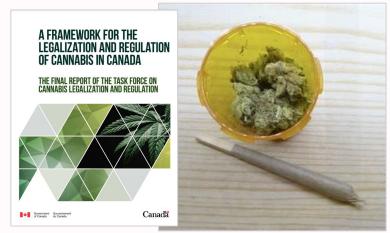


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National Strategies?











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National codes or advertising acts?







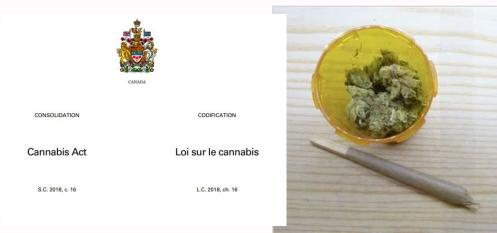


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National codes or advertising acts?









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What can be done?

- The need for national standards governing the promotion and availability of gambling
 - Unlike alcohol, tobacco, and cannabis there are no Canadian national standards or regulations governing gambling advertising these are particularly needed to protect youth
 - Advertisements spill across Province / Territory borders
 - Gambling products that are be legal in Ontario or Alberta may not be legal (i.e., grey market) for people in other P/T who are seeing advertisements for those products
 - Solutions to this problem will not be easy but must be addressed other countries have started to ban or severely limit gambling advertising

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- Problematic conflicts of interest among gambling stakeholders
 - The gambling industry is wealthy and powerful
 - Others also profit from gambling, such as:
 - Sports industry
 - Tech companies and affiliates
 - Media companies
 - Provincial & Territorial governments

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- Inadequate funding for gambling harm prevention and reduction initiatives and research across jurisdictions
 - Responsibility for gambling harm prevention/reduction has largely been left to gambling operators, i.e.,
 - Crown lottery corporations
 - Private operators licensed to offer online gambling and sports betting in Ontario
 - There are currently few sources of funding for gambling research in Canada

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- 4
- The absence of any systematic monitoring of changes in gambling-related harm, including any assessments of the social and economic costs of gambling.
- Need for a more comprehensive monitoring and surveillance system to assess and report on gambling-related harm
- We have no estimates of the health and social costs of gambling as we have for hazardous products such as alcohol, tobacco and cannabis

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Conclusions

- Recent federal and provincial policy changes have resulted in increased gambling availability and advertising in Canada
- We can expect well-funded lobby groups to be pressuring other provincial and territorial governments to follow Ontario's lead and liberalize their gambling markets



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Conclusions

- As with other unhealthy commodities (alcohol, cannabis), evidence suggests that increased participation will likely be associated with increased harm
- Youth and young adults are likely to be harmed
- We do not currently have the ability to detect gambling-related harm if it happens or a strategy to manage it when it does



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Questions and Comments

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Thank you!

