



LOTTERIES AND GAMING  
REGULATORY BOARD  
Responsible Gaming

# Socioeconomic and Health Effects of Gambling, and Drivers of Problem Gambling in Uganda

**PREPARED BY**

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This was a National Research on Key Drivers of Problem Gambling, Socioeconomic and Health Effects of Gambling In Uganda

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## TABLE OF CONTENTS

ABBREVIATIONS AND ACRONYMS	vii
KEY DEFINITIONS	viii
EXECUTIVE SUMMARY	ix
1.0 INTRODUCTION	1
1.1 Background and Overview of LGRB	1
1.2 Overview of Uganda’s Gambling Industry	1
1.3 Socioeconomic Effects of Gambling	1
1.4 Health Effects of Gambling	2
1.5 Drivers of Problem Gambling	3
1.6 Government Interventions in Uganda	4
1.7 Study Objectives	5
1.7.1 General Objective	5
1.7.2 Specific Objectives	5
1.8 Significance of the Study	5
1.9 Structure of the Report	6
2.0 RESEARCH PROCESS AND METHODS	7
2.1 Research Process	7
2.2 Research Methods	8
2.2.1 Quantitative Survey	8
2.2.2 Qualitative Interviews	8
2.3 Research Framework	9
2.3.1 Assessment Framework for Socioeconomic and Health Effects of Gambling	9
2.3.2 Assessment Framework for Factors Associated with Problem Gambling	10
2.4 Problem Gambling and Its Associated Factors	11
2.5 Data Quality and Ethical Compliance	11
2.6 Study Strength and Limitations	11
3. RESEARCH FINDINGS	13
3.1 Demographics of Gamblers	13
3.2 Gambling Participation	15
3.2.1 Type of Gambling Activities	15
3.2.2 Distance to Gambling Outlet and Gambling Time	15
3.2.3 Frequency of Participation and Mode of Gambling	16
3.2.4 Number of Years in Gambling and Age-At-Start of Gambling	17
3.2.5 Gambling Status of Familial sources of money for gambling	18
3.3 Reasons for Gambling	18
3.4 Socioeconomic Impact of Gambling	20
3.4.1 General Impact of Gambling	20
3.4.2 Impact of Gambling on Gamblers	21
3.4.3 Impact of Gambling on Families	22
3.4.4 Impact of Gambling on Communities	23
3.5 Health Impact of Gambling	24
3.5.1 General Health Status of Gamblers	24

3.5.2 Impact on Physical and Mental Health-----	25
3.5.3 Substance Abuse-----	26
3.5.4 Suicide Thoughts, Plans and Attempts -----	27
3.6 Problem Gambling -----	28
3.6.1 Gamblers Anonymous Questionnaire and Responses -----	28
3.6.2 Prevalence of Problem Gambling-----	29
3.7 Factors Associated with Problem Gambling -----	30
3.7.1 Bivariate analysis of factors associated with problem gambling. -----	30
3.7.2 Multivariate Analysis of factors associated with problem gambling. -----	34
3.8 Access to Gambling Information, Education and Problem Gambling Services -----	37
3.9 Gamblers Ability to Identify Problem Gambling -----	39
3.10 NLGRB intervention to address Problem Gambling -----	40
3.11 Challenges of the NLGRB in Implementing its Mandate -----	41
4. CONCLUSION AND RECOMMENDATION -----	43
ANNEXES -----	46
Annex 1: Reference -----	46
Annex 2: Research activities flowchart-----	47
Annex 3: Overall Study Sampling Frame-----	48
Annex 5.4: Summary of Gamblers Survey Results-----	49

**LIST OF FIGURES**

Figure 1: Assessment Framework for Socioeconomic and Health Effects of Gambling ..... 9

**Figure2: Conceptual framework of Factor that contribute to harmful gambling practices..... 10**

Figure 3: Demographics of Gamblers Surveyed..... 14

Figure 4: Type of Gambling Activities ..... 15

Figure 5: Distance to gambling outlet and gambling time ..... 16

Figure 6: Frequency of participation and mode of gambling ..... 17

Figure 7: Number of years in gambleing and age-at-start of gambling ..... 17

Figure 8: Gamblers whose family and peers of gamble and their sources of money for gambling ..... 18

Figure 9: Reasons for Gambling ..... 20

Figure 10: General Effects of Gambling ..... 20

Figure 11: Impact of Gambling on Gamblers..... 22

Figure 12: Impact of gambling on families ..... 23

Figure 13: General health status among Gamblers Surveyed..... 24

Figure 14: Impact of Gambling on Physical and Mental Health of Gamblers ..... 26

Figure 15: Substance Use among Gamblers..... 27

Figure 16: Suicide Thoughts, Plan and Attempts..... 28

Figure 17: Problem Gambling Risk or Indicators among Gamblers Surveyed ..... 29

Figure 18: Proportion of Gamblers with Gambling Problem ..... 30

Figure 19: Factors Associated with Problem Gambling ..... 32

Figure 20: Factors Associated with Problem Gambling ..... 35

Figure 21: Access to Gambling Information / Education ..... 38

Figure 22: Gamblers Able to Identify Problem Gambling..... 40

## **ABBREVIATIONS AND ACRONYMS**

BBC	British Broadcasting Company
FY	Financial Year
GD	Gambling Disorder
M&E	Monitoring and Evaluation
NDPII	National Development Plan II
NLGRB	National Lottery and Gaming Regulatory Board
PG	Problem Gambling
RG	Responsible Gambling
SEIG	Socioeconomic Impacts Of Gambling
SUDs	Substance Use Disorder
TOR	Terms Of Reference

## KEY DEFINITIONS

- 1) **Betting:** This means making or accepting a bet on; (a) the outcome of a race, competition or other event or process; (b) the likelihood of anything occurring or not occurring; or (c) whether anything is or is not true, thus, sports betting is the activity of predicting sports results and placing a wager on the outcome, and betting on animals is the activity of predicting animal race results and placing a wager on the outcome.
- 2) **Casino:** A private club, or a room in a club, hotel, or other establishment, where gambling takes place or place where people gamble by playing card games, roulette, or slot machines which has been issued with a licence under this Act
- 3) **Gambler:** Sometimes referred to as a punter is a person who gambles, places a bet, or makes a risky investment.
- 4) **Gaming:** The playing of a game of chance for winnings in money or money's worth and for the avoidance of doubt, includes gambling
- 5) **Lottery:** Game for distributing prizes by chance whether by throwing or casting of dice, tickets, cards lots, numbers or figures.
- 6) **Ludo:** This is a board game for two to four players, in which the players race their tokens from start to finish according to die rolls. In this study, it will be considered gambling only if money is staked by the players involved.
- 7) **Online/Internet gambling:** This refers to gambling that takes place over the internet.
- 8) **Pool betting:** This means any stake or wager in a pool, whether in money or money's worth and includes any portion of that stake or wager;
- 9) **Problem gambling:** Sometimes called "compulsive", "irresponsible", "harmful", "pathological" or "addictive" gambling. This is a type of gambling in which a gambler has difficulties controlling the amount of money and /or time spent on gambling which leads to adverse consequences for the gambler, his household, or the community (Williams et al. 2012).

**Sources:** Uganda Lotteries and Gaming Act, 2016 and Oxford Dictionary.



## EXECUTIVE SUMMARY

**Background:** For over a decade, the gambling sector in Uganda has momentiously grown in size, coverage and the different modalities used to gamble. The emergence sports of betting and online betting have heavily contributed to the skyrocketing of the gambling activities reaching every district and urban centres around the country while casino gambling and national lotteries remain predominantly in the urban areas and among highly elite populates. There are six (6) common forms of gaming activities in Uganda, namely: lottery, casino, slot machines, Sports betting, bingo and pool betting (Ahaibwe et al., 2016; Ssewanyana, D., & Bitanihirwe, B. 2018). Existing evidences reveals that the gambling landscape has shifted significantly from an initially mild type of entertainment to a hazardous addiction resulting in several academic, behavioural, personality, social, interpersonal, financial, criminal or mental health difficulties for children and adolescents engaged in harmful gambling activities (Dahlberg, 2002; Shead et al., 2010; Derevensky et al., 2012). Past studies in Uganda particularly has examined the associated factors and prevalence of problem gambling, and the related socioeconomic effects of gambling in Uganda by drawing evidence from specific districts within the country such as Kampala City, Wakiso and Mbarara (Ahaibwe et al., 2016; Anyanwu et al., 2023; Herskowitz, 2016; Yawe & Ssengooba, 2014), thus lacking the perspectives from regions and a national representation. This study therefore provides a national representative information on the key drivers of problem gambling and the related socioeconomic and health effects gambling in Uganda.

**Objectives:** The main objective of the study was to assess the drivers of problem gambling and related socioeconomic and health effects of gambling in Uganda, with the specific Objectives to examine: i) Socioeconomic effects of gambling on gamblers and families, ii) health effects of gambling on gamblers themselves and iii) the drivers of problem gambling.

**Significance:** The study findings provides useful information for policymakers during policy reviews, planning and regulation of the gaming industry. The recommendations provided in this study will improve responsible gaming interventions, in turn reducing problem gambling and related effects. The findings will also enrich existing evidence relating drivers of problem gambling, social economic and health effects of gambling in Uganda.

**Research Methods:** To implement these study objectives, the researchers employed a well sequenced and scientific proceses and methodologies which were selected, reviewed and implemented through a consultative process with the National Lottery and Gaming Regulatory Board (NLGRB) core technical staff. We employed both quantitative and qualitative methodologies through a survey, interviews and focused group discussions targeting gamblers, and key informants such as gambling outlet managers, district officials, police, mental workers and community leaders in the 14 sampled districts that represented the 14 sub-regions of the country excluding Karamoja.

**Design:** The study design was a cross sectional survey intended to provide a snapshot on the current drivers of problem gambling, and the related socioeconomic and health effects of gambling on gamblers, families and communities. We employed a two-stage stratified random sampling procedure. In the first stage, we sampled gambling outlets from districts with highest gambling outlets across 14 sub-regions of Uganda using the Lottery and Gaming Regulatory Board (LGRB) database of gaming outlets in Uganda. In the final stage, gamblers were randomly sampled within each sampled gambling outlets in the 14 selected districts. Out of the overall total of 613 gambling outlets identified in the 14 pre-selected districts, 111 gambling outlets were randomly sampled in first stage, and in the second stage, an average of 10 gamblers surveyed were drawn from each gambling outlet. The gamblers surveyed were those found gambling in the sampled outlets on the day of interview. Where 10 gamblers could not be attained, a balance were covered in next sampled outlets. A total of 1538 gamblers were surveyed, 89 key actors interviewed, and 112 gamblers were interviewed in 14 different Focus Group Discussions (FGDs) to obtain supplementary information to the quantitative survey.

**Assessment Framework:** The framework used to assess drivers of problem gambling were derived from Hilbrecht et al., (2020); and assessment framework for the socioeconomic and health effects were drawn from the work of Anielski, Mark and Braaten applied in Canada in 2008 as a sold standard to assess socioeconomic effects of gambling (Anielski, Mark; Braaten, 2008). Problem gambling and it's associated factors were assessed using three level of analysis; descriptive, bivariate using simple binary logistics regression and multivariate analysis using binary logistics regression model.

**Quality Control and the Study Strength:** This study protocol was designed with input from Lottery and Gaming Regulatory Board (LGRB) staff, data collection tools were built in kobo collect bearing skip logics and the surveys forms were reviewed before syncing. The biggest strength of this study is that, it fills in the data gap at national level on the drivers of probleming and social effects of gambling in Uganda, and the findings offers useful information that provides a baseline for future evaluation of government programs in the gaming sector.

## RESULTS

**Demographics:** Out of the 1,739 people were interviewed, 95% (1,650) were gamblers found at the gambling outlets on interview date and 5% were key actors in the gaming sector. Eighty-nine percent (1538) of the study responendts were gamblers surveyed using a questionnaire, 6% (112) were also gamblers involved in FGDs and 5% (89) of the respondents were key actors. Majority (83%) of the surveyed gamblers were 25 years and above with the mean age of gamblers surveyed at 31 years. Ninety-nine percent (99%) of the surveyed gamblers were male with less than 1% female. Forty percent (40%) of the gamblers were never married and (55%) were married. Most (48%) of the gamblers attained secondary level of education and 3% never went to school. 41% of the surveyed gamblers were full-time employed individuals and 37% employed part-time, these implies 78% of the gamblers surveyed are involved in some form economic activities earning a salary or wage. Majority (33%) of gamblers earn between 250,001

to 500,000 a month, 25% earn between 100,001 to 250,000 which implies the majority of the gamblers surveyed earn below 500,000 Ugx.

**Gambling Participation:** The top five (5) commonest type of gambling activities were sports betting, slot machine, betting animals, casino and pool betting. Majority (95%) of gamblers surveyed regularly play sports betting followed by slot machine at 38%. Twenty-five (25%) of gamblers can access a gambling outlet within 5 mins to less than 10 minutes, and 26% spend between 10 to less than 20 minutes. Of note is that, 85% of gamblers spend less than 30 minutes to reach a gambling outlet. Almost half of the gamblers surveyed (48%) gambles daily and mainly in sport betting, and 39% gamble weekly. The majority (76%) of gamblers surveyed use online mode gambling. Most (37%) of gamblers surveyed had spent 5-10 years in gambling by the time of the survey and 34% have spent between 2-5 years. Fifteen (15%) of the gamblers surveyed started gambling below the age of 18, 36% started below the age of 21 and 56% started gambling below the age of 25. Most (89%) gamblers cited their closest acquaintances such as friends, neighbor, siblings, other relatives etc. were also frequently gamblers.

**Reasons for Gambling:** Most (66%) of the gamblers surveyed gambled to win money, 17% also gambled to win money but to support worthy causes, justifying 83% of the gamblers engage in gambling to earn money. Findings revealed that gamblers with poor social welfare status were more likely to gamble for undesirable reasons.

**Impact of gambling on Gamblers:** Eighty-five (85%) of gamblers cited that gambling has some form of impact on themselves or their families; 52% cited both negative and positive impact, while 26% and 7% cited negative and positive impact respectively, as expected negative impact outweighs the positive impact. Fewer highly educated gamblers cited negative effects of gambling compared to those with lower level of education. Forty-two (42%) of gamblers reported to have experienced reduced saving due to gambling, 33% cited misuse of money at work, 29% cited reduced work productivity while 25% cited psychosocial distressed due to gambling effects.

**Impact of Gambling on Families:** Majority (25%) of the gamblers cited misused of money intended for household necessities, 20% indicated that they spend less on basic needs so as to save money to gamble, and 20% reported that tensions exist in their family relationships due to their uncontrolled gambling activities.

**Impact on Health:** Majority (46%) of the gamblers self reported their health was good over the past one years; 24% reported their health has been excellent, 23% reported their health was fair and (8%) cited their general was poor. Thirty-seven (37%) of gamblers cited their physical health was not good on at least one day, implying there was physical illness and injury. Forty-eight (48%) of the gamblers reported their mental health was not good on at least one day in the last 30 days preceding survey, implying they did experience some stress, emotional distress anxiety and depression.

**Substance Abuse:** In terms of substance abuse, 46% of the gamblers surveyed used alcohol in the last 30 days preceding the survey, 14% used cigarettes and 8% used mairungi and Cocaine is the least and rarely used. Substance uses were found to be associated with problem gambling in Acholi, Ankole and more significantly in central region.

**Suicide Thoughts, Plans and Attempts:** Eleven (11%) of the gamblers surveyed have ever thought of killing themselves, 4% reported to have ever planned of killing themselves and 4% cited gambling as an important cause of suicide thoughts and attempts in their lives.

**Problem Gambling:** More than third of the gamblers surveyed were classified as problem gamblers (37%), implying 63% of the gamblers surveyed were non-problem gamblers. Analysis at bivariate level revealed that; age, marital status, education level, and employment status, income, distance to gambling outlet, mode and frequency of gambling, age-at-start of gambling, reasons for gambling, acquaintances, access to gambling education and access problem to gambling services were associated with problem gambling. At multivariate level, all the above variables were found to be significantly associated with problem gambling except level of education, underage-at-start of gamble and the influence of acquaintances.

**Access to Gambling Information and Education:** Sixty-five (65%) of gamblers access to gambling information and education; 44% of them access gambling information and education through their local radio, 29% from gambling outlets, 25% through the Local TV, 18% through the internet, 10% from a community leader and 3% cited school as their source for information and education on gambling.

**Access to Information on Problem Gambling Services:** Firty-six (46%) of gamblers reported that they have access to information on problem gambling services; 31% access through a local radio, 18% through gambling outlets, 15% from local TV , 15% from internet, 10% from community leader and the least percent (3%) access this information from school. Interviews with key actor revealed that

**Gamblers Ability to Identify Problem Gambling:** Sixty (60%) of the gamblers survyed were confident they would recognize if they themselves or their acquaintances are becoming or are already problem gamblers; 28% were extremely confident, 32% moderately confident, 25% slightly confident and 16% were not confident at all. Sixty-eight (68%) of gamblers had ever felt like discontinuing gambling but could not effect their decisions in the past year. Sixty-eight (68%) also perceive that they had some symptoms of problem gambling in the past year and 13% actually acknowledge they had the problem gambling symptoms most of the time in the past year.

**Conclusion:** Ninety-nine percent of gamblers are the male gender and most of them are have some basic level of education of upper primary and above. Even though these gamblers are characteristics by low monthly income, more than half are involved in some form of economic activities earning a salary or wage. Nine (9) in every ten (10) gamblers area actively play sports betting and four (4) in ten (10) are engaged in gambling using slot machine. The study also reveals that the gambling outlets are widely spread in nearly every doorstep of Ugandans; more than half of the gamblers accesses gambling services within 10-20 minutes from their homes and this proximity factor by all means facilitate gambling addiction. Although gambling always involves a negative expected return and the outlets is known to have advantage, a significant proportion of gamblers surveyed in Uganda believe there is both positive and negative impact, but negative impact outweighs the positive ones, and majority of the gamblers indicated that they gamble to win money so as to cater for their personal and household necessities. Study findings also revealed that four (4) in every ten (10) gamblers experience problem gambling and are pathological gamblers. The impact of gambling on the mental health of the gamblers are detrimental; five (5) in ten (10) gamblers experience mental health related problems characterized by anxiety, depression, emotional distress and substance abuse.

Many factors were found to associate with problem gambling, some them include age, marital status, education level, and employment status, income, distance to gambling outlet, mode of gambling, frequency of gambling, age-at-start of gambling, reasons for gambling, influence of acquaintances, access to gambling education and proximity to gambling outlet.

We can also deduce that gamblers are not sure or aware on the availability of government services to address problem gambings effects within their communities, and less than half report having access to gambling education information either, and access is generally low across all media channels assessed. The gamblers have very low knowledge (and confidence in their level of knowledge) on problem gambling related symptoms so as enable self regulation and seeking of early treatment.

**Recommendation:** Problem gambling has remained an inherent part of gambling behaviour and will require a deliberate continuous attention from all actors. In the short-term, It is also critical to sentize, train or education masses to understand gambling behaviors and problem symptoms which could adversely impact their mental health. The gamblers and gaming operators needs to be sensitized more on the laws relating to gaming in Uganda, including their roles, responsibilities and rights. Possible LGRB interventions activities in upcoming financial could consider deliberately involving stakeholders from health (mental health departments), education (schools), social protection sector including the justice system and both formal and informal community-based structures. Leverage the use of technology to advance the work/ services of the board. Strengthened visibility of board and fully facilitate them to deliver on their mandate. Strengthen linkage and coordination of board's activities with other key actors in the gaming sector, these will popularize your mandate, enance accountability, transparency and visibility.

## **1.0 INTRODUCTION**

### **1.1 Background and Overview of LGRB**

The Lotteries and Gaming Regulatory Board is a body corporate established under the Lotteries and Gaming Act, 2016 to license, supervise and regulate the establishment, management and operation of lotteries, gaming, betting and casinos in Uganda, and to protect the citizens from adverse effects of gaming and betting in Uganda.

Section 4(a) of the Lotteries and Gaming Act, 2016 provides that the Board shall regulate and supervise the establishment, management and operation of lotteries, gaming, betting and casinos in Uganda. Sec 4(m) also mandates the Board to receive, investigate and arbitrate complaints relating to lotteries, gaming, betting and casinos and take appropriate action, and data is a key resource in enabling the Board to achieve its mandate. This implies that evidenced best information should be available to support the Board with proper decision-making during execution of duties and responsibilities, consequently, this research was commissioned.

### **1.2 Overview of Uganda's Gambling Industry**

Gambling can be defined as betting money on an outcome of uncertain results to win money or money's worth. All forms of gambling, even those typically considered to be more skill-based, like sports betting, contain an element of luck (Latvala et al., 2019). According to Adib et al (2015), the common form of gambling activities includes playing cards, flipping coins, pool, plat station, damma, scratchies, betting, tennis table, carambola, table football, regular lottery, Bingo, quick draw and chess among others.

For over a decade, the gambling sector in Uganda has momentiously grown in size, coverage and the different modalities used to gamble. The emergence of sports betting and online betting have heavily contributed to the skyrocketing of the gambling activities reaching every district and urban centres around the country, while casinos and national lotteries remain predominantly in the urban areas and only among highly elite populates. There are six (6) different forms of gaming activities in Uganda, namely: lottery, casino mainly slot machines, Sports betting, bingo (also called lotto) and pool betting (Ahaibwe et al., 2016; Ssewanyana, D., & Bitanihirwe, B. 2018). In the recent years, gambling landscape has shifted significantly from an initially mild type of entertainment to a hazardous addiction resulting in a number of socioeconomic and health effects such as disruption of academic persuit, behavioural and mental health, financial difficulties and crime including addictive and other harmful gambling practices (Dahlberg, 2002; Shead et al., 2010; Derevensky et al., 2012) despite the valuable contribution of gambling to Uganda's economy through the tax revenues.

### **1.3 Socioeconomic Effects of Gambling**

Gambling is known to affect individuals, families and communities socially, economically and healthwise. In the economic perspective, the gambling sector is multibillion business that is earning shareholders huge profits and revenues to host economies. In 2021, the total revenue from mobile gaming in the three largest African gambling markets (i.e., South Africa, Kenya and

Nigeria) was placed at half a billion US dollars from mobile betting activities alone, and this figure is expected to grow further (Symphony, 2022). In Uganda, the sector generated and revenue worth Ugx 110 Bn in FY 2021/2022; an increase from Ugx 46.6 Bn in the FY 2018/2019 into the economy (NGLB twitter handle Dec 2022), these highlights the valuable contribution of the gambling industry to Uganda's economy.

At gambler and household level, betting companies have provided employment opportunities to many Ugandans. According to NLGB, there are 59 companies/operators who have been issued with various license categories in 2022 to operate in Uganda. The sector is employing 8,959 people (professionals and non-professionals) in various capacities like; Cashiers, Branch managers, Accountants, Marketing agents/ sales agents, Security guards, Chefs for casinos, Cleaners and Administration (NGLB, 2022).

In Uganda, a number of gambler have reported winning money from gambling especially sports betting and the amount won varies. Some gamblers have reported winning about Ugx 760,000, 1,000,000 and so on. In 2021, a man from Kachumbala sub county in Bukedea district bought two vehicles (a taxi and a Toyota Harrier) from cash won from betting. Betting has also been viewed as an opportunity or avenue to escape idleness and join peers to socialize, this is common among youth who do so to cope with lack of opportunities to occupy them. Among the well off gamblers, gambling is mostly done as a leisure activity (Aniekan O. Akpansung & Emmanuel Agwanyang Oko, 2021).

While gambling has provided employment opportunities to people and some quick income to some people, existing literature also highlights its negative effects on the gamblers and their households. In a documentary by BBC Eye Africa in Uganda, some gamblers reported that they were abandoned by their families since they could no longer provide for them as a result of problem gambling. They had also forsaken taking care of themselves, as such, there disgraced by their own families. Other punters reported losing household business assets such as motorcycles. Some punters sold off their household items either to get money to gamble or pay off debts accumulated as a result of gambling. A number of students at secondary school and tertiary/university level have reportedly used their school fees for gambling. This has forced some young gamblers to drop out of school, miss classes due to gambling, perform poorly at school and in worst case scenario attempted or even committed suicide (Muhindo, 2019). Interpreting from the above, socioeconomic effects of gambling is immense, more up to date evidence on the socioeconomic effects of gambling in Uganda is required to inform the decision making, planning and implementation directives of the LGRB.

#### **1.4 Health Effects of Gambling**

Several studies have shown that gambling has detrimental effects on the physical and mental health research highlight the negative health effects of gambling on gamblers, some of these effects include huge risk of engaging in unhealthy sexual behavior and mental related health problems. According to Kiwujja, V, JF (2019), compared with nongambling youths, gambling youths have more sexual encounters, initiate sexual activity at a young age, have unprotected sex, have sex with more than one partner whom they do not know their HIV status, and have

sex under the influence of alcohol. There is a continuum of severity in regard to health effects of gambling from gambling disorder to gambling addictions with the latter located at the end of the scale, whereas the former is a less problematic behavior that may not lead to severe difficulties in the individual's life (Szerman et al. 2020), and patients with gambling disorder frequently present other mental disorders, such as substance use disorder, attention deficit/hyperactivity disorder, mood disorders and impulse-control disorders (Szerman et al. 2023).

Gambling harms people's health and wellbeing, with the wellbeing scores of problem gamblers estimated to be similar to those who are unemployed or in very bad health. Few countries such as Australia and New Zealand that have estimated the scale of gambling harm state that the magnitude is similar to major depressive disorder or moderate alcohol misuse or dependency (Wardle et al. 2021). In some countries, gambling is being recognized as a public health issue requiring greater focus on universal preventive measures to address harm it generates (Browne et al. 2016). Gambling disorder is also characterized by low prevalence rates, but with detrimental individual and public health consequences. Responsible gambling strategies therefore need to provide transparent and safe gambling for the majority of gamblers and strategies for early identification, intervention, and harm reduction for the minority of individuals at risk for gambling disorder. It's observed that gambling disorder should be considered more of dual disorder where categorical mental disorders (e.g., DSM-5) are usually accompanied by very different symptomatic expressions (affective, behavioral, cognitive, substance abuse, personality traits) rather than single nosologically entity (Szerman et al. 2020). This study examined the health effects of problem gambling in context of Uganda.

### **1.5 Drivers of Problem Gambling**

Abdi (2013) categorizes drivers of problem gambling especially among young people into three; personal factors, social factors and environmental factors. Personal factors include the need to reduce tension, build self-confidence, drug abuse, and male gender factor; social factors include peer and family risk factors; and environmental factors include the media advertisement and availability of gambling avenues. Other studies on problem gambling reveal similar drivers; male gender factor, risk seeking tendencies, low self-esteem, depression, and suicidal ideas; social factors including peer influences and parental gambling; and environmental factors such as advertisement on gambling show a positive association with problem gambling (Carlson and Moore 1998; Dane et al. 2004; Delfabbro et al. 2005; Lambos et al. 2007; Winters et al. 2002; Nabifo et al. 2021)

In Sub-Saharan Africa, available literature largely points to the high levels of poverty, underemployment and unemployment especially among the working age group as some of the key drivers of problem gambling. This has increasingly seen those from vulnerable stratum of society turning to gambling due to distorted perceptions or beliefs about the potential of gambling as a viable, consistent source of income and as such consider gambling as a formal or full-time job. For example, sports betting helps to earn some extra money to support meet personal and household needs of punters. (Adebisi et al. 2021; Adebisi et al. 2022).



The emergence of many betting houses in the rural towns and trading centres have increased access to gambling facilities and services across urban, peri urban and even rural communities (Wann et al. 1999). These gambling houses are far from regulators' reach, thus perpetuating unhealthy gambling behaviours among both the punters and gaming operators. According to Muhindo (2019) in a BBC Africa Eye documentary on gambling in Uganda, there is limited control or regulations on access of gambling house. Gamblers as young as 15 years have access gaming houses freely against the legal requirement of 25 years. Additionally, improvement in internet access and mobile technologies in gambling have equally increased the the amount of time gamblers spend through online gambling, which provides day and night services access, easy access, convenience, anonymity and lucrative prices for gamblers (Gainsbury et al. 2012; Hing et al. 2014a, b, c)

The highly persuasive advertisements with inducements that gives false hope of huge wins with small stakes, and this gives punters high hopes and expectation that this could be realized by each of them. As such, they will keep staking even when they do not realise these wins with hope that the next bate could probably be their lucky big win. In Uganda, especially around Kampala metropolitan area, there is the influence of political leaders, especially members of Parliament have promoting and arguing cases for gambling. This contradicts the efforts of the local leaders who are sensitizing masses on the dangers of gambling. Gamblers who look up to these leaders have continued to gamble even when they are not realizing any monetary returns on their investments (Muhindo, 2019), thus, this study investigated primary drivers of problem gambling in the context of Uganda.

### **1.6 Government Interventions in Uganda**

Government of Uganda has intervened in regulating and curbing problem gambling in the country on mainly two fronts; At policy level focusing on regulation of the gambling sector and addressing mental health issues arising from harmful gambling in the public, through establishment of the mental units in the regional referral hospitals spread across the 15 sub regions of the country.

As a policy response, government put in place The National Lotteries and Gaming Regulatory Board (NLGRB) under The Lotteries and Gaming Act No. 7 of 2016 with a primary mandate to regulate the growing gambling industry in the country. A number of existing laws and policies are also expected to provide statutory strength to the NLGRB, among which include: The 1995 Uganda Constitution, Public Finance Management (Amendment) Act 2015, The Lotteries and Gaming Act, 2016, Anti-Money Laundering Act 2013, the Uganda Revenue Authority Act, Cap. 196 vol. 8, the Computer Misuse Act of 2011 – protecting the use of technology in gambling, The Electronic Transfer Act of 2011, and National Development Plan (NDP) III. Other relevant regulations put in place include; The Lotteries and Gaming (Betting) Regulations, 2017, The Lotteries and Gaming (Gaming and Betting Machines) Regulations of 2017, The Lotteries and Gaming (Fees) Regulations of 2017, The Lotteries and Gaming (Licensing) Regulations of 2017 plus other tax related policies. Despite these establishments, gambling industry has continued to impact the public negatively both socio-economically and Healthwise as a result of harmful

gambling practices. A documentary by BBC Africa Eye in Uganda found out that underage children and youth are immensely involved in gambling, the gaming hours are unregulated, and the gambling outlets spread everywhere even near schools. Drawing from these findings, further tighter control of the sector by government such as restricting spatial distribution and spread of betting houses, betting hours to start from 4pm to 10 pm only to allow people engage in other productive activities, tighter control of access of betting houses by unauthorized punters especially those below the legal age and students are required. To build a strong case for such suggested improvements, this was undertaken and has provided useful information on the drivers of problem gambling and the related socioeconomic and health related effects of gambling in the context of Uganda and the various sub regions of Uganda.

Some studies in recent years have examined the socioeconomic effects of gambling district and lower geographical areas ( Yawe & Ssenooba, 2014; Ahaibwe et al., 2016; Herskowitz, 2016; Anyanwu et al., 2023 ), thus lacking a nationwide representative information. Most of these studies were also conducted many years ago, therefore lacking updated information on the drivers of problem gambling and related socioeconomic and health effects of gambling amidst rapidly changing technological landscape and expansion of the gambling industry in Uganda. This study has therefore provided an updated nationwide representative data on the key drivers of problem gambling and the related socio-economic and health effects of gambling in Uganda. Finally, being the first of its kind at a national scale, the study provides baseline data against which it will be possible to measure any future changes in the drivers of problem gambling and the related socio-economic and health effects of gambling in Uganda. Determined use of this information should inform government planning, implementation and monitoring of responsible gaming and betting activities in Uganda.

## **1.7 Study Objectives**

### **1.7.1 General Objective**

The main purpose of this study was to assess the socioeconomic and health effects of gambling and drivers of problem gambling in Uganda.

### **1.7.2 Specific Objectives**

Specifically, study examined:

- i). Socioeconomic effects of gambling on gamblers, households and communities
- ii). Health effects of gambling on gamblers
- iii). Key drivers of problem gambling

## **1.8 Significance of the Study**

The findings of this study will provide useful information for policymakers during policy reviews, planning and implementation of the gaming regulatory framework; review of the current Lotteries and Gaming Act, existing program guidelines and the recommendations generated can be adopted in the short-term and long-term strategies i.e., in the most immediate annual operational plan and future strategic planning. Additionally, the findings are

expected to enrich existing evidence on socioeconomic and health effects of gambling and drivers of problem gambling in Uganda; adding to body of existing knowledge and a point of reference for future researchers.

### **1.9 Structure of the Report**

This research report has been organized in four (4) different sections. Section 1 provides the background and rationale to the study, study objectives and main significances of the study. Section 2 presents the research methods, quality controls, ethical compliances and study strengths and limitations. While section 3 presents the main findings of the study organized by the study objectives and research main questions. In specific terms, section 3 is organized by; presentation of demographic features of study participants such as age, sex, residence, region, marital status, employment status, education attendance and participation level of gamblers in gaming activities. Section 3 also presents the key drivers of problem gambling, socioeconomic and health effects of gambling on gamblers, households and communities and statistically attempted to assess the associated factors to problem gambling in Uganda. Section 4 provides a summary of the study findings, main conclusion and suggest key actionable recommendations to inform relevant government policies, the LGRB planning processes and the implementation of its regulatory frameworks as mandate under the Lotteries and Gaming Act, 2016.

## **2.0 RESEARCH PROCESS AND METHODS**

This study employed a very agile and participatory process using both quantitative and qualitative research methods. Quantitative data were collected through surveys and desk reviews, and qualitative data were collected through key informant interviews and focused group discussions in the study areas i.e., districts, gambling outlets and sampled communities.

### **2.1 Research Process**

In order to systematically assess and understand the socioeconomic and health effects of gambling and drivers of problem gambling in Uganda, the researchers employed a well sequenced and a participatory research methods to plan, acquire data, process and analyze data.

All the research activities were implemented through a consultative process with the NLGRB core technical team. We employed a very agile approach so as to attain the study objectives through numerous participatory processes. Upon selection as the best bidder to undertake this research, Promise Consult International (PCI) research team held pre-inception meeting with the LGRB procurement and core technical team to discuss and agree on possible contractual terms. In May of 2023, PCI research team held an inception meeting, presented an inception report to the LGRB core technical team and signed a contract to execute the study. Another meeting was held LGRB core technical team to reviewed and built consensus on the research tools and activity schedule. PCI research team later incorporated inputs of LGRB core technical team into the research protocol.

The research tools were then translated from English into 10 different languages; Acholi, Langi, Ateso, Jopadola, Lugishu, Lusoga, Luganda, Lunyoro, Lutoro and Lunyakitara. The tools were then digitized in Kobo toolbox application, qualified local enumerators in the respective research areas were recruited, trained on the research tools and basic research ethics, pre-tested the tools, made adjustments and data collection commenced in the third week of May 2023 and ended in the first week of June.

The survey data was exported from kobo collect into excel and later exported to Stata SE17, cleaned and transformed. Qualitative data were transcribed in word document, cleaned and transformed accordingly. Data analysis and reporting by an expanded team commenced in the first week of June of 2023 and the first draft of the research report was produced by end of the week. The final report was produced in the second week of June 2023. Cleaned raw data sets, codebooks, transcripts and were submitted to LGRB Research and Planning department by second week of July 2023.

## **2.2 Research Methods**

### **2.2.1 Quantitative Survey**

The research team surveyed gamblers using a structured questionnaire bearing close ended questions adopted and modified from past studies in Uganda, Sub Saharan Africa, Africa and other parts of the world (Ahaibwe et al., 2016; Australian Institute for Gambling Research, 2001; Hing et al., 2022; The Kansas Department for Aging & Services, 2017) as referenced in the annex.

**a) Survey Design:** A cross sectional survey design was employed to provide a snapshot on the socioeconomic and health effects of gambling on gamblers, households and communities and the drivers of problem gambling in Uganda. A two-stage stratified random sampling procedure employed; the first stage involved random sampling of gambling outlets in districts with the highest volume of gambling outlets across 14 sub-regions of Uganda; Acholi, Ankole, Bukedi, Bunyoro, Busoga, Central I, Central II, Elgon, Kampala, Kigezi, Lango, Teso, Tooro and West Nile excluding Karamoja due to insecurity in the region on top of lack of data to inform the sampling frame. The final stage involved random sampling of gamblers within each sampled gambling outlet in the 14 selected districts, where each district was representing a sub region.

**b) Sample size:** Using the list of gambling outlets provided by LGRB, Department of Research and Planning, a total of 613 gambling outlets were identified in the 14 pre-selected districts, and 18% (111) gambling outlets were randomly selected in first sampling stage; districts with less 20 outlets, an average of 5 outlets were randomly sampled; districts with 20 to 50 outlets produced an average of 10 outlets, and districts with more than 50 gambling outlets, 25 outlets were sampled as shown in Annex 2. Gamblers interviewed were then sampled from each gambling outlet; a conservative number of 10 gamblers interviewed per outlet sampled in each district. In outlets where 10 gamblers could not be easily attained, the balance were covered in the subsequent sampled outlet with higher attendance of gamblers on the interview date. In the end, a total of 1,538 gamblers surveyed across the 14 districts.

**c) Sampling of gamblers:** Enumerator approached the sampled gambling outlets in each selected district in order to administer the survey questionnaire to the gamblers found gambling on the day of interview. As designed, an enumerator would introduce his/herself to the manager of the gambling outlet, present the introductory letter from LGRB and carry-on interviews with any 10 gamblers found gambling in the outlet on interview day.

### **2.2.2 Qualitative Interviews**

In order to triangulate and supplement the quantitative survey, one focused group discussion was held per district (a total 14 focus group discussions) engaging a total of 112 gamblers. interviews were also conducted with 89 representatives from key actors in the gambling

sector; 14 Gambling operators, 14 Local council one chairpersons of villages hosting the busiest gambling outlet per district, 28 Government officials (comprising of District education officer and Community development officer), 14 Police officers in the crime division, 14 mental health workers and counsellors in the respective regional and district referral hospitals including 5 technical staff of LGRB. The respondents for focused group discussion and key informant interviews were purposively sampled based on their knowledge, roles, the convenience of their availability and willingness to be interviewed. Overall, 201 people were interviewed through focus group discussion and key informant interviews.

## 2.3 Research Framework

### 2.3.1 Assessment Framework for Socioeconomic and Health Effects of Gambling

As depicted in table 1 below, the framework for assessing socioeconomic and health effects were adapted from the work of Anielski, Mark and Braaten applied in Canada in 2008, which was designed as a gold standard for assessing effects of gambling on individual gambler and household (Anielski, Mark; Braaten, 2008).

Figure 1: Assessment Framework for Socioeconomic and Health Effects of Gambling

Variable	Measures undertaken (mainly negative impact)	Research methods and tools employed
1). Socioeconomic effects of gambling on gamblers	School failure including dropout; social isolation; early childbearing; employment; Job loss or disrupted livelihood; reduced productivity level at work; reduced savings; unemployment, risky sexual behaviour, and suicidal tendencies, peer violence, crime, morbidity	Quantitative Survey, FGD, KII
2). Socioeconomic effects of gambling on families	Divorced or separated with family and domestic violence; tensions in family relationships; misuse of money meant for necessities and sale of household assets; effects on basic needs and utility expenses; destructed family livelihood and poor parenting	Quantitative Survey, FGD, KII
3). Socioeconomic effects gambling at community level	Employment; tax revenue to government; Substance use and crime rate	Quantitative Survey, FGD, KII
4). Health effects of gambling on gamblers	General health; physical health which include physical illness and injury; mental health which include stress, anxiety, depression, mood disorders and emotional problems; gambling disorder; risky sexual behaviour; substance abuse and suicide tendencies	Quantitative Survey, FGD, KII

**Source:** Adopted from the work of Anielski, Mark and Braaten (2008).

### 2.3.2 Assessment Framework for Factors Associated with Problem Gambling

The assessment framework for the drivers of problem gambling was derived from Hilbrecht et al., (2020) which theorizes that several factors as conceptualized below contribute to harmful gambling practices.

In these theory, factors responsible for harmful gambling include: **Biological factors** which encompasses **social demographics** such as age and gender; **Social factors** encompasses family and peer influences towards gambling in addition to other social demographics such as education, marital status, income and employment status; **Type of gambling** such as slot machine, sports betting, pool betting using off/online gambling; **Psychological factors** which involves some psychological disorders or conditions that may make a person susceptible to harmful gambling such as coping style to stress, self-perceptions like financially focus persons and social learning which relates to the influence of the social environment on gambling behaviors from families and peers; **Gambling environmental** such as government regulations, existing policy frameworks and community awareness, growth in the gambling sectors like number gaming houses; **Gambling exposure** such alcohol, access to credit, access land-based venues and Internet gambling any time and multiple games, financial difficulty (need win money to cater for basic needs) and marketing or advertisement and messaging the benefits and negative effects of gambling by operators and regulators; **Gambling resource** such as access to gambling information, gambling service access such as seeking help for gambling disorder and use of services, and **Cultural factors** includes ethnicity and traditions, socio-cultural attitudes, religion and other belief across localities. The association between these factors and problem gambling were examined using both quantitative survey and qualitative interviews

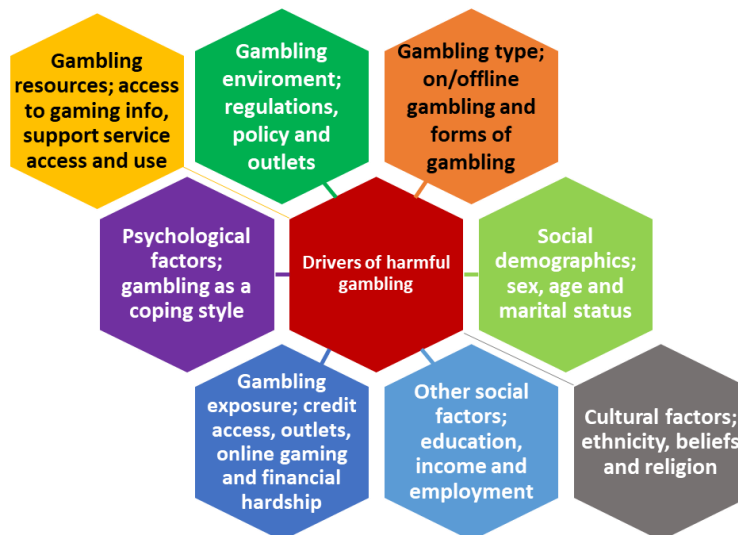


Figure2: Conceptual framework of Factor that contribute to harmful gambling practices

## **2.4 Problem Gambling and Its Associated Factors**

problem gambling and its associated factors were assessed using three levels of data analysis: First level, descriptive analysis which explored problem gambling risks. Second level involved a cross tabulation which examined the relationship between social demographic factors, type of gambling, psychological factors, gambling environmental, gambling exposure and access to gambling resource and problem gambling. The third level involved a multivariate analysis which also examined the key factors associated with harmful gambling. Associated factors with problem gambling were tested using binary logistic regression modelling. To determine whether the range of predictors tested adequately explains the risk of problem gambling amongst gamblers, a post-estimation statistical test was fitted to test goodness of fit of the model and the model was a good fit. Processed qualitative data also confirmed that social demographic factors, type of gambling, psychological factors, gambling environmental, gambling exposure and access to gambling resource were responsible for problem gambling risks.

## **2.5 Data Quality and Ethical Compliance**

The research protocol was designed with input from LGRB core technical staff, the survey tools were built in kobo collect with a strong skip logic to cater for data integrity checks and minimise interview errors. Completed survey forms were reviewed before syncing to server and transcripts were proof read and verified against audio records. To ensure ethical compliance, all study respondents were interviewed on consent, a few minors on assent and with permission from their caregivers. We used well qualified and experienced enumerators who were trained on ethics and the research tools. To ensure validity and reliability in the study measures, the research tools were pre-tested and revised amicably before full deployment. Field activities were supervised by a component of the research team including the principal investigators of this assignment. Daily review of completed survey forms and brainstorming on main challenges were useful avenues to address field level challenges that could affect data quality. All enumerators signed safeguarding policies as a pledge of good conduct and to uphold human rights principles. No harm was registered during field activities. To ensure confidentiality of study respondents, this report maintains anonymity of study participants.

## **2.6 Study Strength and Limitations**

As a strength, this study fills in the data gap at national level on the socioeconomic effects of gambling and drivers of problem gambling since government need a nationwide representative data to inform its decisions, planning and effective execution of strategies to implement the gaming regulatory frameworks and avert effects of problem gambling.

The study findings provide a snapshot on many topics related to gambling sector and the data provides a baseline to evaluate or measure effectiveness of future strategies in gaming sector. The use stratified random sampling method ensured that each district and region were adequately represented within the overall sample of individuals surveyed, and this result was able to generate generalizable estimates for each region.



For the study limitation, any survey data has a potential for bias in its results, even if a random selection process was used because the results only accurately reflect responses of those who participated in the study. This may have also led to the slightly small or larger percentages in measures since we surveyed participants in gambling outlets. We adopted the criteria of measuring problem gambling from past studies and outside Africa which could to some degree potentially mislead due to lack of full contextualization. Additionally, the survey question options could have been interpreted differently by respondents, some respondents may not have answered the survey or interview questions in ways they thought might not put them in a clearer manner.

### 3. RESEARCH FINDINGS

This section presents the findings on the socioeconomic and health effects of gambling and drivers of problem gambling in Uganda based on the quantitative survey and qualitative interview findings. In specific terms, the section highlights the demographics of gamblers surveyed, gambling participation, reason for gambling and effects of gambling on gamblers, families and communities. It provides estimates on the risk of problem gambling and attempted to estimate prevalence of problem gambling among gamblers. access to gambling information and education, including knowledge and use of the available problem gambling services. The section further analyses econometrically using statistical modelling, the associated factors to problem gambling.

#### 3.1 Demographics of Gamblers

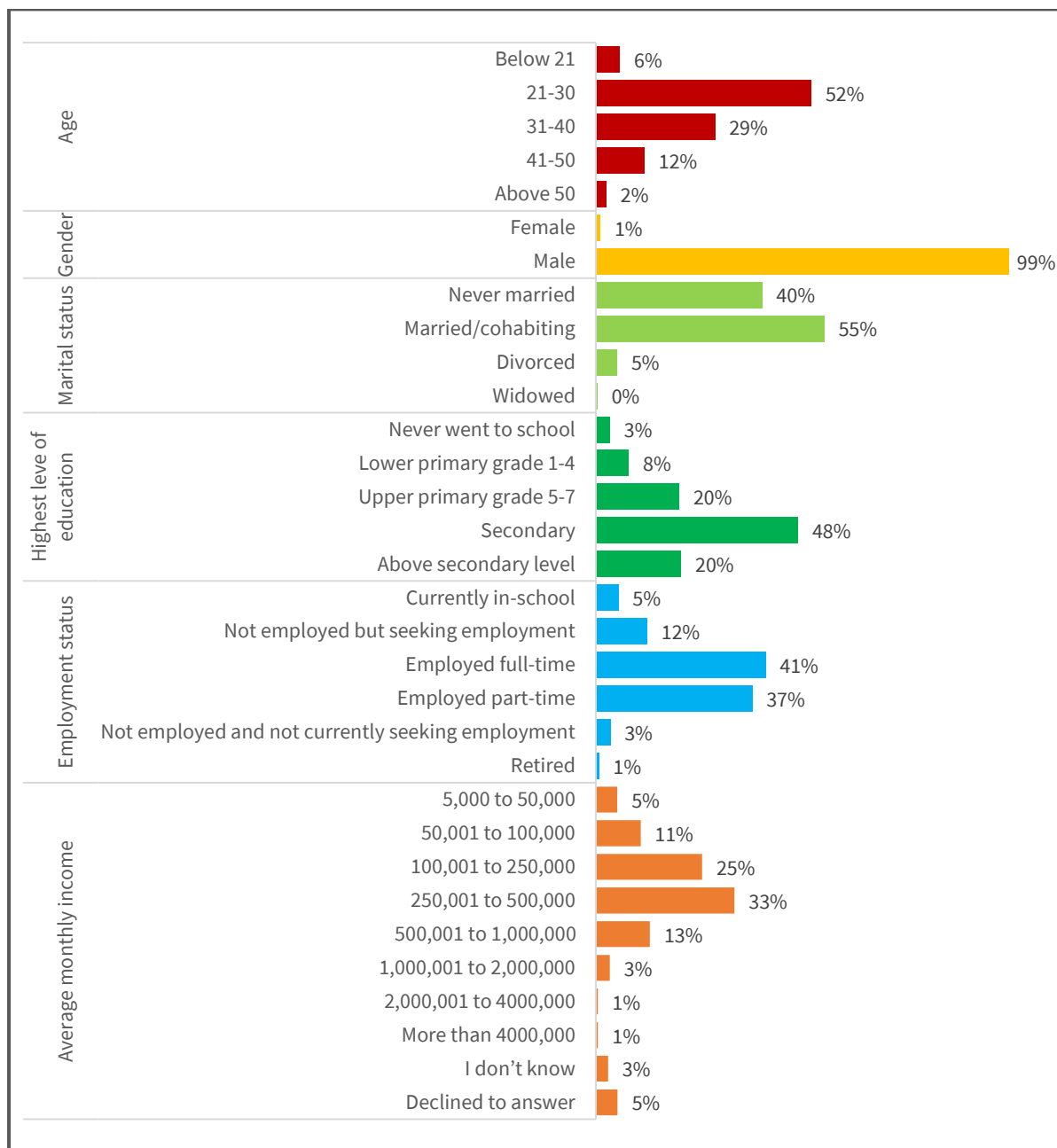
Out of the 1,739 people who were interviewed in this study; 95% (1,650) were gamblers found at the respective gambling outlets on interview date and 5% were key actors in the gaming sector. Eighty-nine percent (1538) of the study respondents were gamblers surveyed, 6% (112) were also gamblers involved in FGDs and 5% (89) of the respondents were key actors. Majority (83%) of the surveyed gamblers were 25 years and above, and only 17% were below the age of 25 years. The mean age of gamblers surveyed was 31, maximum age was 50 and the minimum age interviewed was 17 years. Most of the gamblers surveyed were in the age range of 21-30 (52%) and 31-40 years (29%). As detailed in annex 4, there were not significant differences in age groups of gamblers across the 14 regions. Ninety-nine percent (99%) of the gamblers surveyed were of male gender, only 1% were female gender and the female gender were mainly from, Bunyoro, Kigezi and Teso.

Less than half (40%) of the gamblers surveyed were never married, more than half (55%) were married or cohabitating with their partners, and 5% were divorced or separated with their partner at the time of interview. None of the gamblers surveyed was widowed. Worth noting is that, three-quarter (75%) of the gamblers surveyed in the Acholi and Elgon sub regions were married or cohabitating, very few were never married compared to other regions. In terms of the education attainment, majority (48%) of the surveyed gamblers had attained secondary level of education, 20% attained higher level of education beyond secondary, a similar proportion (20%) attained in upper primary (i.e., between grade 5&7, 8% had stopped in lower primary (i.e., between grade 1&4) and only 3% of the gamblers surveyed never went to school. These findings imply majority of gamblers across the regions were to some degree literate and numerate, given that 97% have attended least basic primary education and 68% have attained secondary level of education or higher.

Most respondents were reported they were full-time employed (41%) and 37% were part-time employed; this implies about 78% of the gamblers surveyed were employed in some form of a job earning a salary or wage. Twelve percent (12%) of the gamblers were not employed but were seeking employment opportunities; a greater proportions of the categories were observed in Kigezi (32%) and West Nile (26%). Notable is that only 3% of the gamblers across the regions expressed they were not employed and not seeking any employment. However, a recognizable proportion of gamblers from Acholi (14%) and Lango (21%) expressed that they were not employed and not seeking any employment. Five percent (5%) of the gamblers surveyed were still in school, and the highest percentages of

gamblers still in school were in Lango (15%) and West Nile (24%). One percent (1%) of the surveyed gamblers were retired persons. About one (1) in every three (3) gamblers surveyed reported an average monthly income between 250,001 to 500,000, One (1) in four (4) reported average monthly income between 100,001 to 250,000, only 17% earn income above 500,000 Uganda shillings on a monthly basis and 16% earn 100,000 Uganda shillings or less per month. This finding was consistent across the 14 sub-regions with gamblers from Central 1 (Mukono area) and Elgon sub-regions earning relatively higher incomes compared to other sub-regions. We can also deduce that that majority (74%) of the gamblers are low-income earners with average monthly income below 500,000 Uganda Shillings.

Figure 3: Demographics of Gamblers Surveyed



Source: survey data

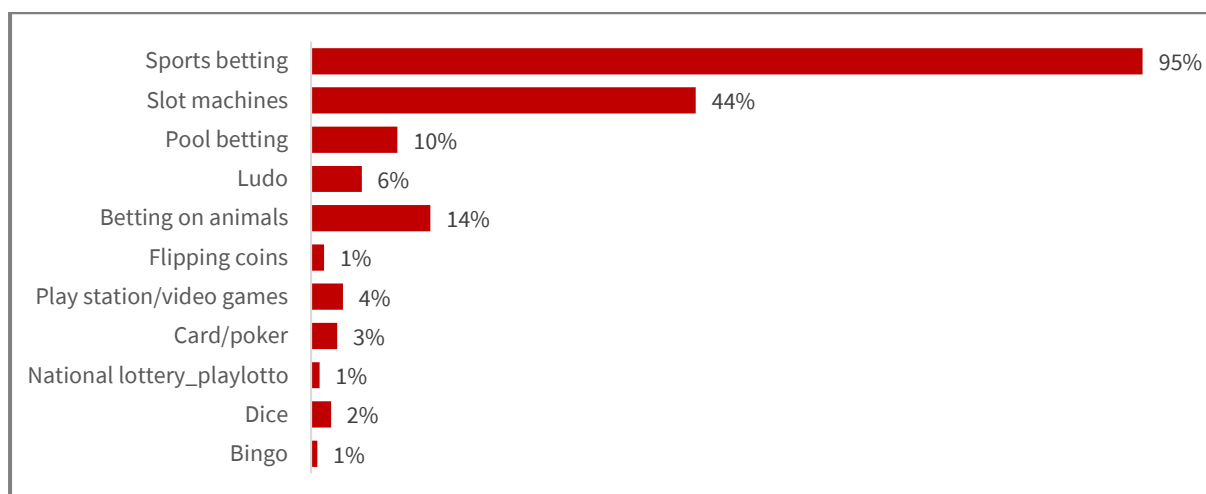
### 3.2 Gambling Participation

In order to assess the extent of gambling participation, surveyed gamblers were asked about; type of gambling activities they regularly play, amount of time they take to reach their nearest gambling outlet, actual time of the day they usually gamble, their frequency of gambling, mode of gambling, age at which they started gambling, number of years they have been gambling, who also gamble and how they acquire money used for gambling.

#### 3.2.1 Type of Gambling Activities

The results revealed that the top 5 commonest type of gambling activities played across the 14 regions were sports betting, followed by slot machine, Pool betting, ludo, betting on animals, play stations and the least played is bingo. Nine-five (95%) of the gamblers surveyed regularly play sports betting, this implies sports betting lotteries is the played gaming activity, possibly widespread and attracts the largest proportions gamblers around the country. Although sports betting appeared generally highest across regions, (86%) of the gamblers from Ankole and 86% of gambler in Westnile are active in slot machine gambling in addition to other gambling activities. More than half of the gamblers in Lango (54%) and Westnile (86%) sub-regions play slot machine and 46% of the gamblers in Acholi also gamble in slot machine. As shown in table 5 below and the annex 4, bingo, national lottery (playlotto), flipping coins, dice and card/poker were the least played gambling activities across the 14 sub-regions.

Figure 4: Type of Gambling Activities



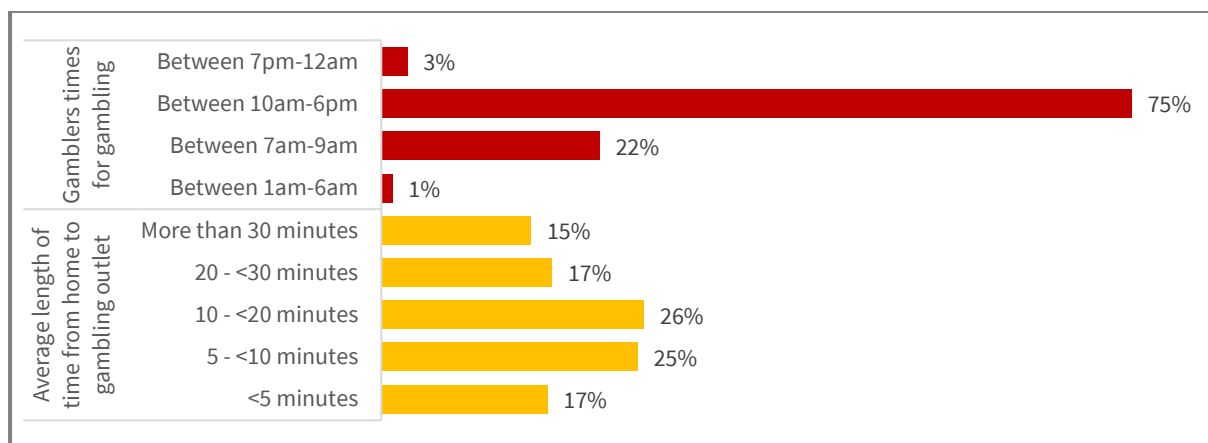
Source: Survey data

#### 3.2.2 Distance to Gambling Outlet and Gambling Time

As part of the survey, the gamblers were also asked on the amount of time they spent from home to the nearest gambling outlet, 17% of the gamblers spend less 5 minutes on foot from home to the nearest gambling outlet, 25% reported they take between 5 to less than 10 minutes, 26% spend between 10 to less than 20 minutes, 17% between 20 minutes and 30 minutes and only 15% of the gamblers walk for 30 minutes or more to reach a gambling outlet. In Central one (area of Mukono) and Central II (Masaka area), more than a quarter of the gamblers have gambling sites less than 5 minutes away from their homes. This finding implies 85% of gamblers are less than 30 minutes away from a gambling outlet, 68% are

less than 20 minutes away from the nearest gambling outlet and mostly a sport betting centres. This finding is also indicative that proximity to gambling sites is one of the major driving factor for one to gamble as quoted by one of the mental health workers during the interviews, “Gambling is always there in your face – gambling products and promotions are in every day spaces. Every place has a gambling outlet. It's increasingly becoming a public health threat for young people. This exposure has contributed to perceptions that gambling is a normal activity”. Three-quarter of the gamblers surveyed play gambling activities between 10 am morning hours to 6pm evening hours, 22% start gambling between 7am to 9am morning hours with the highest percentages observed in Central II - Masaka area (35%) and Central II - Mukono areas (52%) starting gambling as early as 7am – 9am morning hours.

Figure 5: Distance to gambling outlet and gambling time



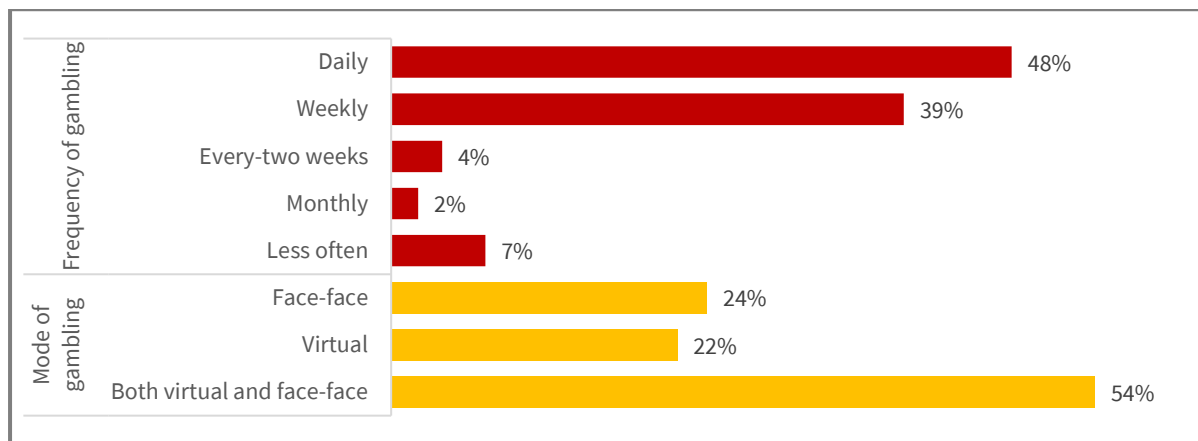
**Source:** Survey data

### 3.2.3 Frequency of Participation and Mode of Gambling

In terms of frequency of participation in gambling activities, the findings confirms that most gamblers take gambling as a source of livelihood or daily priority activity over any other productive engagements. Almost half of the gamblers surveyed (48%) gambles daily and mainly sport betting, and 39% gamble weekly - this implies 87% of the gamblers across the sub-region gambles at least once a week, while in Bunyoro and Elgon area, more than 90% of the gamblers play a gambling activity at least once a week. During the FGDs, punters indicated that the gaming outlets are open for everyone to enter and sit all day. Besides, the gaming outlets show free football and always have many punters. This result is indicative of the detrimental impact of gambling on the gamblers daily economic activities and productivity.

Technology growth over the recent years have also impacted on the mode of gambling, majority (76%) of the gamblers surveyed use online mode of gambling (i.e., internet services); 22% reported using strictly online model and 54% reported using both online and face-to-face. Only 24% reported using strictly face-to-face mode of gambling. This finding confirms the exponential rise in the use of internet in the gambling sector, similarly providing a huge opportunity to regulate the sector using technology driven solutions.

Figure 6: Frequency of participation and mode of gambling



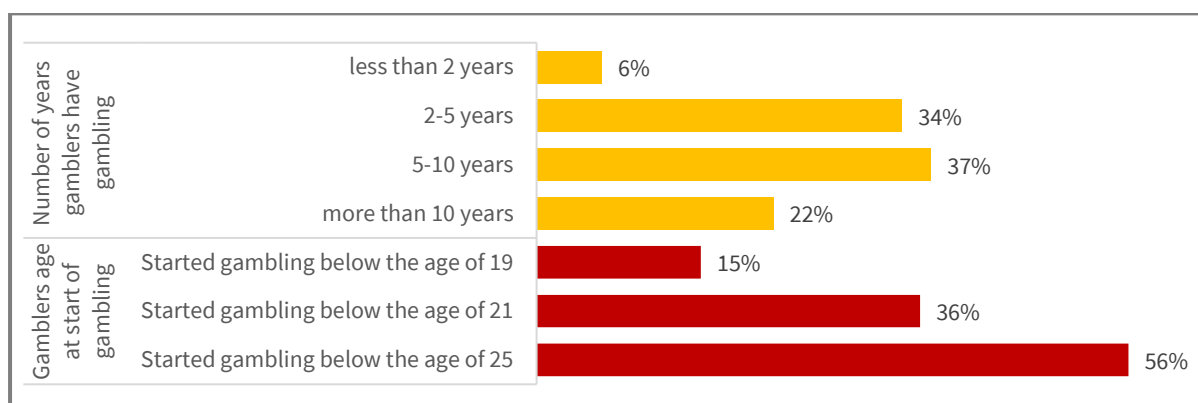
**Source:** Survey data

### 3.2.4 Number of Years in Gambling and Age-At-Start of Gambling

In terms of years spent in gambling, 6% of the gamblers surveyed had spent less than 2 years in gambling, 34% had spent between 2-5 years in gambling, 37% had spent 5-10 years and 22% had spent more than 10 years in gambling. This finding implies that 59% of the gamblers surveyed had spent more than 5 years with addiction to gambling. It also implies the gambling sector greatly sustains its customer base and will continue to grow over years to come.

The survey results revealed that 15% of the gamblers interviewed started gambling when they were below the age of 18, 36% began gambling when they were below the age of 21 and 56% began gambling when they were below 25. Qualitative data also points out that gamblers are not aware of the legal age required for one to start gambling under the current laws governing the gambling industry in Uganda. The involvement of persons under the age of 18 years in gambling activities is a matter of concern.

Figure 7: Number of years in gambling and age-at-start of gambling

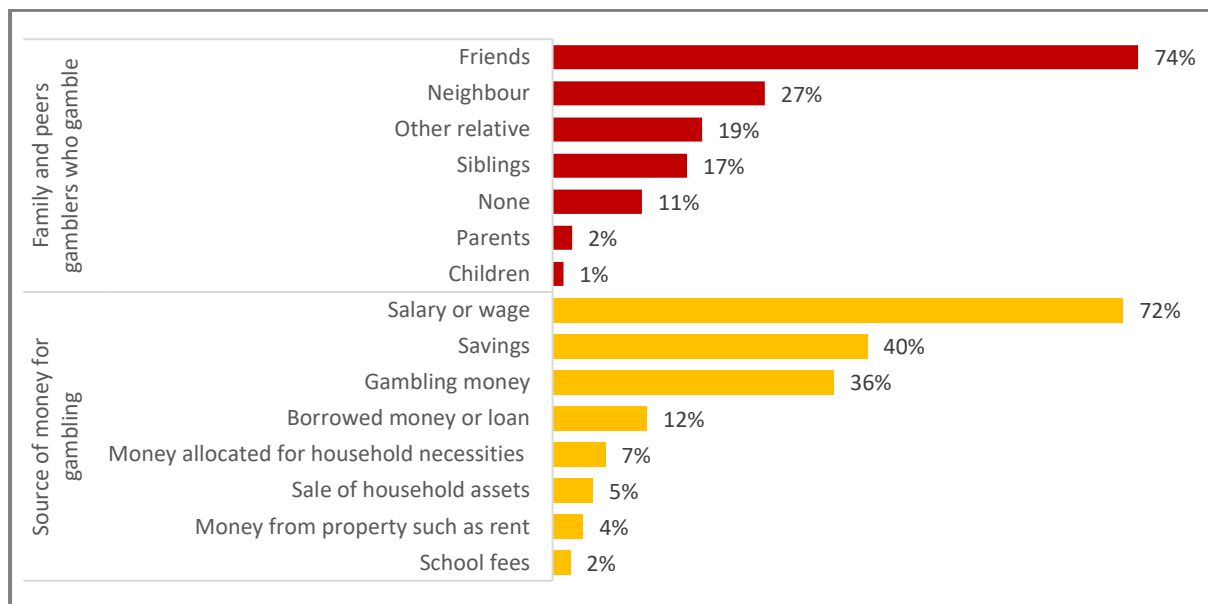


**Source:** Survey data

### 3.2.5 Gambling Status of Familial sources of money for gambling

As it is in the saying “Tell me who your friends are, and I will tell you who you are.”, true to the saying, 89% of the gamblers pointed out that their closest acquaintances such as friends, neighbor, siblings, other relatives etc. are also frequent gamblers. The majority (74%) of the gamblers surveyed reported that they acquire money for gambling from salary or wage, 40% gamble using savings, 36% use money won from gambling, 12% borrow loan and 7% use money allocated for household necessities to finance their gambling. The direct effect of gambling expenditure on salary or wage, savings and a cut on money allocated for household necessities suggest the negative impact of gambling on household welfare.

Figure 8: Gamblers whose family and peers of gamble and their sources of money for gambling



Source: Survey data

### 3.3 Reasons for Gambling

As shown in figure 9, more than half of gamblers surveyed (82%) cited that their main reason for gambling was to win money with the purpose to support worthy causes such as pay bills, rent and cater for household necessities, 8% of the gamblers cited that they out of excitement and to entertain themselves, 5% reported that gambling is their hobby while 2% alluded to gambling as a means of socialization with peers and friends. A very small proportion of the respondents cited that they gamble to feel good (1%). Notable is that 1% gamble to distract themselves from bad feeling and 1% pointed out other reasons such as to pass time, because they like football. This was equally highlighted during FGD with punters, one gambler cited;

*“We need money, and we want to get much money, for instance, I can bet Ugx 1,000 and possibly win 300,000/= and if I don't get, I will keep betting with hope to win in one of the many trials”.*

During the FGDs and KIs, unemployment came out strongly as an important reason for gambling, gamblers cited lack of employment opportunities or under employment, thus which drives young people to spend more time in gambling as a means to get money to sustain themselves. Another gambler cited;

*“I actually don’t want to gamble but I find myself here since I don’t have a job”.*

This view was echoed by one of the gambling operators who indicated that most youth are gambling due to lack of viable alternative employment opportunities., he cited;

*“It's just that people have no jobs, so they are left to derive pleasure from gambling as they make money, and the pleasure motivates them to play more. If they had jobs, why would they come to betting companies?”.*

Interviews with selected board members also revealed that the obsession with English premier league, high levels of poverty associated with unemployment and huge influx of investors in the gambling industry has brought gaming activities closer to the populace. The board members further acknowledge the industry is growing rapidly and the growth is accelerated by technological advancement and increased access to internet.

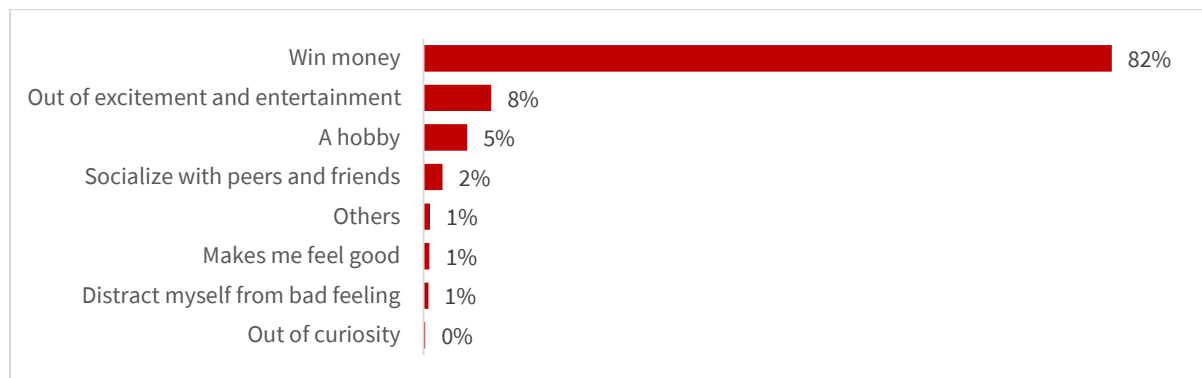
Although reasons for gambling are generally even across gamblers, a cross tabulation analysis reveals that reasons for gambling differs among gambler of different social groups; gamblers with higher income were more likely to gamble for reasons such as entertainment and out of excitement. For example, 37% of those who earn between 2,000,001 to 4,000,000 cited their most important reason for gambling is entertainment and out of excitement and 50% of gamblers who earn more than 4,000,000 Uganda shillings cited the same reasons as the most important reason to gamble. This finding implies that those gamblers with higher income status have more preferred desired reasons for gambling while those with low income status gamble to win money and meet basic needs and are the ones at risk of addictive and harmful gambling. This finding was also consistent with findings from the FGDs with gamblers. A case in point, one gambler cited;

*“For us youth with no jobs, if we happen to have like Ugx 2,000, we always want to multiply it through gambling to make money to support our needs. Unfortunately, we lose most of the time. I really feel gambling needs people who have jobs, because even if they lose money, they know that tomorrow they will go and work and get more money.”*

A higher percentage of fully employed and retired gamblers also cited entertainment and out of excitement as their most important reason for gambling compared to the gamblers who are still in school, unemployed and those in part-time employment. Age and level of education was also observed to have influence the reasons for gambling. For example, the relational analysis results revealed that the proportion of respondents who gamble with the main aim to win money also reduces with their age and level of education. These results confirm that gamblers with low socioeconomic and welfare status are often more likely to gamble for undesirable reasons.



Figure 9: Reasons for Gambling



Source: Survey data

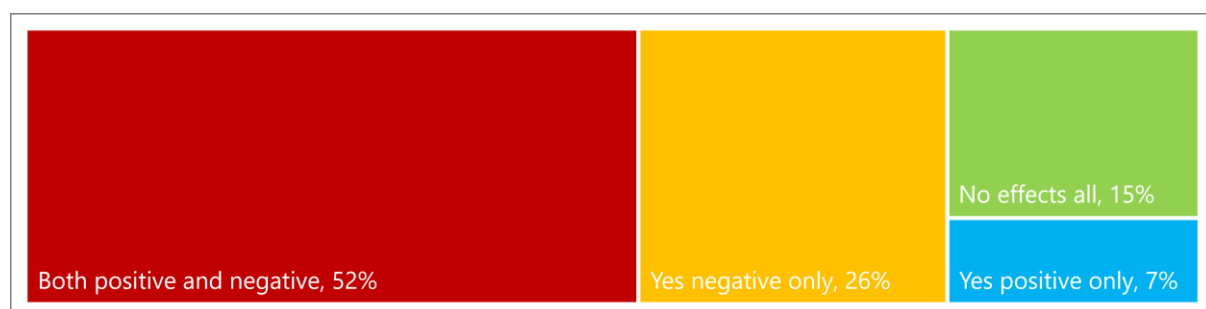
### 3.4 Socioeconomic Impact of Gambling

#### 3.4.1 General Impact of Gambling

In order to understand the impact of gambling on gamblers and their households, several questions were asked to gamblers. First, respondents were asked whether they had ever experienced any impact of gambling in their lives and their family welfare; positive, negative or both positive and negative effects. They were also asked about the negative impact on their lives, school and family. These assessment results revealed that, 85% of the gamblers interviewed experienced impact of gambling both on their own and family welfare. Majority (52%) indicated that they had experience both positive and negative impact on their welfare, 26% cited they had experienced only negative impact their own welfare, 7% cited gambling impacted them their welfare positively. However, 15% cited that they had no negative or positive effects of gambling.

The study also revealed that the effects of gambling on gamblers and their families does not vary across different age groups, and among gamblers of different marital status. However, the impact of gambling on social welfare were found to vary across gamblers with different level of education, employment status and level of income. Gamblers with higher education level and income status reported positive effects of gambling. As expected, gamblers with higher frequency of gambling activities cited negative effects of gambling in their welfare. These findings generally reveal that gamblers with better social welfare status have more positive impact or no impact of gambling compared to those with low social welfare status.

Figure 10: General Effects of Gambling



Source: Survey data

### 3.4.2 Impact of Gambling on Gamblers

Of the gamblers who cited negative impact of gambling, 42% indicated that the effects had contributed to the reduction in their savings as indicated in figure 11 . In Acholi and Kigezi, 80% and 82% of the gamblers surveyed reported reduced saving due to gambling activities respectively. Thirty-three percent (33%) of the gamblers cited misuse of money at work for gambling; with the highest proportion recorded in Ankole (62%) and Tooro (58%). Twenty-nine percent (29%) cited reduced productivity at work; with the highest in Bunyoro (56%) and Tooro (68%), 25% of gamblers cited psychosocial distress as the effects of gambling. Twelve percent (12%) indicated that they had registered slow growth at work place owing to the effects of gambling, 9% indicated that they practiced substance abuse as a result of harmful gambling practice and 8% felt they have ever been socially isolated as a result of gambling; 20% in Ankole and 20% in Central II – Masaka areas.

Five percent (5%) of the gamblers cited loss of job as the impact of gambling in their lives. Three percent (3%) cited peer violence and suicide attempt as some of the negative effects of gambling in their lives. Two percent of the gamblers surveyed cited gambling as the main cause of their previous risky sexual behaviours, another 2% acknowledged that they contracted disease and 2% admitted to have committed offence due to effects gambling. Some gamblers contribute their early childbearing to gambling related, how? This is an area for future research to assess the impact of gambling on use of contraceptive services. Findings from FGD consistent with these quantitative results, one gambler cited;

*“We used not to drink alcohol, now almost all of us drink! For sure we experience distress, anxiety and sometime illness due stress from losses in gambling. Some colleagues in school have dropped out-of-school and others confess deterioration in their performance due to their engagement in gambling”*

A gambling Operator from Central Uganda cited;

*“Some gamblers here are living a regretful life due to over gambling, two people have ever committed suicide here. Many are stressed and depressed, and some confess to have divorced and separated with their families. For example, a guy from Luweero ended up committing suicide after gambling his employer’s money. Three others have collapsed from here after losing huge amounts of money”.*

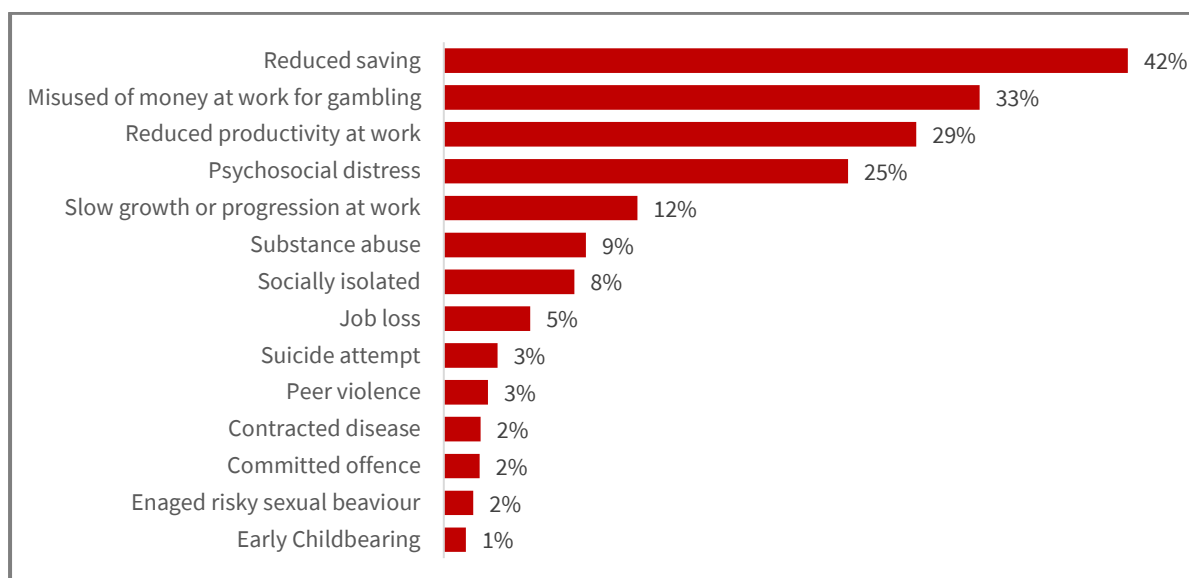
A punter in Central Uganda also cited;

*“One gambler named **Salongo**, a chef by profession says he has lost everything to gambling. He drinks alcohol from morning up to evening”.*

During an FGD with punters in Mbale, a punter also cited

*“Here in Namakwekwe, Mbale district, a punter ran to the road wanting a trailer to knock him dead after losing huge sums of money to sports betting. Fortunately, he was however rescued by onlookers”.*

Figure 11: Impact of Gambling on Gamblers



**Source:** survey data

### 3.4.3 Impact of Gambling on Families

In order to assess the impact of gambling on families, we asked the gamblers whether they had ever spend money intended for household necessities, we also assessed whether they they displace money meant to support family basic needs on gambling, assessed the impact gambling on family relationships, payment of household utilities, household assets, positive parenting and family care. According to the gamblers, the impact of gambling on their family welfare is equally enormous. Majority (25%) of the gamblers cited misuse of money intended for household necessities as the most widespread impact of gambling at household level, 20% acknowledged that they now spend less on basic needs so as to save money to bet, 20% of the gamblers also cited tensions in their family relationships as a result of uncontrolled engagement in gambling activities, 14% indicated delayed in payment of household utilities, 11% could recall having sold their household assets to finance their gambling activities, 6% cited that their children have received poor parenting due to uncontrolled gambling practices and expenditures. Six percent (6%) of the gamblers cited domestic violence as one of the impacts of gambling in their families and 3% reported to have divorced and separated with their families as results of uncontrolled gambling.

During key informants interviews with the Local Council 1s, majority confirmed that gambling had resulted into increased domestic violence in families and disruption of family cohesion in their communities. This is mainly because most men have failed to provide and care for their families as gambling consumes most of their productive hours. Some have sold family assets such as televisions, motorcycles and land. To children, there are failure to provide for basic needs including fees which is one of the contributing factor to school dropout and possibly. In worst case scenarios, some men and women have divorced.

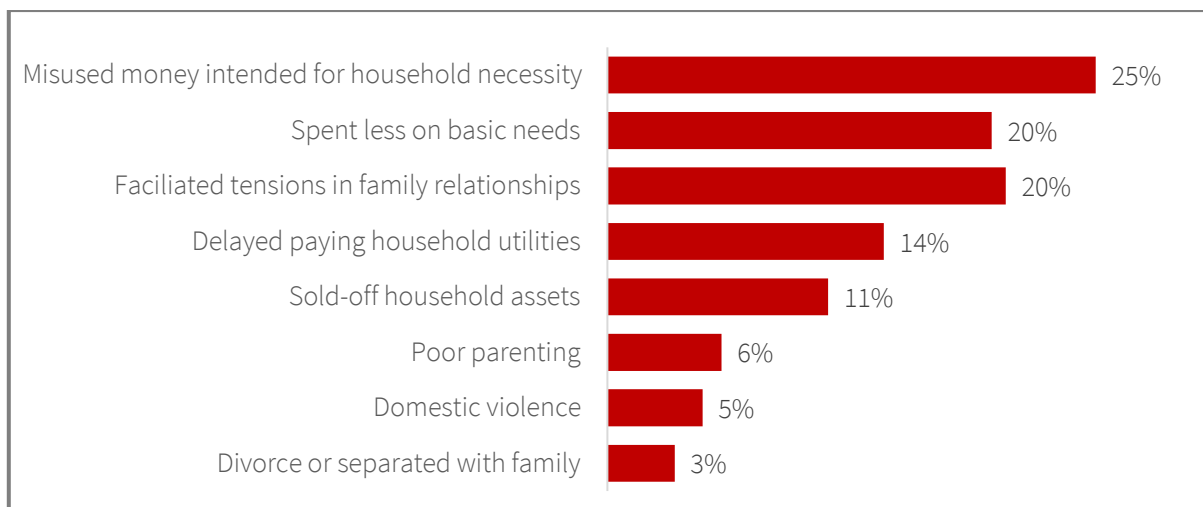
A Local council one in Mukono cited;

*“I know of a family that has spent everything to rehabilitate their son who developed mental issues due to gambling and drug abuse. The boy is always in and out of hospital and this has drained the family financial resources”.*

From Lira, a Louncil Council also cited;

*“Gambling has disrupted some household financial stability since some men have lost jobs, business assets such as motorcycles, or are no longer productive because they spend most of their productive time gambling”.*

Figure 12: Impact of gambling on families



Source: survey data

#### 3.4.4 Impact of Gambling on Communities

The impact of gambling at community level is manifested inform of increased insecurity due to youth looking out for money to gamble. Some spots in urban areas have been marked as black spots for phone snatching, handbag grabbing, rape etc. According to LC1 chairpersons across the 14 sub-regions, there is an increase in the number of schools dropouts due to either parents failing to pay fees due to gambling or learners pursuit of education disrupted by addictive gambling.

The current youth have become a threat to the community safety since they are idle and yet requires money to gamble. In extreme cases, murders have occurred as a result of aggravated robberies, and suspect cases are known addicted gamblers in the community. According to police, there is a particular case where a gambler lost money borrowed from a friend to gambling and could not pay back, the ownder of money fought the gambler leading to death.

### 3.5 Health Impact of Gambling

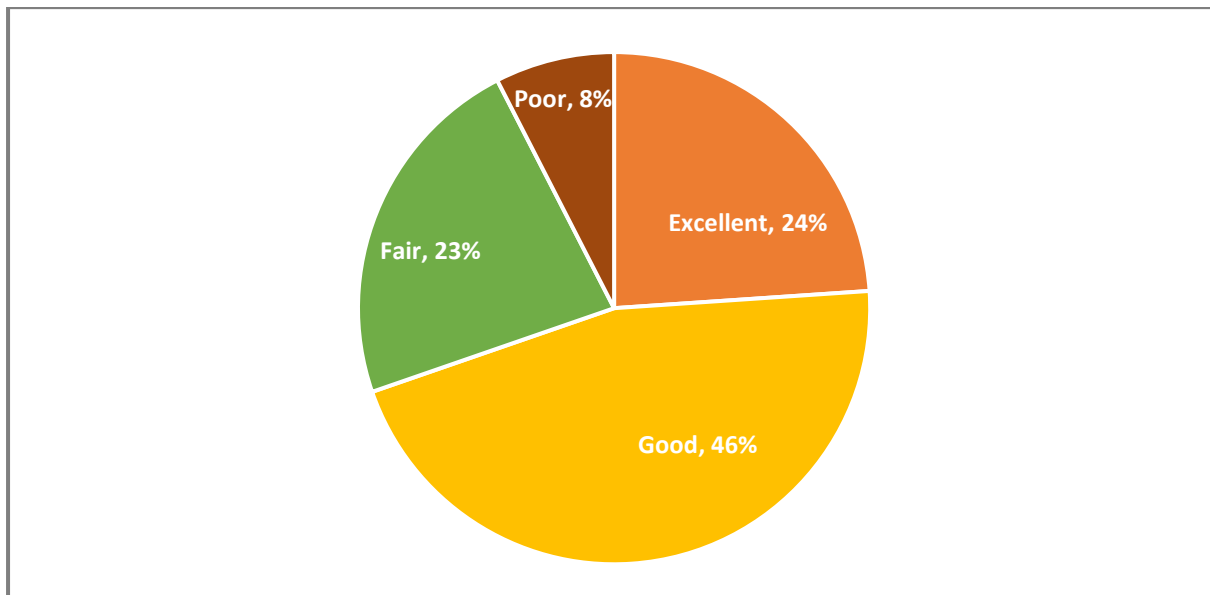
#### 3.5.1 General Health Status of Gamblers

One of the objectives of this study was to examine the impact of gambling on physical and mental conditions of gamblers. In order to do so, we started by assessing the general health status and behavioral health of the gamblers surveyed. Past studies support the notion that gambling especially harmful gambling are greatly associated with health-related problems; especially physical, mental and emotional health.

To assess the state of general health of gamblers surveyed including physical, mental and emotional health status, the surveyed gamblers were first asked to rate their general health as poor, fair, good or excellent. Based on this questions, majority of the gamblers reported their health was good (46%), 24% reported their general health was excellent, 23% reported their general was fair and least proportion (8%) reported their general was poor as shown in the figure below.

The largest percentage of gamblers (49%) who not categorized as problem gamblers reported their general health was good and 30% of the non-problem gamblers reported their health was excellent. Forty-one percent (41%) of gamblers who were categorized as problem gamblers or at-risk of problem gambling reported their health was good and 32% reported their general health was fair. Drawing from these findings, non-problem gamblers are less likely to report their health was fair or poor which miplies problem gambling effects have a bearing on some one's general health status.

Figure 13: General health status among Gamblers Surveyed



**Source:** Survey data

### 3.5.2 Impact on Physical and Mental Health

In order to assess the impact of gambling on mental health and depression, participants were also asked 5 sets of questions;

- 1) *To think of their physical health (include physical illness and injury) and recall how many days during the past 30 days was their physical health not good,*
- 2) *To think of their mental health (includes stress, depression, and problems with emotions) and recall how many days during the past 30 days was your mental health not good,*
- 3) *Asked to recall whether they have ever had two weeks or more when they lost interest in most things they like do or enjoy such as work and hobbies etc.*
- 4) *Asked whether during the past 12 months, they had ever felt so sad or hopeless almost every day, for weeks or more in a row that they stopped doing some usual activities and question*
- 5) *Whether there had ever been a period of at least one week when they were so irritable or short-tempered that you threw, broke things, started arguments, shouted at people, or hit someone.*

As shown in figure 14, the results of the physical and mental health assessment revealed that, 60% of the gamblers surveyed reported their physical health was good throughout the past 30 days preceding the survey, 37% of the gamblers reported that their physical health was not good on at least one day, and 21% reported their physical health was not good on at least five days in the past 30 days preceding the survey. In fact, gamblers who reported their physical health not good, indicated their physical health was not good for at least 3 days on average.

More than half of the gamblers surveyed (52%) reported their mental health was good throughout the past 30 days preceding the survey, 48% of the gamblers reported their mental health was not good on at least one day, and 31% reported their physical health was not good on at least five days in the past 30 days preceding the survey. Similarly, gamblers who reported their mental health not good, indicated their mental health was not good for at least 5 days on average.

Further analysis showed that 49% of the gamblers surveyed reported to have ever experienced loss of interest in things they enjoy for at least more than 2 weeks in the past month, 48% reported they had ever felt so sad or hopeless almost daily for a week or more which disrupted their daily activities, 40% had ever felt social emotionally unwell for a about week; felt irritable, thrown things, broke things, shouted at people or others occasionally hit someone. More than a half of those gamblers surveyed reported that they were certain that their physical and mental conditions were greatly caused by stress and anxiety driven by losses from gambling.

Figure 14: Impact of Gambling on Physical and Mental Health of Gamblers

Physical and Mental Health	Affirmative (%)
1) Gamblers who reported their <b>physical health was good throughout the past 30 days</b>	63%
2) Gamblers who reported their <b>physical health was not good</b> on at least <b>one day</b> in the past 30 days.	37%
3) Gamblers who reported their <b>physical health was not good</b> on at least <b>five days</b> in the past 30 days.	21%
4) <b>Average number of days</b> surveyed gamblers reported their <b>physical health was not good</b> in the past 30 days.	3
5) Gamblers who reported their <b>mental health</b> was good throughout the past 30 days	52%
6) Gamblers who reported their <b>mental health was not good</b> on at least <b>one day</b> in the past 30 days.	48%
7) Gamblers who reported their <b>mental health was not good</b> on at least <b>five days</b> in the past 30 days.	31%
8) <b>Average number of days</b> surveyed gamblers reported their <b>mental health was not good</b> in the past 30 days.	5
9) Ever lost interest in things I enjoy for more than 2 weeks	49%
10) Ever felt so sad or hopeless almost daily for weeks or more - disrupting my daily activities	48%
11) Ever felt irritable, threw things, broke things, shouted at people or hit someone for one week	40%
12) Gambling is a significant cause of physical and mental health condition had resulted from gambling related stress and anxiety	53%

Source: Survey data

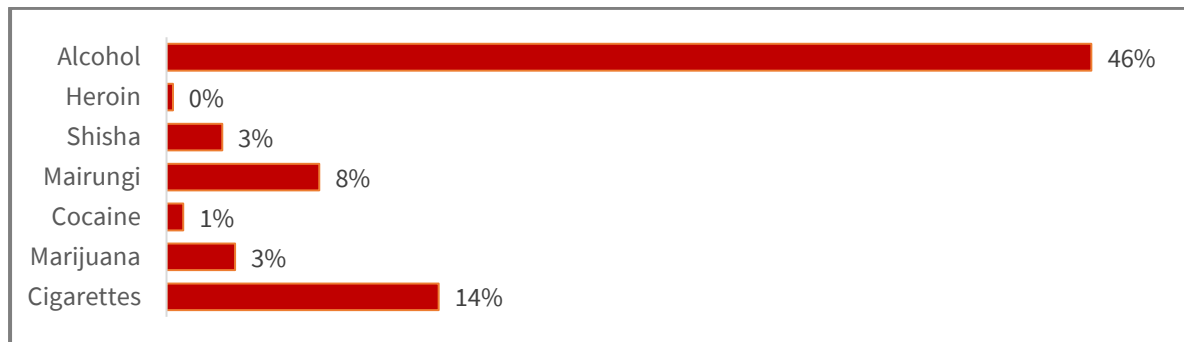
### 3.5.3 Substance Abuse

To assess the level of use of substance among gamblers, 2 questions were posed to the surveyed gamblers; 1) Gamblers were asked on how many days did used the substances and drugs during the last 30 days, and later aske second question 2) whether gambling has ever been an important that attributed to the use of substance and alcohol. The key substances use assessed included Cigarettes, marijuana, Cocaine, khat (mairungi), shisha, heroin and alcohol in the context of Uganda. Research findings showed that people with gambling addictions do develop uncontrollable consumption of alcohol.

The substances most often used by participants in the past 30 days was alcohol (46%) followed by cigarettes (14%), followed by mairungi (8%), marijuana (3%), Shisha (3%), Cocaine (1%) and no one reported using heroin. Across the sub-regions, alcohol use in the last 30 days was highest in Ankole (77%), Central II - Mukono areas (61%), Tooro (56%), Bunyoro (54%) and Lango (50%). Mairungi use was highest in Acholi (16%), Tooro (16%), Central I – Masaka area (14%) and Central II – Mukono area (12%). Thirty-three (33%) of the gamblers surveyed in Lango use Cigarettes and 34% of those surveyed in Tooro used Cigarettes.

Even though Marijuana use is evenly low across regions, in Central II – Mukono area and Lango sub-region, 14% and 13% of the surveyed gamblers had used Marijuana in the past 30 days preceding the survey. Relational analysis results shows that substance use such as alcohol, cigarette and mairungi were associated to problem gambling risks and the risk were high in Acholi, Ankole, higher in Central II – Mukono area, Tooro and highest in Lango sub-region when compared to other regions.

Figure 15: Substance Use among Gamblers



**Source:** Survey data

### 3.5.4 Suicide Thoughts, Plans and Attempts

Although previous studies have been inconsistent, problem gamblers tend to show high rates of suicidal behavior. To assess the prevalence of suicide thoughts, plans and attempts among the surveyed gamblers, participants were asked 3 questions; 1) Whether they had ever seriously thought about killing themselves, 2) whether they had ever planned and attempted or tried to kill themselves and 3) whether gambling ever an important cause for attempting to kill themselves. Findings then revealed that 11% of the gamblers surveyed ever thought of themselves, 4% planned and attempted to kill themselves and 4% reported gambling as a significant cause for the suicide thoughts and attempts. The highest thoughts of suicide are in Ankole (31%), Kigezi (48%) and Lango (27%), and the actual suicide attempts were highest in Kigezi (11%) and Lango sub-region (12%) as indicated in figure 16 Relational analysis revealed that suicide thoughts and attempt were highest among gamblers with gambling problem compared those without or with lower risk of developing problem gambling.

Interviews with mental health workers revealed that problem gambling has led to mental health issues. The cases of problem gambling being managed at regional referral hospital exhibit high rates of mental health issues caused by addictive and harmful gambling. According the informants, most of the patients registered at the hospital have experienced huge financial and emotional consequences of gambling, and these were the tiggers of their increased stress levels, feelings of guilt, shame, and even suicidal thoughts.

On the other hand, problem gambling in some patients has progressed into a condition known as gambling disorder; characterized by persistent and recurrent gambling behavior, leading to significant impairment and hospitalized. This addiction disrupts an individual's personal relationships, work or academic performance and overall quality of life.



Figure 16: Suicide Thoughts, Plan and Attempts

Suicide Thoughts, Attempts and Suicide Association Gambling	Percent
1) Gamblers who ever thought about killing themselves	11%
2) Gamblers who ever attempted or tried to kill themselves	4%
3) Gamblers who reported gambling as an important cause for the suicide thoughts and attempts	4%

**Source:** survey data

### 3.6 Problem Gambling

Problem gambling can be defined as type of gambling in which a gambler has difficulties controlling the amount of money and /or time spent on gambling which leads to adverse consequences for the gambler, his household, or the community (Williams et al. 2012). There are a number of approaches used to measure problem gambling in a population, these approaches include South Oaks Gambling screen, Diagnostic Statistical Manual, 17-item NORC Diagnostic Screen for Gambling Disorders, 9-item Problem Gambling Severity Index (PGSI) and the Gamblers Anonymous Questionnaire (Kryszajtys et al., 2018). For this study, we used the GA questionnaire where one is classified as a problem gambler if they answer a minimum of 14 questions out of the 20 GA questions in the affirmative. Table 15 displays the set of questions used in the GA questionnaire. The 20 GA questions were appended as part of the gambler survey and administered to gamblers found at the gambling outlet on the survey date. It is intended that estimates provided by these 20 sets of questions will provide adequate information to inform discussion, plans and implementation directives on responsible gambling but also equip mental health counsellors including educators with information on behavioural health of gamblers, the scope and extent of the problem in Uganda at large.

#### 3.6.1 Gamblers Anonymous Questionnaire and Responses

Based on the 20 Gambling Anonymous (GA) questions as shown in figure 17, majority (85%) of gamblers surveyed had ever felt a strong urge to return and win more after a win from gambling, 83% had ever felt they must return as soon as possible and win after loss from gambling, 79% reported have ever gambled longer than planned or intended, 71% reported that they have ever gambled to get money to solve financial difficulties, 70% cited experiencing difficulty in sleeping due to gambling, 66% reported they often gambled until losing their last shilling, 66% cited that they have ever had an urge to celebrate good fortune by gambling, 66% ever felt remorse after gambling, 57% reported they had ever lost time from work or school due to gambling activities, 57% of the gamblers reported that gambling has ever made their home life unhappy, 51% cited they have ever gambled to escape worry or trouble they were in, Half of the gamblers had ever borrowed money to finance their gambling activities, 49% of gambler expressed being always reluctant to use ‘gambling money’ for normal expenditures, 49% cited a decrease in their ambition or efficiency as a results of gambling, 48% of the gamblers cited that gambling made them careless of the welfare of themselves and their family, 43% indicated gambling affected their reputation, 41% cited that arguments, disappointments and frustrations give me urge to gamble, 39%

ever sold anything including household asset to acquired money to finance gambling, 22% acknowledge that they have ever considered or committed an illegal act so as to acquire money to gamble and the least (20%) ever felt self-destructed with suicide tendencies as a result of gambling as presented in the table below.

Figure 17: Problem Gambling Risk or Indicators among Gamblers Surveyed

Problem gambling risks based on GA 20 questions	Affirmative (%)
1) Ever felt a strong urge to return and win more after a win	85%
2) Ever felt I must return as soon as possible and win after loss	83%
3) Ever gambled longer than planned	79%
4) Ever gambled to get money to solve financial difficulties	71%
5) Gambling ever caused me difficulty sleeping	70%
6) Often gambled until losing my last shilling	66%
7) Ever had an urge to celebrate good fortune by gambling	66%
8) Ever felt remorse after gambling	66%
9) Ever lost time from work or school due to gambling	57%
10) Gambling ever made your home life unhappy	57%
11) Ever gambled to escape worry or trouble	51%
12) Ever borrowed to finance your gambling	50%
13) Ever been reluctant to use 'gambling money' for normal expenditures	49%
14) Gambling caused a decrease in your ambition or efficiency	49%
15) Gambling made you careless of the welfare of yourself or your family	48%
16) Gambling affected your reputation	43%
17) Arguments, disappointments or frustrations give me urge to gamble	41%
18) Ever sold anything to finance gambling	39%
19) Ever considered or committed an illegal act to finance gambling	22%
20) Ever self-destruction or suicide as a result of gambling	20%

**Source:** Survey data, method adopted from South Africa National Gambling Board, 2013

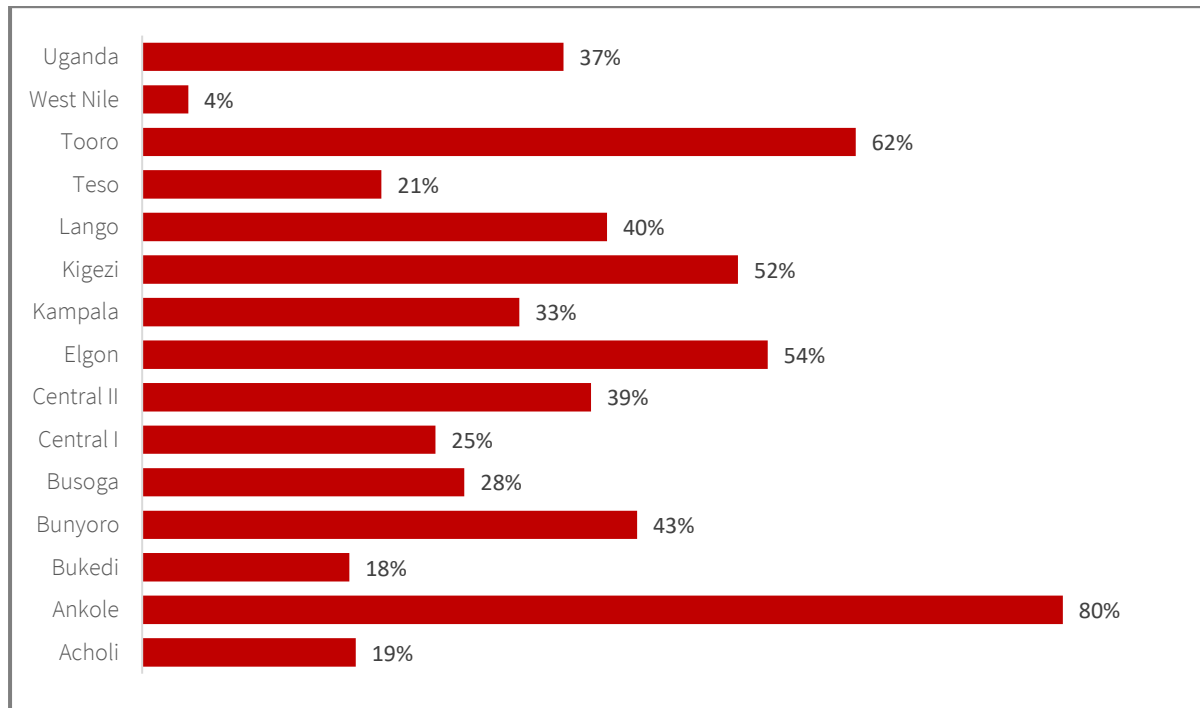
### 3.6.2 Prevalence of Problem Gambling

As described in sub section 3.6, the cutoff point of 14 affirmatives (yes responses) on the GA questionnaire was used as a threshold for classify gamblers into problem and non-problem gamblers. More than third of the gamblers surveyed were classified as problem gamblers (37%), implying 63% of the gamblers surveyed were non-problem gamblers. Worthy note is that 16% of the gamblers checked yes on 18 of the GA 20 questions – implying their extent of problem gambling was higher than those classified based on the cutoff of 14 affirmative (yes responses), and 5% of the surveyed gamblers checked all the GA 20 questions – implying 5% of the surveyed gamblers had the highest extent of problem gambling; 16% in Ankole, 9% in Bunyoro, 5% in Kampala and 21% in Kigezi sub-region.

The general prevalence of problem gambling based of the cutoff of 14 affirmative on the GA questionnaire differed unevenly across the sub-regions, Ankole (80%), Tooro (62%), Elgon (54%) and Kigezi (52%) were the sub regions with highest prevalence of problem gambling while Teso (21%), Acholi (19%), Bukedi (18%) and West Nile (4%) recorded the lowest prevalence of problem gambling as indicated in the table below. As described in sub section

3.6a, the desire to win more after or win after a loss more, gambled longer than planned and the desire to gambled to get money to solve debts or financial difficulties were the major driver of uncontrolled gambling.

Figure 18: Proportion of Gamblers with Gambling Problem



**Source:** Survey data

### 3.7 Factors Associated with Problem Gambling

In this sub section, we explored the use of relational analysis to examine the associated factors to problem gambling using bivariate and multivariate analysis and we answered the following research questions:

- 1) Does demographic factors such as sex, age, marital status, education level, economic status and income most associated with problem gambling?
- 2) Does distance to gambling outlet, mode, frequency and time of gambling, age-at-start of gambling, reasons for gambling, influence of acquaintances, access to gambling education and access problem to gambling services relate to problem gambling?

#### 3.7.1 Bivariate analysis of factors associated with problem gambling.

Results from a series of simple logistic binary regression models showed that age, marital status, education level, and employment status, income, distance to gambling outlet, mode, frequency of gambling, age-at-start of gambling, reasons for gambling, influence of acquaintances, access to gambling education and access problem to gambling services were associated with problem gambling. In summary, all the study variables were found to

be associated with problem gambling except sex and the time one gambles at bivariate level of analysis.

The study revealed that older gamblers were less likely to report problem gambling or identify as a program gambler compared to gamblers below the age of 21; gamblers in the age group of 31-40 ( $p<0.1$ ), 41-50 ( $p<0.1$ ) and those above 50 ( $p<0.05$ ) were less likely to report problem gambling compared to those below 21 years. At-at-start of gambling was also associated with problem gambling, gamblers who started gambling below the age of 18 were 1.682 times more likely to report problem gambling compared to those above 18 years ( $p<0.05$ ), and those who started gambling below the age of 21 were 1.388 times more likely to report problem gambling compared to those age 21 years and above ( $p<0.05$ )

Divorced gamblers were 2.1 times more likely to report problem gambling compared to never married gamblers ( $p<0.05$ ), and interestingly, gamblers who are married or cohabitating were instead less likely to report problem gambling compared to the never married gamblers ( $p<0.1$ ).

In terms of education, gamblers with education level above secondary were less likely to report problem gambling compared to those who never went to school ( $p<0.05$ ), gamblers with secondary level of education were also less likely to report problem gambling compared to those who never went to school ( $p<0.1$ ).

Gamblers who are in full or part-time employment were less likely report problem gambling compared to those not employed and seeking employment ( $p<0.05$ ). Similarly, gamblers whose average monthly income range between 1,000,001 to 2,000,000 were less likely to report problem gambling compared to those who earn 50,000 Uganda shillings of less ( $p<0.1$ ). Gamblers who are located more than 30 minutes away from the nearest gambling outlet were less likely to report problem gambling compared to those who live close about 5minutes away from the gambling outlet ( $p<0.05$ ), those who stay between 5 - <10 minutes away were also less likely report problem gambling ( $p<0.1$ ).

Compared to gamblers who play gambling activities as frequent as daily, those whose frequency of gambling is weekly, every-two weeks, monthly and less often were less likely to report problem gambling (where  $p<0.05$ ,  $p<0.1$ ,  $p<0.1$  and  $p<0.05$  respectively).

Mode of gambling had a significant bearing on one reporting problem gambling; gamblers who often use both online and face-face mode of gambling were 2.576 more likely to report problem gambling compared to those who use only face-face mode ( $p<0.5$ ), and those who use only vitrail mode were also more like report problem gambling compared to the face-face counterparts ( $p<0.05$ ).

Compared to those gamble out of excitement and entertainment, gamblers who gamble to win money were 2.756 times more likely report problem gambling, those who gamble to win money to support family causes were 13.045 times more likely to report problem gambling ( $p<0.05$ ), gamblers who gambles as a hobby were 3 times likely to report problem gambling ( $p<0.05$ ), those gamble to socialize with peers were also 3.072 time more to report problem gambling ( $p<0.05$ ), those gamble to escape self from bad feeling were 7.361 times more likely to report problem gambling ( $p<0.05$ ) and gamblers who engage in gambling out of curiosity were 11.778 more likely to report problem gambling ( $p<0.05$ ). These findings implies any reason to gambling apart from excitement and leisure purposes are bound to drive someone to uncontrollable addiction and harmful gambling practices.

Study findings also asserts that the types of acquaintances around a gambler determine his or her chances of reporting problem gambling, for example, gamblers whose parents gamble are 2.183 times more likely to gamble compared to those who parents do not gamble ( $p<0.05$ ), gamblers whose closest friends gamble also 2.145 time more likely to report problem gambling compared to those whose closest friends do not gamble ( $p<0.05$ ). Social behaviours such as sale of household assets to acquire money for gambling, misuse of money for family necessity to gamble were also associated with higher likelihood to report problem gambling. As expected, gamblers with access to gambling information and education were less likely to report program gambling ( $p<0.05$ ) and those who know where to access problem gambling services were also less likely to report problem gambling – signifying good uptake of gambling education, counselling and problem gambling services units.

Figure 19: Factors Associated with Problem Gambling

Factors associated to problem gambling	Odds Ratio	P-value	Confidence Interval (95% CI)	
<b>Sex</b>				
1) Male	0.574	0.269	0.214	1.537
2) Female	Ref	Ref	Ref	Ref
<b>Age of gambler</b>				
1) Below 21	Ref	Ref	Ref	Ref
2) 21-30	0.713	0.135	0.458	1.111
3) 31-40**	0.675	0.096	0.425	1.072
4) 41-50**	0.605	0.059	0.359	1.020
5) Above 50*	0.372	0.024	0.158	0.878
<b>Marital status</b>				
1) Never married	Ref	Ref	Ref	Ref
2) Married/cohabiting**	0.805	0.051	0.649	1.000
3) Divorced*	2.100	0.002	1.321	3.339
<b>Education level</b>				
1) Never went to school	Ref	Ref	Ref	Ref
2) Lower primary grade 1-4	0.749	0.389	0.389	1.444
3) Upper primary grade 5-7	0.688	0.217	0.380	1.245
4) Secondary*	0.509	0.020	0.288	0.900

Factors associated to problem gambling	Odds Ratio	P-value	Confidence Interval (95% CI)	
5) Above secondary level*	0.436	0.007	0.240	0.794
<b>Employment status</b>				
1) Currently in-school	0.670	0.137	0.395	1.136
2) Employed part-time*	0.715	0.047	0.513	0.996
3) Employed full-time*	0.524	0.000	0.376	0.729
4) Not employed, not seeking employment**	0.578	0.091	0.306	1.092
5) Not employed, seeking employment	Ref	Ref	Ref	Ref
6) Retired	0.250	0.081	0.053	1.187
<b>Average monthly income</b>				
1) 5,000 to 50,000	Ref	Ref	Ref	Ref
2) 50,001 to 100,000	0.860	0.588	0.499	1.482
3) 100,001 to 250,000	0.760	0.273	0.465	1.241
4) 250,001 to 500,000	0.757	0.257	0.469	1.225
5) 500,001 to 1,000,000	0.871	0.609	0.514	1.478
6) 1,000,001 to 2,000,000**	0.501	0.074	0.234	1.070
7) 2,000,001 to 4000,000	1.000			
8) More than 4000,000	0.189	0.128	0.022	1.610
9) I don't know	0.502	0.042	0.259	0.974
10) Declined to answer	0.967	0.930	0.461	2.028
<b>Average length of time from home to gambling outlet</b>				
1) <5 minutes	Ref	Ref	Ref	Ref
2) 5 - <10 minutes**	0.745	0.077	0.538	1.032
3) 10 - <20 minutes	0.929	0.650	0.674	1.279
4) 20 - <30 minutes	0.760	0.131	0.532	1.085
5) More than 30 minutes*	0.664	0.032	0.457	0.965
<b>Gamblers times for gambling</b>				
1) Between 1am-6am	Ref	Ref	Ref	Ref
2) Between 7am-9am	1.363	0.569	0.469	3.962
3) Between 10am-6pm	1.381	0.547	0.483	3.948
4) Between 7pm-12am	1.964	0.276	0.583	6.619
<b>Frequency of gambling</b>				
1) Daily	Ref	Ref	Ref	Ref
2) Weekly*	0.546	0.000	0.436	0.684
3) Every-two weeks**	0.604	0.076	0.346	1.054
4) Monthly**	0.473	0.061	0.216	1.036
5) Less often*	0.189	0.000	0.107	0.332
<b>Mode of gambling</b>				
1) Face-face	Ref	Ref	Ref	Ref
2) Online*	1.501	0.016	1.078	2.091
3) Both online and face-face*	2.576	0.000	1.956	3.394
<b>Age at first start of gambling</b>				
Gamblers who started gambling below the age of 19*	1.682	0.001	1.247	2.269
Gamblers who started gambling below the age of 21*	1.388	0.002	1.126	1.711
Gamblers who started gambling below the age of 25	1.145	0.214	0.925	1.417
<b>Gamblers reasons for gambling</b>				
1) To win money*	2.756	0.000	1.644	4.621
2) Win money to support worthy causes*	13.045	0.000	7.408	22.972

Factors associated to problem gambling	Odds Ratio	P-value	Confidence Interval (95% CI)	
3) Out of excitement, entertainment	Ref	Ref	Ref	Ref
4) A hobby*	3.000	0.002	1.518	5.930
5) To socialize with peers and friends*	3.072	0.010	1.302	7.249
6) Others	0.535	0.561	0.065	4.403
7) Makes me feel good	0.589	0.624	0.071	4.884
8) Escape self from bad feeling*	7.361	0.005	1.803	30.046
9) Out of curiosity*	11.778	0.049	1.014	136.745
<b>Who else around gambles</b>				
Gamblers whose parents gamble*	2.183	0.018	1.142	4.174
Gamblers whose friends gamble*	2.145	0.000	1.658	2.776
<b>Impact of gambling on family welfare</b>				
Ever sold household assets due to gambling*	4.106	0.000	2.814	5.990
Ever misused money for family necessity to gamble*	1.592	0.001	1.203	2.107
<b>Access to gambling information education</b>				
Access to gambling education*	0.524	0.000	0.422	0.650
Know where to access problem gambling services*	0.487	0.000	0.379	0.626

**Source:** Survey data | Significant Relationship Where \*P-value < 0.05 | \*\* p-value <0.1

### 3.7.2 Multivariate Analysis of factors associated with problem gambling.

In this stage of analysis, we examine associated factors to problem gambling by strictly regressing significant variable at bivariate level of analysis so to assess how collectively; age, marital status, education level, and employment status, income, distance to gambling outlet, mode, frequency of gambling, age-at-start of gambling, reasons for gambling, influence of acquaintances, access to gambling education and access problem to gambling services could be used to explain problem gambling. To achieve this, we used multivariable binary logistic regression analysis. The results showed that age, marital status, employment status, income, distance to nearest to gambling outlet, frequency and mode of gambling, reasons for gambling, impact of gambling on family welfare and access to gambling information education and problem gambling services were collectively significantly associated to problem gambling. However, Gambler's level of education, underage-at-start of gamble and the influence of acquaintances were not significantly associated with problem gambling at this level of analysis.

The gamblers in the age group of 41-50 were 4.229 times more likely to report program gambling compared to those under the 21 ( $p < 0.05$ ). Th divorced gamblers were 3.223 time more likely to report problem gambling compared to never married ( $p < 0.05$ ). Gamblers employed full-time were less likely to report problem gambling compared to those not employed and seeking employment opportunities ( $p < 0.05$ ). To the contrary, gamblers within average monthly income range of 500,001 to 1,000,000 were 3.574 time more likely to report problem gambling compared to gamblers earning 50,000 Uganda shillings or less ( $p < 0.05$ ). Gamblers whose distance from their home to the nearest gambling outlet is within 5 - <10 minutes were less likely to report problem gambling compared to those whose home



are 5 minutes or less away from the gambling outlets ( $p < 0.05$ ). Those who take between 10 - <20 minutes to the nearest outlet were less likely to report problem gambling compared to those 5 minutes away from the outlet ( $p < 0.05$ ) and gamblers whose homes are 20 - <30 minutes away from the outlet were also less likely to report problem gambling ( $p < 0.05$ ).

Frequent gamblers who gamble as frequent as weekly were less likely to report problem gambling compared to those we gamble daily ( $p < 0.05$ ), those who gamble every-two weeks and monthly were less likely to report problem gambling compared to those who gambles daily. Those who gamble less often were also less likely to identify as a problem gambler compared to gamblers who engage in gambling daily ( $p < 0.05$ ). The analysis also revealed that online gamblers were 2.398 times more likely to experience problem gambling compared to those who gamble face-face. Gamblers whose reason for gambling is to win money to support worthy causes were 6.8 time more likely to identify as a problem gambler ( $p < 0.05$ ) and those who gamble to socialize with peers and friends were 5.276 time more likely to report problem gambling compared to those who gamble out of excitement and entertainment.

Gamblers who had ever sold household asset due to gambling were 3.676 time more likely to report problem gambling compared to those who do not erode household asset to acquire money to gamble ( $p < 0.05$ ), Gamblers who had ever misused money meant for family necessity to gamble were 1.553 times more likely to identify as a problem gambler or report problem gambling ( $p < 0.1$ ). As expected, gamblers who had access to gambling information and education were less likely report problem gambling ( $p < 0.05$ ) and those we know where to get problem gambling services were also less likely to report problem gambling ( $p < 0.05$ ).

Figure 20: Factors Associated with Problem Gambling

Factors associated to problem gambling	Odds Ratio	P-value	Confidence Interval (95% CI)	
<b>Age of gambler</b>				
1) Below 21	Ref	Ref	Ref	Ref
2) 21-30	1.814	0.214	0.710	4.640
3) 31-40	2.409	0.135	0.760	7.637
4) 41-50*	4.229	0.030	1.154	15.496
5) Above 50	5.735	0.138	0.572	57.510
<b>Marital status</b>				
1) Never married	Ref	Ref	Ref	Ref
2) Married/cohabiting	0.666	0.181	0.367	1.208
3) Divorced**	3.223	0.061	0.949	10.945
<b>Education level</b>				
1) Never went to school	Ref	Ref	Ref	Ref
2) Lower primary grade 1-4	1.101	0.913	0.194	6.237
3) Upper primary grade 5-7	2.492	0.231	0.559	11.119
4) Secondary	1.466	0.601	0.350	6.141
5) Above secondary level	0.912	0.904	0.204	4.081



Factors associated to problem gambling	Odds Ratio	P-value	Confidence Interval (95% CI)	
<b>Employment status</b>				
1) Currently in-school	1.619	0.400	0.527	4.966
2) Employed part-time	0.562	0.137	0.263	1.200
3) Employed full-time*	0.239	0.001	0.105	0.544
4) Not employed, not seeking employment	0.600	0.468	0.151	2.384
5) Not employed, seeking employment	Ref	Ref	Ref	Ref
6) Retired	0.114	0.126	0.007	1.835
<b>Average monthly income</b>				
1) 5,000 to 50,000	Ref	Ref	Ref	Ref
2) 50,001 to 100,000	1.261	0.691	0.401	3.968
3) 100,001 to 250,000	0.979	0.970	0.321	2.982
4) 250,001 to 500,000	1.595	0.433	0.497	5.125
5) 500,001 to 1,000,000**	3.574	0.054	0.977	13.073
6) 1,000,001 to 2,000,000	2.984	0.296	0.384	23.154
7) 2,000,001 to 4000,000	1.000			
8) More than 4000,000	1.000			
9) I don't know	0.471	0.303	0.112	1.972
10) Declined to answer	1.141	0.890	0.176	7.386
<b>Average length of time from home to gambling outlet</b>				
1) <5 minutes	Ref	Ref	Ref	Ref
2) 5 - <10 minutes*	0.317	0.002	0.152	0.662
3) 10 - <20 minutes*	0.293	0.001	0.143	0.603
4) 20 - <30 minutes**	0.416	0.038	0.181	0.953
5) More than 30 minutes	0.756	0.518	0.325	1.763
<b>Frequency of gambling</b>				
6) Daily	Ref	Ref	Ref	Ref
7) Weekly*	0.402	0.000	0.244	0.664
8) Every-two weeks**	0.258	0.060	0.063	1.058
9) Monthly	0.388	0.277	0.070	2.138
10) Less often*	0.332	0.030	0.122	0.900
<b>Mode of gambling</b>				
1) Face-face	Ref	Ref	Ref	Ref
2) Online*	2.398	0.023	1.130	5.087
3) Both online and face-face	1.465	0.257	0.757	2.834
<b>Age at first gamble</b>				
Gamblers who started gambling below the age of 19	1.281	0.523	0.600	2.737
Gamblers who started gambling below the age of 21	1.007	0.982	0.557	1.820
<b>Gamblers reasons for gambling</b>				
1) To win money	1.702	0.371	0.531	5.457
2) Win money to support worthy causes*	6.800	0.006	1.747	26.472
3) Out of excitement, entertainment	Ref	Ref	Ref	Ref
4) A hobby	1.253	0.752	0.310	5.063
5) To socialize with peers and friends*	5.276	0.039	1.087	25.601
6) Other	0.368	0.514	0.018	7.418
7) Makes me feel good	0.528	0.629	0.040	7.023
<b>Who else around gambles</b>				
Gamblers whose parents gamble	1.035	0.958	0.287	3.726

Factors associated to problem gambling	Odds Ratio	P-value	Confidence Interval (95% CI)	
Gamblers whose friends gamble	1.240	0.453	0.707	2.172
Impact of gambling on family welfare				
Ever sold household assets due to gambling*	3.676	0.000	2.018	6.694
Ever misused money for family necessity to gamble**	1.553	0.068	0.968	2.492
Access to gambling information education				
Have access to gambling education*	0.348	0.000	0.208	0.584
Know where to get services for problem gamblers*	0.377	0.000	0.229	0.621

Source: Survey data | significant relationship where \*P-value < 0.05 | \*\* p-value < 0.1

### 3.8 Access to Gambling Information, Education and Problem Gambling Services

In order to examine the accessibility of the gambling information, education and problem gambling services, respondents were asked 6 questions; 1) asked whether they had ever seen or heard information on gambling education, 2) if yes, what were the sources of the information? 3) asked whether they had ever seen or heard information regarding assistance to problem gamblers, 4) if yes, what were the sources of these information? 5) asked if they themselves or someone they knew is a problem gambler, they would seek help or refer the affected person to seek help? 6) if yes, to whom would they seek help or refer a person with problem gambler to.

The interview findings revealed that 65% of the gamblers have access to gambling information and educations. During the FGD, the punters indicated that though they get this information, its always information passed to discredit gambling without giving more the solutions, more detail educative and transformative information. The information falls short of guidance and counselling or even providing information of where these services can be accessed from. Forty-four percent (44%) reported to access information from local radio, 29% cited gambling outlets, 25% indicated through the Local TV, 18% accessed through the internet, 10% reported their access the information from a community leader and 3% from school. Though the survey did not inquire if the punters received information and education from the board, FGDs revealed that most punters are not aware of the board's existence. For those who knew, they could not articulate the mandate of the board. When asked if they have ever called the toll-free line provided on the notice boards, the punters indicated that they prefer physical interaction. As such they rarely call that line. The board members interviewed also indicated that the toll-free line is not operational on 24/7 basis which limits the interface time with punters.

These findings shade more light on the need to package and deliver more educative and transformative information to the punters and other stakeholders as well as diversify channel through which gambling education information passed to the masses.

Overwhelmingly, participants reported they would go to their spouse, partner or significant other if they felt that they had a gambling problem (46.9%) or if someone they knew had a gambling problem (37.2%). Participants also said they would turn to the gambling helpline for a personal. When asked on access to information on problem gambling services, only 46% reported to have had access to any information pertaining problem gambling services

in the districts; 31% pointed local radio as the main channel through they access information on problem services, 18% cited gambling outlets as a source for their information on problem gambling services, 15% cited local TV , 15% internet, 10% indicated community leader and only 3% cited school as their point of information on problem gambling. These findings consistent show very low utilisation of community spaces such as school and community leader forum to channel gambling education information. Just like in access of educational information, there is need to package, broaden and deepen spaces and channels for sharing information in regards to problem gambling and responsible gambling.

Figure 21: Access to Gambling Information / Education

Domain	Category	Percent
Gambling information and education	Access information or education on gambling	65%
Sources of information on gambling education	1) Local radio	44%
	2) Gambling outlets	29%
	3) Local TV	25%
	4) Internet	18%
	5) Community leader	10%
	6) School	3%
Problem gambling services	Access to information on problem gambling services	46%
Sources of information on problem gambling services	1) Local radio	31%
	2) Gambling outlets	18%
	3) Local TV	15%
	4) Internet	15%
	5) Community leader	10%
	6) School	3%
Perception on problem gambling services	Gamblers who would seek help or refer someone to seek help	69%
Sources gamblers would seek help or refer someone to seek help	1) Friend	16%
	2) Psychologist or counsellor	12%
	3) Medical professional	13%
	4) Other family member	6%
	5) Spouse	3%
	6) District	1%
	7) Employer	2%
	8) Helpline	4%

Source: survey data

### **3.9 Gamblers Ability to Identify Problem Gambling**

In order to assess ability of the gamblers to identify and control the occurrence of problem gambling, 5 questions were asked; 1) asked gamblers whether they were confident that they would easily recognize if they themselves or their acquaintances is developing or as developed problem gambling, 2) asked to rate their level of confidence to Self-report problem gambling, 3) asked whether they had ever thought or are willing to control or end gambling, 4) asked how often they felt like stopping gambling in the past year, 5) asked gamblers whether they think they had problem gambling and finally 6) asked how often they felt like they had a problem with gambling in the past year.

As indicated in figure 22, results of this interviews revealed that 60% of the surveyed gamblers were confident they would recognize if they themselves or their acquaintances has developed or developing problem gambling behaviors; 28% feel extremely Confident to self-report if they had problem gambling, 32% feel moderately Confident, 25% feel slightly confident and only 16% do not feel confident at all in recognizing or identifying a problem gambling behavior.

About 68% of the gambler interviewed have ever felt like discontinuing gambling but could not in the past year; 39% felt stopping almost every day, 9% felt like stopping once or twice a week, 7% felt like stopping at least once or twice a month, 2% more than one year ago and 11% felt like stopping gambling a few times in the past year. These findings present a strong case for unmet for support to both problem gamblers and non-problem gamblers.

When asked whether they think they had problem gambling, 68% perceived that they had problem gambling in the past year; 13% thought they problem gambling most of the time in the past year, 28% perceived they almost always had a problem gambling and 27% perceived they might have had problem gambling sometimes of the year. This finding also presents a concern on the need to support gamblers with problem gambling.

During FGDs and voluntary individual interactions with punters, it was clear that the punter could tell who has gambling problem. Problem gambling or addiction was of great concern and raised the need to provide proper, timely and accessible responsible and problem gambling information to punters and general public. A number of punters expressed the need to stop gambling but they have failed. They just cant! They requested for counselling services and support to stop gambling completely but they don't know whom, how or where to get these services from. This finding was cutting across regions. Some punters pointed out their friends who are already addicted to gambling and need urgent counseling (psychosocial support). A vivid case is of a punter is Kabale who requested to be capture on video where he expressed on his behalf and on behalf of those addicted to gambling to be supported to stop gambling

Figure 22: Gamblers Able to Identify Problem Gambling

Domain	Category	Percent
Recognition of problem gambling	Gamblers who are confident they would recognize if they or their acquaintances develop problem gambling	60%
Self-reported confidence level in recognizing problem gambling	1) Extremely Confident	28%
	2) Moderately Confident	32%
	3) Slightly Confident	25%
	4) Not confident at all	16%
Gamblers willing to end gambling	Gamblers who ever felt like discontinuing gambling, but could not in the past year	68%
How often surveyed gamblers felt like stopping gambling in the past year but could not	1) Almost every day	39%
	2) Once or twice a week	9%
	3) Once or twice a month	7%
	4) More than one year ago	2%
	5) A few times in the past year	11%
Perceived	Gamblers who perceive they had a problem with gambling in past year	68%
How often gamblers felt they had a problem with gambling in the past year	1) Most of the time	13%
	2) Almost always	28%
	3) Sometimes	27%

**Source:** Survey data

### 3.10 NLGRB intervention to address Problem Gambling

In fulfilment of its mandate, the board has over the years of its existence continuously worked towards addressing issues of problem gambling through promotion of responsible gaming. The initiatives include;

Issuance of various types of licenses to operators, regular monitoring and spot checks to ensure compliance by the operators, enforcement of applicable laws and regulations, and routinely conduct the sensitization campaigns, regular engagements with the operators. The board is also engaging stakeholders in the enforcement of compliance by the operators and gamblers. The police, Financial Intelligence Authority, town councils, municipalities city authorities, Residential District Commissioners, Non Governmental Organisations, the media houses, health facilities such as Butabika Referral hospital where the board has signed MoU to offer psychological support to victims of problem gambling and sensitization of masses, enforcement of compliance by the operators and punters. This concerted effort is helping to curb on under age gambling, illegal or unlicensed operators or gaming outlets.

The board is in the process of establishing a centralized monitoring system to enforce compliance among punters and operators. This system will ensure effectiveness and efficiency of the board in delivering its mandate. The board continues to utilize the available resource to undertake activities geared at ensuring compliance and enforcement. Every quarter, the board carries out community sensitization out reaches on problem gambling and responsible gaming. Though the scale of these activities is still small, these efforts lay a foundation upon which wider scale reach can be achieved with additional funding in future.

### **3.11 Challenges of the NLGRB in Implementing its Mandate**

Interviews with members of the NGLRB indicated that the board was instituted in 2016, as such, the board is still young and positioning itself in the sector that is fast growing in content, geographical and technical scopes. From the boards perspective, the key drivers of problem gambling include;

The general perception of gambling sector by the public. Gambling is perceived as an illicit activity that is against the general moral standing of society as well as illegal whose participants and stakeholders are of immoral character and considered unfit members of the society. This perception creates an uphill task of undertaking public sensitization, winning public support and building synergies in enforcing compliance and responsible gaming practices. Under funding of the board. The scope of mandate of the board is wide yet the funding is not yet matching this scope. This has crippled activities such as awareness raising and sensitization campaigns on problem gambling and responsible gambling, carrying out regular compliance checks and enforcement of the guiding laws.

The current set up of the board. The board has one central office based in Kampala regulating the operations of the sector across the country. The staffing of the board is equally thin and cannot effectively carry out country wide responsible gaming, compliance and enforcement. For example, the responsible gaming unit has only 2 staff. This is limiting sensitization efforts on the mandate and visibility of the board, responsible gaming and enforcement of compliance with the gaming operators. The board is yet to adopt a digital monitoring system to regulate and monitor compliance of the operators and punters. This makes monitoring very challenging in an environment where technology is advancing everyday.

Massive persuasive advertisement by the gaming operators which sometimes are not approved by the board and Uganda Communication Commission. The adverts are so persuasive and have potential to mislead the punters. They fall short of balancing the benefits, risks and caution of PG. The high unemployment and under employment rates in the country. This is in line with the views shared by punters and other stakeholders during FGDs and KIIs respectively. Most youth have taken into gambling as a means of livelihood. As indicated earlier on, the majority of the gamblers are in some form of employment and earn below Ugx 500,000 a month. Gambling is then taken as a supplementary livelihood activity. Through this some youths have become addicted to gambling. This creates an urgency for policy intervention on creation of more opportunities for youth employment by government. Reluctance of some town councils, municipalities and cities to support and monitor gambling activities. Most of these administrative bodies just watch and only act in the event of a crime being committed by gamblers. Proactive city authorities like Gulu try to monitor and enforce basic regulations in the sector. There is therefore need to actively engage various stakeholders in the regulation, monitoring and enforcement of laws in the gaming sector.

There are also transparency issues around declarations of established, closed and moved gaming outlets by the operators. This is facilitated by limited capacity of the board to regularly monitoring and collect data on the status of the operators. This facilitates non compliance with the operators and this can promote problem gambling.

## 4. CONCLUSION AND RECOMMENDATION

### 4.1 Conclusion

The following main conclusions emanated from the study:

Despite that most of the gamblers are 25 years and above - implying age appropriate to participate in gamble, however, about 15% of the gamblers interviewed were below the age of 18 when they started gambling. Gambling is an activity dominated by men in productive age group between 21-40 years – this revealed that when you sample gamblers at a gambling outlet any point in time, chances are high that 99% of the gamblers you will select are male. Majority of the gamblers are married or cohabitating with their partner. Higher proportion of gamblers have attained a basic level of education from upper primary to post-secondary education, this is potentially one of advantages most gamblers have to read, write and are possible computer literate to participate in online gambling activities. The study also revealed that most of the gamblers are employed in some job – either full-time or part-time job and most of them earn less than 500,000 Ugx a month.

In terms of gambling participation, the topmost gambling activities in the country is sports betting followed by slot and casino – this implies any intervention to regulate gambling must focus on the sport betting houses. The study also reveals that gaming houses are well spread throughout the corners of urban centres, as such, proximity of the gaming houses to the punters is one important attraction attracting individuals in urban centres to gamble – 85% of the surveyed gamblers accessing gaming houses within 30 minutes away from their residence. Majority of the punter's gamble either daily or weekly – implying gambling is one the major activity they participate in from time to time – this has detrimental impact on daily economic activities. The use of technology in the gambling sector has increased over time, this study revealed that 76% of the gamblers are currently using some online means to gamble – implying interventions geared to regulate gambling or enforce responsible must embrace technology approaches in order to be effective.

It is eminent that the most probable reason one gambles in Uganda is to win money and with the purpose of support worthy causes such as pay bills, utilities, rent and cater for household necessities which are very undesirable reasons for gambling. The study also revealed that the impact of gambling is two-fold both negative and positive impact even though negative impact outweigh positive impact especially at a gambler level. At individual level, the common impact of gambling cited reduction in savings, misused of work money for gambling, reduced productivity and psychosocial distress and this impact were higher among gamblers of low social class such lower level of education, low income and employment status. At family level, the greatest impact of gambling was cited as misuse of money intended for household necessities, spending less on basic needs and destruction of family relationships. The study also found that the impact of gambling on physical and mental health was a reality - 37% of the gamblers reported their physical health was not good on at least one day and 48% of the gamblers reported their mental health was not good on at least one day. Gambling was also found to have a significant bearing on substance use and abuse of alcohol – 46% of the gamblers interviewed had used alcohol in the past 30 days preceding the survey. Suicide thoughts, plans and attempts was



discovered to be highly prevalent among gamblers – 11% of the gambler surveyed had ever thought of committing suicide and 4% attempted to commit suicide. Problem gambling is highly prevalent – highest in Ankole, Tooro, Kigezi and Elgon sub-regions.

On the factor associated with problem gambling, the study revealed that age, marital status, education level, and employment status, income, distance to gambling outlet, mode of gambling, frequency of gambling, age-at-start of gambling, reasons for gambling, influence of acquaintances, access to gambling education and access problem to gambling services were associated with problem gambling. Older gamblers were less likely to report problem gambling compared to those below the age of 21 years. Divorces were more likely to report problem gambling compared to those who never married. Gamblers with education level above secondary and were less likely to report problem gambling compared to those who never went to school. In terms of employment, full or part-time employment were less likely to report problem gambling compared to those not employed and seeking employment and higher income was associated with lower risk of developing problem gambling. Those who gamble both online and face-face mode were more likely to report problem gambling compared to the who gamble using only face-face mode.

#### **4.2 Recommendation**

Based on the study finding, we recommend following actions are taken in short-term:

- 1) Increase sensitization of masses on PG, RG including the rights and responsibilities of actors in the industry. Possible interventions include involvement of community-based structures such as churches and schools, social media platforms, educational Programmes, workshop/discussion forums and continued use of mass media.
- 2) Strengthen the NLGRB board to effectively deliver on its mandate as enshrined in the Lotteries and Gaming Act, 2016. This includes funding of the interventions geared towards sensitization on PG and RG, increase the board's field presence through regular monitoring visits across the country to ensure compliance and enforcement of the existing laws.

In the intermediate term, the following actions are recommended:

- 1) Problem gambling will remain an inherent part of gambling behaviour and needs continuous attention. Focus of awareness campaigns information and awareness campaigns to highlight the impact of gambling on household welfare but also social well-being in general is of crucial importance – use more innovative technological solutions would surface given the growth in application of technical in the gambling sector. Keen attention should be paid to the right packaging of information to educate, inform with a goal of transforming gamblers not victimizing them.
- 2) The board should engage various stakeholders at various levels in compliance, offering of psychosocial services such as hospital and NGOs, including academic institutions, decision makers on minimization and treatment of PG victims. This concerted effort would help reach out to many gamblers and ensure that information and services related to RG and PG is accessible and utilized by the gamblers.

- 3) Government should fund treatment and support Services by ensuring the availability and accessibility of specialized treatment and support services for individuals experiencing gambling-related harm. This includes funding for counseling, therapy, helplines, support groups, and financial counseling services. Collaboration with healthcare providers and community organizations is essential to establish an effective support network.
- 4) Research and continuous data Collection; governments should invest in research to better understand the prevalence, patterns, and further dig out impacts of problem gambling to the local economies. This information can inform evidence-based policies and interventions, as well as help evaluate the effectiveness of existing strategies.
- 5) Government should strengthen enforcement of gambling legislation that bars the under aged from betting, time for opening gaming houses, and regulate online gambling. This can be achieved collaboratively with other arms of government – engage education sector to integrate curriculum that create awareness about harmful gambling and associated effects.
- 6) Parents and religious leaders should also play role to teach young people the value of work, as a more reasonable means of getting income rather than gambling.
- 7) Where possible, regulate the positioning of gambling outlets in some locations such as school and higher institution of learning to cut proximity of the learners to the gambling activities.
- 8) Government should increase funding to the board to facilitate the board deliver in its mandate. This will allow the board to increase the staffing, undertake a number of field related activities and implement robust centralized monitoring system that will equip the board to be able to effectively monitor compliance and undertake enforcement among operators and punters

**In the long-term, undertake the following measures:**

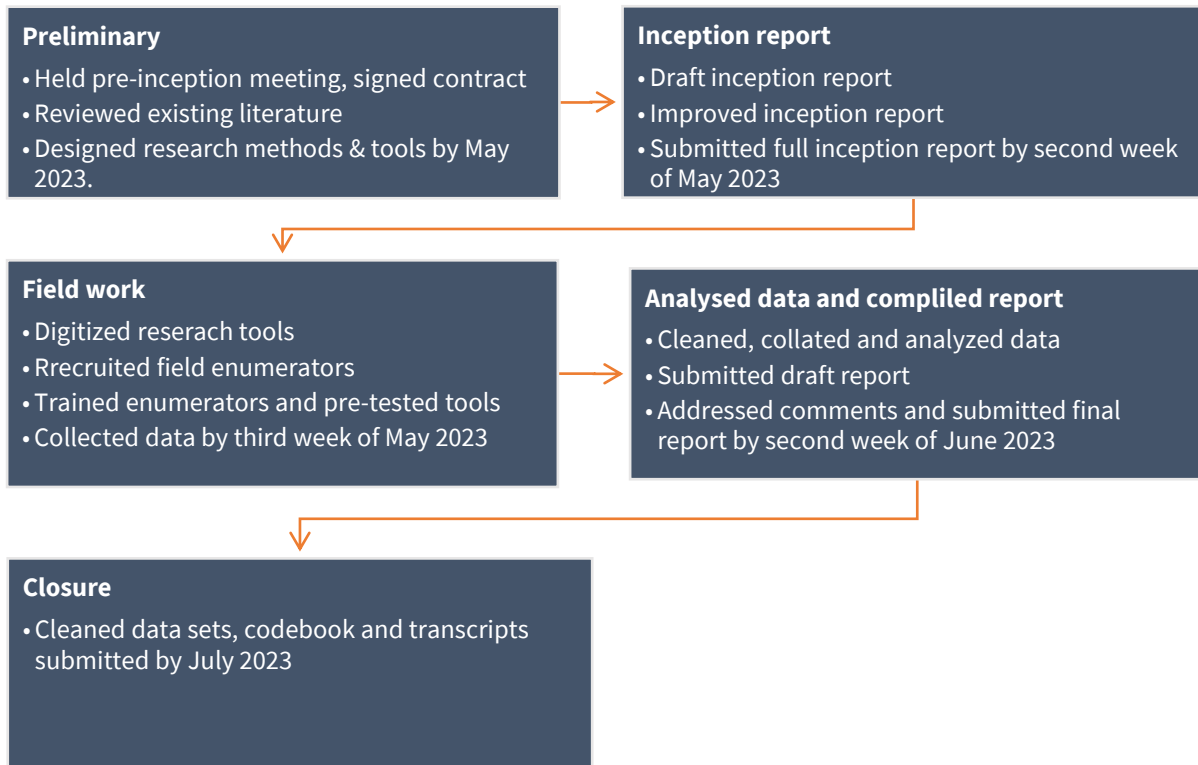
- 1) Partner with other government ministries to create opportunities for young people to engage in more productive work other than gambling which continuing to create awareness on responsible gaming.
- 2) Review the current regulatory framework with view of regulating the operating time, geographical spread, type of gambling activities, machines used, amounts involved in gambling and possibility tracking problem gamblers to ensure they get appropriate therapy.
- 3) Government institutions establish and enforce regulations and policies related to gambling activities. These regulations may include age restrictions, more strict licensing requirements, establishing responsible gambling routine measures, and advertising guidelines for gaming houses communicating the right message to the gamblers – with the aim is to create a safe and regulated gambling environment that minimizes the risks associated with problem gambling.
- 4) Government should support the board to establish regional office to strengthen boards effectiveness in delivering its mandate and ensure that services are brought closer to the clients and stakeholders.

## ANNEXES

### Annex 1: Reference

- Ahaibwe, G., Lakuma, C. P., Katunze, M., & Maweje, J. (2016). *Socio Economic Effects of Gambling: Evidence from Kampala City, Uganda*.
- Anielski, Mark; Braaten, A. (2008). *The Socio-Economic Impact of Gambling (SEIG) Framework: An Assessment Framework for Canada: In Search of the Gold Standard The Socio-Economic Impact of Gambling (SEIG) Framework An Assessment Framework for Canada: In Search of the Gold Standard Pre. 0–207*.
- Anyanwu, M. U., Demetrovics, Z., Griffiths, M. D., & Horváth, Z. (2023). *Problem Gambling Among Adolescents in Uganda: A Cross-sectional Survey Study*.
- Australian Institute for Gambling Research. (2001). *SURVEY OF THE NATURE AND EXTENT OF GAMBLING AND PROBLEM GAMBLING IN THE ACT*.
- Herskowitz, S. (2016). *Gambling, Saving, and Lumpy Expenditures: Sports Betting in Uganda*. 207, 1–57.
- Hilbrecht, M., Baxter, D., Abbott, M., Binde, P., Clark, L., Hodgins, D. C., Maniowabi, D., Quilty, L., Spångberg, J., Volberg, R., Walker, D., & Williams, R. J. (2020). The conceptual framework of harmful gambling: A revised framework for understanding gambling harm. *Journal of Behavioral Addictions*, 9(2), 190–205. <https://doi.org/10.1556/2006.2020.00024>
- Hing, N., Russell, A. M. T., Browne, M., Rockloff, M., Tulloch, C., Rawat, V., Greer, N., Dowling, N. A., Merkouris, S. S., King, D. L., Stevens, M., Salonen, A. H., Breen, H., & Woo, L. (2022). *Gambling-related harms to concerned significant others: A national Australian prevalence study*. <https://doi.org/10.1556/2006.2022.00045>
- Latvala, T., Lintonen, T., & Konu, A. (2019). *Public health effects of gambling – debate on a conceptual model*. 1–16.
- The Kansas Department for Aging, & Services. (2017). *2017 Kansas Gambling Survey*.
- Yawe, B. L., & Ssenooba, K. (2014). *Gambling and Mobile Money Payments: A Case Study of Sports Betting in Uganda*. 37, 1–14.

## Annex 2: Research activities flowchart



### Annex 3: Overall Study Sampling Frame

Sub Region	Districts with Highest Gambling outlets	Total Gambling Outlets (G=623; source: LGRB database)	Sampled outlets per district (n=111)	Sample size of gamblers per district (m=1538)
<b>Kigezi</b>	Kabale	7	5	56
<b>Bukedi</b>	Tororo	9	5	50
<b>Teso</b>	Soroti	13	3	101
<b>Central I</b>	Masaka	15	4	51
<b>Lango</b>	Lira	15	5	52
<b>Tooro</b>	Kabarole	16	5	50
<b>West Nile</b>	Arua	19	5	50
<b>Bunyoro</b>	Hoima	20	11	100
<b>Acholi</b>	Gulu	21	13	97
<b>Elgon</b>	Mbale	23	7	103
<b>Busoga</b>	Jinja	26	8	100
<b>Central II</b>	Mukono	39	7	100
<b>Ankole</b>	Mbarara	45	8	100
<b>Kampala</b>	Kampala	345	25	528
<b>Total</b>	<b>14 Districts</b>	<b>613</b>	<b>111</b>	<b>1538</b>

**Source:** List of Gambling Outlets in Uganda by LGRB 2022

## Annex 5.4: Summary of Gamblers Survey Results

Measures	Outliers																
	Highest	Lowest	Uganda	Acholi (Gulu)	Ankole (Mbarara)	Bukedi (Tororo)	Bunyoro (Hoima)	Busoga (Jinja)	Central I (Masaka)	Central II (Mukono)	Elgon (Mbale)	Kampala (4-Division)	Kigezi (Kabale)	Lango (Lira)	Teso (Soroti)	Tooro (Kabarole)	West Nile (Arua)
Sample Size (m)			1538	97	100	50	100	100	51	100	103	528	56	52	101	50	50
Gambling outlets sampled (n)			111	13	8	5	11	8	4	7	7	25	5	5	3	5	5
<b>Basic compliance status</b>																	
Security (personnel) is in place	91%	100%	62%	100%	85%	100%	100%	80%	100%	91%	75%	100%	89%	100%	100%	100%	100%
Functional noticeboard	89%	100%	91%	100%	98%	90%	100%	100%	100%	92%	100%	96%	11%	66%	66%	100%	100%
Rules are displayed on noticeboard	93%	90%	79%	100%	93%	100%	100%	100%	100%	97%	100%	52%	89%	68%	68%	100%	100%
Hygiene and sanitation in place	82%	69%	55%	80%	24%	100%	100%	90%	96%	88%	88%	79%	99%	60%	60%	100%	100%
Legally registered gambling outlet	96%	100%	79%	100%	99%	100%	100%	100%	100%	99%	96%	100%	92%	100%	68%	68%	100%
<b>Size of employee</b>																	
Average	6	6	5	5	5	6	10	4	6	8	5	6	4	6	6	6	6
Maximum	200	11	10	6	8	10	200	6	10	170	7	8	6	9	9	10	10
Minimum	2	3	3	4	3	3	4	2	3	2	3	4	3	3	3	4	4
Standard Deviation	12	2	2	1	1	2	27	1	2	19	1	1	1	2	2	2	2
<b>Number of equipment</b>																	
Average	23	30	19	8	30	34	8	15	11	25	18	16	38	24	24	8	8
Maximum	120	69	58	18	65	109	10	55	31	120	55	45	49	45	45	14	14
Minimum	1	2	3	3	5	3	5	1	1	2	2	2	2	2	2	4	4
Standard Deviation	22	20	18	5	21	35	1	15	9	23	21	14	15	15	3	3	3
<b>Daily attendance</b>																	
Average	131	137	41	41	114	49	151	81	167	174	70	87	96	173	173	279	279
Maximum	1000	300	150	50	200	100	300	200	500	1000	100	250	1000	400	400	600	600
Minimum	0	20	3	25	40	20	70	30	30	8	20	0	20	20	20	150	150
Standard Deviation	152	82	33	11	56	23	62	37	155	212	28	78	93	158	158	124	124
<b>Gamblers survey results</b>																	

Measures	Outliers															
	Highest	Lowest	Uganda	Acholi (Gulu)	Ankole (Mbarara)	Bukedi (Tororo)	Bunyoro (Hoima)	Busoga (Jinja)	Central I (Masaka)	Central II (Mukono)	Elgon (Mbale)	Kampala (4-Division)	Kigezi (Kabale)	Lango (Lira)	Teso (Soroti)	Tooro (Kabarole)
<b>Age</b>																
Average	31	35	33	31	27	31	35	27	32	32	30	31	34	32	33	
Maximum	65	59	58	50	45	65	62	48	60	64	55	55	65	58	54	
Minimum	17	22	17	18	18	18	18	18	18	18	17	19	23	23	23	
Standard Deviation	9	9	9	8	6	8	10	7	10	9	9	9	8	7	6	
Below 21	6%	0%	6%	6%	9%	3%	6%	15%	8%	5%	18%	10%	0%	0%	0%	
21-30	52%	41%	45%	54%	61%	58%	31%	62%	45%	55%	45%	48%	46%	56%	44%	
31-40	29%	34%	31%	28%	29%	28%	29%	19%	29%	26%	27%	29%	36%	32%	46%	
41-50	12%	20%	16%	12%	1%	9%	29%	4%	15%	11%	9%	12%	18%	10%	8%	
Above 50	2%	5%	2%	0%	0%	2%	4%	0%	4%	3%	2%	2%	1%	2%	2%	
<b>Sex of the gambler</b>																
Female	1%	0%	1%	0%	2%	1%	0%	1%	1%	1%	2%	0%	2%	0%	0%	
Male	99%	100%	99%	100%	98%	99%	100%	99%	99%	99%	98%	100%	98%	100%	100%	
<b>Marital status</b>																
Never married	40%	20%	51%	38%	41%	36%	43%	57%	27%	41%	50%	42%	34%	36%	40%	
Married/cohabiting	55%	78%	42%	58%	57%	60%	31%	37%	72%	54%	38%	54%	59%	56%	60%	
Divorced	5%	1%	6%	4%	2%	4%	25%	6%	1%	5%	9%	4%	7%	6%	0%	
Widowed	0%	1%	1%	0%	0%	0%	0%	0%	0%	0%	4%	0%	0%	2%	0%	
<b>Highest level of education</b>																
Never went to school	3%	0%	8%	0%	3%	2%	2%	14%	0%	3%	5%	4%	1%	2%	0%	
Lower primary grade 1-4	8%	3%	1%	4%	10%	4%	10%	20%	1%	12%	4%	12%	2%	2%	2%	
Upper primary grade 5-7	20%	22%	16%	22%	22%	11%	35%	21%	25%	17%	32%	4%	20%	38%	20%	
Secondary	48%	52%	31%	64%	42%	59%	29%	37%	55%	52%	43%	42%	53%	48%	48%	
Above secondary level	20%	24%	44%	10%	23%	24%	24%	8%	18%	16%	16%	38%	24%	10%	30%	
<b>Employment status</b>																
Currently in-school	5%	8%	12%	0%	9%	8%	0%	1%	2%	3%	11%	15%	3%	0%	24%	
Not employed but seeking employment	12%	16%	22%	6%	18%	2%	20%	6%	10%	6%	32%	25%	24%	6%	26%	

Measures	Outliers															
	Highest	Lowest	Uganda	Acholi (Gulu)	Ankole (Mbarara)	Bukedi (Tororo)	Bunyoro (Hoima)	Busoga (Jinja)	Central I (Masaka)	Central II (Mukono)	Elgon (Mbale)	Kampala (4-Division)	Kigezi (Kabale)	Lango (Lira)	Teso (Soroti)	Tooro (Kabarole)
Employed full-time	41%	25%	29%	58%	28%	66%	35%	37%	36%	49%	16%	4%	46%	66%	20%	
Employed part-time	37%	36%	32%	36%	42%	24%	37%	54%	50%	41%	38%	33%	25%	24%	24%	
Not employed and not currently seeking employment	3%	14%	5%	0%	3%	0%	8%	2%	3%	1%	4%	21%	3%	0%	6%	
Retired	1%	0%	0%	0%	0%	0%	0%	0%	0%	2%	0%	2%	0%	4%	0%	
<b>Average monthly income of gambler</b>																
5,000 to 50,000	5%	3%	17%	12%	0%	5%	2%	3%	1%	1%	14%	15%	10%	10%	12%	
50,001 to 100,000	11%	19%	18%	18%	4%	14%	27%	1%	6%	5%	11%	35%	9%	24%	20%	
100,001 to 250,000	25%	27%	10%	26%	33%	29%	24%	20%	31%	26%	29%	17%	25%	26%	34%	
250,001 to 500,000	33%	34%	24%	22%	29%	39%	22%	56%	42%	35%	30%	15%	32%	26%	20%	
500,001 to 1,000,000	13%	14%	17%	6%	11%	8%	12%	16%	17%	14%	9%	4%	14%	10%	12%	
1,000,001 to 2,000,000	3%	2%	2%	0%	2%	2%	2%	1%	1%	5%	5%	8%	4%	4%	2%	
2,000,001 to 4000,000	1%	1%	2%	0%	0%	0%	0%	0%	0%	1%	0%	2%	0%	0%	0%	
More than 4000,000	1%	0%	5%	0%	0%	0%	0%	0%	0%	1%	0%	0%	0%	0%	0%	
I don't know	3%	0%	4%	0%	7%	1%	2%	2%	2%	5%	0%	4%	2%	0%	0%	
Declined to answer	5%	0%	1%	16%	14%	2%	10%	1%	1%	8%	2%	0%	5%	0%	0%	
<b>Distance to nearest gambling outlet (mins)</b>																
<5 minutes	17%	22%	2%	30%	24%	18%	25%	34%	1%	18%	4%	17%	9%	16%	10%	
5 - <10 minutes	25%	22%	17%	26%	33%	35%	25%	13%	22%	25%	20%	46%	26%	38%	20%	
10 - <20 minutes	26%	30%	24%	12%	29%	19%	35%	18%	52%	24%	27%	27%	25%	26%	20%	
20 - <30 minutes	17%	14%	27%	18%	12%	18%	10%	23%	15%	14%	38%	10%	22%	12%	22%	
More than 30 minutes	15%	12%	30%	14%	2%	10%	4%	12%	10%	19%	13%	0%	19%	8%	28%	
<b>Gambling time</b>																
Between 1am-6am	1%	0%	0%	0%	0%	2%	8%	0%	2%	0%	9%	0%	0%	4%	0%	
Between 7am-9am	22%	42%	2%	26%	20%	35%	8%	43%	13%	25%	0%	6%	18%	22%	2%	
Between 10am-6pm	75%	54%	85%	74%	78%	63%	73%	56%	83%	74%	88%	88%	80%	72%	96%	
Between 7pm-12am	3%	4%	13%	0%	2%	0%	12%	1%	2%	1%	4%	6%	2%	2%	2%	



Measures	Outliers															
	Highest	Lowest	Uganda	Acholi (Gulu)	Ankole (Mbarara)	Bukedi (Tororo)	Bunyoro (Hoima)	Busoga (Jinja)	Central I (Masaka)	Central II (Mukono)	Elgon (Mbale)	Kampala (4-Division)	Kigezi (Kabale)	Lango (Lira)	Teso (Soroti)	Tooro (Kabarole)
<b>Frequency of gambling</b>																
Daily	48%	69%	45%	56%	37%	35%	65%	70%	40%	41%	54%	48%	47%	54%	64%	
Weekly	39%	27%	44%	36%	54%	34%	22%	17%	54%	43%	38%	38%	44%	46%	22%	
Every-two weeks	4%	3%	3%	2%	1%	3%	2%	3%	5%	5%	5%	10%	2%	0%	2%	
Monthly	2%	0%	3%	2%	5%	0%	0%	2%	1%	3%	4%	4%	1%	0%	2%	
Less often	7%	1%	5%	4%	3%	28%	12%	8%	0%	9%	0%	0%	7%	0%	10%	
<b>Mode of gambling</b>																
Face-face	24%	38%	9%	24%	7%	36%	65%	7%	18%	23%	2%	29%	42%	50%	14%	
Online	22%	35%	7%	56%	19%	30%	8%	21%	34%	21%	66%	6%	5%	6%	0%	
Both online and face-face	54%	27%	84%	20%	74%	34%	27%	72%	48%	56%	32%	65%	53%	44%	86%	
<b>Gambling activities by gamblers</b>																
Sports betting	95%	97%	93%	92%	95%	85%	94%	100%	98%	95%	100%	83%	98%	100%	100%	
Slot machines	44%	46%	77%	40%	33%	32%	45%	55%	41%	41%	39%	54%	17%	44%	86%	
Pool betting	10%	1%	32%	0%	14%	7%	2%	22%	3%	8%	4%	44%	0%	10%	4%	
Ludo	6%	4%	22%	0%	4%	1%	2%	18%	1%	5%	4%	13%	1%	6%	0%	
Betting on animals	14%	11%	18%	10%	14%	1%	12%	18%	27%	17%	4%	2%	10%	0%	14%	
Flipping coins	1%	0%	11%	0%	1%	1%	2%	0%	0%	2%	0%	0%	0%	0%	2%	
Play station/video games	4%	0%	6%	4%	24%	4%	6%	5%	0%	2%	2%	0%	0%	0%	0%	
Card/poker	3%	2%	19%	0%	1%	0%	0%	4%	0%	2%	4%	2%	0%	8%	0%	
National lottery_playlotto	1%	0%	6%	0%	0%	0%	2%	0%	0%	1%	0%	2%	0%	0%	0%	
Dice	2%	6%	13%	0%	1%	0%	0%	5%	0%	2%	0%	0%	0%	0%	0%	
Bingo	1%	2%	0%	0%	0%	0%	0%	0%	0%	2%	0%	0%	0%	0%	0%	
<b>Age at first gambling</b>																
Average	24	24	25	24	20	25	21	20	25	24	23	21	26	26	23	
Maximum	55	47	49	49	35	55	35	37	48	52	40	34	47	50	38	
Minimum	10	15	15	16	15	14	15	10	15	14	15	12	16	11	15	
Standard Deviation	7	7	8	7	4	8	4	5	7	7	6	5	7	8	4	

Measures	Outliers	Highest	Lowest												
	Uganda	Acholi (Gulu)	Ankole (Mbarara)	Bukedi (Tororo)	Bunyoro (Hoima)	Busoga (Jinja)	Central I (Masaka)	Central II (Mukono)	Elgon (Mbale)	Kampala (4-Division)	Kigezi (Kabale)	Lango (Lira)	Teso (Soroti)	Tooro (Kabarole)	West Nile (Arua)
<b>Gambler's years lived gambling</b>															
Average	8	11	8	6	7	5	14	7	7	7	7	10	8	6	10
Maximum	34	29	23	17	18	19	32	25	20	34	25	27	25	22	17
Minimum	0	0	0	0	1	0	0	0	0	0	1	0	0	1	2
Standard Deviation	5	6	5	4	3	4	9	4	5	5	5	7	4	4	4
less than 2 years	6%	5%	6%	18%	2%	16%	8%	2%	4%	7%	5%	2%	2%	4%	0%
2-5 years	34%	11%	33%	28%	35%	47%	16%	46%	44%	34%	50%	33%	33%	48%	14%
5-10 years	37%	37%	37%	38%	50%	29%	14%	33%	34%	39%	29%	29%	47%	36%	46%
more than 10 years	22%	46%	24%	16%	13%	8%	63%	19%	18%	19%	16%	37%	19%	12%	40%
<b>Gamblers who started gambling underage</b>															
Started gambling below the age of 19	13%	15%	18%	8%	28%	6%	24%	34%	7%	7%	25%	25%	7%	6%	2%
Started gambling below the age of 21	43%	36%	38%	42%	60%	39%	53%	68%	37%	40%	45%	73%	20%	36%	38%
Started gambling below the age of 25	61%	56%	44%	58%	84%	53%	76%	82%	52%	59%	54%	83%	48%	52%	68%
<b>Who else around gamblers gamble</b>															
Friends	74%	69%	66%	26%	86%	86%	78%	95%	91%	68%	77%	75%	73%	92%	62%
Neighbor	27%	13%	45%	14%	13%	4%	24%	25%	14%	35%	11%	40%	24%	38%	46%
Other relative	19%	35%	40%	20%	12%	3%	39%	7%	18%	13%	21%	54%	13%	20%	26%
Siblings	17%	4%	17%	34%	31%	16%	4%	12%	24%	16%	5%	13%	28%	12%	20%
None	11%	3%	0%	26%	1%	5%	16%	4%	4%	19%	16%	0%	9%	0%	32%
Parents	2%	5%	6%	4%	2%	2%	0%	1%	0%	2%	4%	13%	0%	2%	4%
Children	1%	6%	1%	0%	1%	1%	4%	0%	0%	1%	2%	4%	1%	2%	4%
<b>Source of money for gambling</b>															
Salary	72%	63%	66%	88%	79%	58%	65%	91%	96%	75%	57%	37%	64%	76%	58%
Savings	40%	71%	39%	8%	8%	41%	33%	13%	55%	39%	45%	48%	53%	24%	90%
Gambling money	36%	53%	59%	2%	5%	29%	57%	65%	72%	25%	14%	38%	34%	2%	82%
Borrowed money or loan	12%	9%	40%	10%	4%	0%	4%	37%	34%	4%	9%	31%	5%	8%	0%
Money allocated for household necessities	7%	1%	19%	0%	16%	0%	4%	13%	33%	3%	0%	4%	0%	4%	0%

Measures	Outliers															
	Uganda	Highest	Lowest	Acholi (Gulu)	Ankole (Mbarara)	Bukedi (Tororo)	Bunyoro (Hoima)	Busoga (Jinja)	Central I (Masaka)	Central II (Mukono)	Elgon (Mbale)	Kampala (4-Division)	Kigezi (Kabale)	Lango (Lira)	Teso (Soroti)	Tooro (Kabarole)
Sale of household assets	5%	5%	11%	0%	1%	0%	10%	16%	7%	3%	7%	13%	2%	4%	6%	
Money from property such as rent	4%	2%	5%	0%	3%	1%	4%	4%	8%	3%	9%	4%	1%	18%	4%	
School fees	2%	1%	12%	0%	3%	0%	0%	0%	9%	1%	2%	10%	0%	0%	0%	
<b>Net Expenditure on gambling: Gambler's expenditure on gambling in the past 30 days preceding the survey</b>																
Average	236,306	501,072	518,628	83,180	99,050	127,691	121,039	171,465	126,087	246,202	333,125	86,000	133,840	547,600	109,260	
Maximum	21,000,000	21,000,000	12,000,000	600,000	800,000	1,000,000	500,000	1,000,000	700,000	4,500,000	10,000,000	300,000	1,000,000	10,500,000	1,000,000	
Minimum	1,000	2,000	20,000	5,000	10,000	1,000	10,000	10,000	1,000	1,000	5,000	2,000	5,000	10,000	5,000	
Standard Deviation	819,577	2,221,040	1,246,296	126,068	103,499	223,920	147,343	152,426	138,342	472,989	1,328,809	80,398	150,797	1,687,461	175,018	
<b>Acquired assets via gambling last 12 months</b>																
Yes	43%	38%	26%	34%	40%	66%	65%	34%	40%	40%	30%	87%	32%	24%	88%	
No	57%	62%	74%	66%	60%	34%	35%	66%	60%	60%	70%	13%	68%	76%	12%	
<b>Main reasons for gambling</b>																
To win money	66%	78%	86%	52%	61%	33%	33%	71%	51%	71%	75%	48%	68%	54%	94%	
To win money to support worthy causes	17%	1%	1%	4%	10%	12%	12%	22%	36%	20%	14%	12%	21%	36%	4%	
Out of excitement, entertainment or fun	8%	8%	10%	40%	10%	27%	22%	0%	5%	4%	2%	6%	9%	2%	0%	
A hobby	5%	3%	1%	0%	13%	15%	25%	3%	2%	4%	0%	19%	1%	0%	0%	
To socialize with peers and friends	2%	3%	1%	0%	1%	9%	8%	2%	5%	0%	5%	2%	0%	6%	2%	
Others	1%	4%	0%	2%	0%	1%	0%	2%	0%	1%	2%	0%	0%	0%	0%	
Makes me feel good	1%	2%	0%	2%	0%	0%	0%	0%	0%	0%	2%	12%	1%	0%	0%	
To escape or distract myself from depression or bad feeling	1%	0%	0%	0%	4%	2%	0%	0%	1%	0%	0%	2%	0%	2%	0%	
Out of curiosity	0%	0%	1%	0%	1%	1%	0%	0%	0%	0%	0%	0%	0%	0%	0%	
<b>Impact of gambling</b>																

Measures	Outliers															
	Highest	Lowest	Uganda	Acholi (Gulu)	Ankole (Mbarara)	Bukedi (Tororo)	Bunyoro (Hoima)	Busoga (Jinja)	Central I (Masaka)	Central II (Mukono)	Elgon (Mbale)	Kampala (4-Division)	Kigezi (Kabale)	Lango (Lira)	Teso (Soroti)	Tooro (Kabarole)
Yes, positive only	7%	11%	6%	24%	4%	17%	10%	5%	2%	5%	0%	12%	3%	6%	0%	
Yes, negative only	26%	12%	14%	28%	9%	10%	14%	16%	26%	38%	64%	8%	21%	62%	8%	
Both positive and negative	52%	68%	71%	20%	65%	64%	43%	68%	69%	38%	36%	44%	58%	30%	92%	
No effects all	15%	8%	9%	28%	22%	9%	33%	11%	3%	18%	0%	37%	18%	2%	0%	
<b>Impact of gambling on gamblers</b>																
Reduced saving	42%	80%	79%	22%	17%	32%	20%	25%	53%	38%	82%	44%	24%	72%	24%	
Psychosocial distress	25%	4%	53%	24%	57%	9%	4%	33%	18%	24%	36%	12%	11%	54%	10%	
Substance abuse	9%	18%	41%	4%	3%	0%	2%	3%	11%	3%	23%	29%	3%	22%	2%	
Socially isolated	8%	16%	20%	12%	2%	0%	20%	3%	15%	4%	32%	8%	0%	14%	0%	
Peer violence	3%	1%	13%	2%	2%	0%	0%	3%	1%	2%	7%	2%	0%	12%	0%	
Suicide attempt	3%	7%	18%	2%	1%	0%	6%	2%	1%	1%	9%	15%	0%	2%	0%	
Engaged risky sexual behaviour	2%	5%	5%	0%	0%	0%	0%	0%	1%	1%	11%	4%	0%	4%	0%	
Contracted disease	2%	7%	4%	0%	0%	0%	0%	0%	3%	0%	18%	10%	1%	10%	0%	
Committed offence	2%	12%	9%	0%	0%	0%	2%	1%	5%	1%	5%	0%	0%	0%	0%	
Early Childbearing	1%	5%	9%	2%	0%	0%	0%	0%	1%	1%	2%	2%	0%	0%	0%	
<b>Impact of gambling on education</b>																
School failure or low grades	8%	7%	19%	0%	0%	3%	0%	0%	14%	5%	30%	20%	8%	2%	0%	
Dropped out school	6%	9%	6%	0%	2%	3%	33%	3%	10%	2%	20%	11%	0%	2%	8%	
<b>Impact of gambling on family welfare</b>																
Misappropriated money intended for household necessity	25%	36%	62%	8%	9%	4%	16%	23%	28%	24%	54%	33%	6%	58%	2%	
Spent less on basic needs	20%	36%	72%	16%	16%	8%	10%	12%	30%	9%	18%	29%	12%	50%	14%	
Facilitated tensions in family relationships	20%	21%	54%	14%	52%	10%	8%	16%	13%	16%	57%	6%	8%	20%	0%	
Delayed paying household utilities	14%	15%	42%	4%	6%	25%	10%	20%	27%	10%	11%	4%	2%	18%	6%	
Sold-off household assets	11%	22%	24%	8%	2%	1%	10%	12%	17%	5%	27%	25%	1%	40%	18%	
Poor parenting	6%	23%	22%	4%	1%	2%	4%	0%	15%	1%	14%	6%	0%	8%	10%	
Domestic violence	5%	9%	6%	4%	2%	1%	2%	2%	16%	2%	21%	6%	3%	12%	2%	

Measures	Outliers																
	Highest	Lowest	Uganda	Acholi (Gulu)	Ankole (Mbarara)	Bukedi (Tororo)	Bunyoro (Hoima)	Busoga (Jinja)	Central I (Masaka)	Central II (Mukono)	Elgon (Mbale)	Kampala (4-Division)	Kigezi (Kabale)	Lango (Lira)	Teso (Soroti)	Tooro (Kabarole)	West Nile (Arua)
Divorce or separated with family			3%	6%	4%	0%	0%	0%	8%	2%	5%	2%	14%	6%	3%	12%	0%
<b>Impact of gambling on gamblers livelihood</b>																	
Mis used of funds for gambling			33%	46%	71%	16%	11%	3%	14%	27%	40%	32%	73%	56%	11%	62%	26%
Reduced productivity at work			29%	48%	49%	28%	56%	32%	14%	16%	50%	17%	50%	13%	16%	68%	4%
Slow growth or progression at work			12%	55%	29%	14%	4%	8%	8%	12%	11%	5%	32%	6%	0%	18%	0%
Job loss			5%	5%	14%	0%	0%	2%	0%	1%	9%	5%	27%	4%	1%	8%	0%
<b>Gamblers general health status in the past year</b>																	
Excellent			24%	10%	3%	18%	25%	0%	27%	29%	27%	40%	2%	27%	10%	10%	20%
Good			46%	63%	49%	48%	62%	44%	57%	42%	61%	29%	45%	52%	77%	16%	80%
Fair			23%	20%	36%	28%	12%	37%	16%	22%	9%	25%	46%	15%	13%	32%	0%
Poor			8%	7%	12%	6%	1%	19%	0%	7%	3%	7%	7%	6%	0%	42%	0%
<b>Gambler who think their physical health was not good at one day in the last 30 days</b>																	
Gambler who think their physical health was not good at one day in the last 30 days			37%	38%	56%	64%	18%	69%	31%	34%	17%	36%	23%	50%	23%	82%	8%
<b>Gamblers who ever had two or more weeks with loss of interest in things they enjoy like work, hobbies etc.</b>																	
Gamblers who ever had two or more weeks with loss of interest in things they enjoy like work, hobbies etc.			48%	43%	61%	48%	17%	52%	57%	51%	62%	50%	52%	29%	48%	86%	2%
Yes			49%	21%	61%	52%	48%	72%	53%	49%	36%	46%	54%	79%	57%	84%	6%
<b>Last 12months, ever feel so sad or hopeless almost every day, for weeks or more that disrupted usual activities</b>																	
Yes			48%	14%	66%	62%	42%	72%	55%	47%	47%	45%	50%	62%	47%	84%	2%

Measures	Outliers															
	Highest	Lowest	Uganda	Acholi (Gulu)	Ankole (Mbarara)	Bukedi (Tororo)	Bunyoro (Hoima)	Busoga (Jinja)	Central I (Masaka)	Central II (Mukono)	Elgon (Mbale)	Kampala (4-Division)	Kigezi (Kabale)	Lango (Lira)	Teso (Soroti)	Tooro (Kabarole)
<b>Gamblers ever experiences for a period on one week the following; felt so irritable or short-tampered threw things, broke things, started arguments, shouted at people, or hit someone</b>																
Yes	40%	6%	58%	18%	42%	47%	35%	80%	45%	35%	48%	58%	26%	72%	2%	
<b>Gamblers who ever thought about killing themselves?</b>																
Yes	11%	4%	31%	8%	3%	7%	14%	8%	15%	8%	48%	27%	4%	16%	0%	
<b>Gamblers who ever tried to kill themselves</b>																
Yes	4%	2%	7%	2%	1%	2%	6%	0%	8%	5%	11%	12%	2%	6%	0%	
<b>Gamblers reporting gambling as a significant cause for wanting to kill himself</b>																
Yes	4%	2%	6%	2%	1%	2%	6%	0%	6%	5%	11%	12%	0%	6%	0%	
<b>Number of days surveyed gamblers have used substance/drugs in the last 30 days</b>																
Alcohol	7	9	12	2	7	1	5	8	10	6	3	7	8	10	0	
Cigarettes	2	3	3	1	1	0	2	3	4	1	1	2	4	8	0	
Mairungi	1	3	2	0	0	0	1	2	2	0	0	0	2	3	0	
<b>Gamblers perceiving gambling as a significant factor for stress, depression, hopelessness, emotions, suicide tendencies, loss of interest in things they enjoy and use of substances</b>																
Yes	53%	16%	80%	52%	57%	41%	43%	78%	83%	45%	66%	75%	59%	70%	2%	
<b>Gamblers with problem gambling based on the GA threshold for classification of problem and non-problem gambling</b>																

Measures	Outliers	Highest	Lowest												
	Uganda	Acholi (Gulu)	Ankole (Mbarara)	Bukedi (Tororo)	Bunyoro (Hoima)	Busoga (Jinja)	Central I (Masaka)	Central II (Mukono)	Elgon (Mbale)	Kampala (4-Division)	Kigezi (Kabale)	Lango (Lira)	Teso (Soroti)	Tooro (Kabarole)	West Nile (Arua)
<b>Prevalence of problem gambling: Gamblers with at least 14 of indicators of problem gambling habits</b>	37%	19%	80%	18%	43%	28%	25%	39%	54%	33%	52%	40%	21%	62%	4%
<b>Gamblers with problem gambling Indicators (OR Types of problem gambling)</b>															
After a win, have you felt a strong urge to return and win more?	85%	78%	100%	82%	82%	90%	78%	93%	81%	82%	98%	52%	88%	98%	100%
After losing, have you felt you must return as soon as possible and win back your losses?	83%	61%	98%	80%	93%	76%	82%	87%	96%	78%	95%	67%	81%	92%	98%
Have you ever gambled longer than you had planned	79%	85%	94%	72%	94%	49%	98%	97%	88%	73%	91%	50%	64%	96%	82%
Have you ever gambled to get money with which to pay debts or otherwise solve financial difficulties?	71%	48%	90%	48%	83%	69%	75%	82%	79%	66%	80%	73%	67%	84%	66%
Has gambling caused you to have difficulty sleeping?	70%	71%	92%	52%	77%	72%	37%	77%	83%	67%	89%	29%	60%	78%	78%
Have you often gambled until losing your last shilling?	66%	86%	85%	76%	57%	37%	47%	62%	79%	63%	89%	58%	39%	94%	98%
Have you ever had an urge to celebrate any good fortune by a few hours of gambling?	66%	56%	99%	82%	80%	93%	20%	79%	36%	55%	41%	60%	96%	58%	92%
Have you ever felt remorse after gambling?	66%	14%	87%	66%	58%	54%	86%	97%	77%	71%	54%	67%	56%	82%	6%
Have you ever lost time from work or school due to gambling?	57%	38%	97%	62%	83%	50%	45%	58%	64%	48%	82%	56%	66%	72%	8%
Has gambling ever made your home life unhappy?	57%	31%	83%	36%	52%	48%	78%	76%	68%	55%	66%	46%	52%	62%	44%
Have you ever gambled to escape worry or trouble?	51%	39%	76%	52%	67%	82%	29%	47%	65%	46%	71%	54%	27%	60%	10%
Have you ever borrowed to finance your gambling?	50%	72%	83%	26%	82%	28%	39%	57%	66%	38%	57%	58%	35%	74%	14%
Have you ever been reluctant to use 'gambling money' for normal expenditures?	49%	27%	94%	78%	76%	51%	35%	37%	48%	41%	52%	71%	52%	72%	2%
Has gambling caused a decrease in your ambition or efficiency	49%	34%	79%	12%	34%	47%	45%	63%	81%	45%	48%	77%	35%	78%	10%
Has gambling made you careless of the welfare of yourself or your family?	48%	46%	80%	30%	52%	43%	63%	46%	73%	42%	70%	58%	26%	58%	2%

	Outliers	Highest	Lowest													
Measures	Uganda	Acholi (Gulu)	Ankole (Mbarara)	Bukedi (Tororo)	Bunyoro (Hoima)	Busoga (Jinja)	Central I (Masaka)	Central II (Mukono)	Elgon (Mbale)	Kampala (4-Division)	Kigezi (Kabale)	Lango (Lira)	Teso (Soroti)	Tooro (Kabarole)	West Nile (Arua)	
Has gambling affected your reputation?	43%	21%	69%	28%	41%	32%	57%	48%	73%	39%	57%	63%	23%	62%	8%	
Do arguments, disappointments or frustrations create within you an urge to gamble?	41%	23%	70%	38%	65%	19%	29%	30%	50%	39%	54%	62%	36%	62%	8%	
Have you ever sold anything to finance gambling?	39%	55%	81%	20%	61%	20%	59%	36%	46%	30%	52%	54%	13%	50%	8%	
Have you ever committed, or considered committing, an illegal act to finance gambling?	22%	25%	49%	0%	29%	2%	27%	17%	24%	22%	34%	67%	2%	22%	0%	
Have you ever considered self-destruction or suicide as a result of your gambling?	20%	12%	44%	2%	16%	5%	20%	30%	18%	19%	46%	60%	1%	18%	0%	
<b>Gamblers who have ever seen or heard information/ education on gambling</b>																
Yes	65%	98%	28%	56%	54%	94%	4%	76%	66%	74%	89%	35%	24%	26%	100%	
<b>Gamblers who have ever seen or heard information/ education on gambling by sources</b>																
Never heard gambling info education	35%	2%	72%	44%	46%	6%	96%	24%	34%	26%	11%	65%	76%	74%	0%	
School	3%	0%	0%	4%	5%	7%	0%	1%	5%	2%	20%	6%	0%	0%	4%	
Local radio	44%	76%	8%	40%	14%	33%	4%	63%	41%	56%	57%	33%	16%	8%	100%	
Local TV	25%	55%	0%	22%	5%	15%	4%	32%	29%	36%	32%	21%	0%	2%	36%	
Community leader	10%	11%	0%	24%	21%	0%	0%	1%	13%	10%	48%	33%	0%	8%	0%	
Internet	18%	14%	8%	6%	23%	19%	0%	25%	32%	15%	14%	27%	9%	4%	74%	
Gambling outlets	29%	34%	17%	0%	17%	47%	2%	14%	57%	34%	4%	4%	10%	22%	100%	
<b>Gamblers who have ever seen or heard information regarding assistance to problem gamblers</b>																
Yes	46%	94%	29%	60%	49%	8%	0%	42%	51%	49%	89%	46%	8%	18%	100%	
<b>Gamblers who have ever seen or heard information regarding assistance to problem gamblers by source</b>																
Never heard gambling info education	54%	6%	71%	40%	51%	92%	100%	58%	49%	51%	11%	54%	92%	82%	0%	
School	3%	1%	0%	6%	4%	3%	0%	1%	5%	2%	20%	13%	0%	0%	2%	



	Outliers	Highest	Lowest												
Measures	Uganda	Acholi (Gulu)	Ankole (Mbarara)	Bukedi (Tororo)	Bunyoro (Hoima)	Busoga (Jinja)	Central I (Masaka)	Central II (Mukono)	Elgon (Mbale)	Kampala (4-Division)	Kigezi (Kabale)	Lango (Lira)	Teso (Soroti)	Tooro (Kabarole)	West Nile (Arua)
Local radio	31%	74%	7%	44%	12%	2%	0%	31%	25%	37%	61%	35%	3%	4%	100%
Local TV	15%	43%	1%	20%	4%	2%	0%	15%	20%	18%	30%	15%	1%	2%	34%
Community leader	10%	10%	0%	24%	17%	0%	0%	2%	9%	9%	48%	33%	1%	8%	2%
Internet	15%	13%	10%	4%	19%	2%	0%	17%	30%	15%	13%	31%	3%	4%	72%
Gambling outlets	18%	23%	16%	0%	15%	4%	0%	1%	43%	23%	4%	4%	2%	10%	98%
<b>Gamblers who would seek help or refer someone they knew is a problem gambler to seek help</b>															
Yes	69%	25%	81%	80%	82%	94%	12%	83%	73%	71%	82%	79%	51%	72%	36%
<b>Sources to seek help on problem gambling</b>															
Friend	16%	14%	1%	32%	33%	9%	4%	4%	29%	13%	23%	12%	21%	42%	26%
Psychologist Counsellor	12%	12%	8%	20%	19%	1%	0%	14%	15%	11%	13%	13%	13%	8%	36%
Medical professional	13%	5%	4%	6%	9%	0%	4%	8%	44%	13%	38%	15%	1%	8%	26%
Other family member	6%	5%	1%	8%	24%	5%	0%	3%	18%	1%	23%	6%	1%	16%	2%
Spouse	3%	5%	0%	0%	1%	0%	0%	0%	11%	3%	2%	6%	1%	2%	10%
District	1%	0%	0%	2%	0%	0%	0%	0%	5%	0%	2%	4%	0%	0%	4%
Employer	2%	1%	0%	8%	2%	0%	0%	0%	9%	2%	0%	0%	0%	0%	2%
Helpline	4%	0%	10%	0%	0%	0%	0%	16%	11%	4%	0%	0%	1%	2%	0%
<b>Gamblers who have ever felt like stopping gambling, but could not do in the past year</b>															
Almost every day	39%	34%	22%	36%	17%	35%	47%	24%	59%	39%	89%	15%	28%	86%	46%
Once or twice a week	9%	12%	23%	18%	0%	14%	16%	6%	7%	9%	5%	17%	5%	0%	4%
Once or twice a month	7%	5%	4%	2%	0%	7%	10%	9%	13%	11%	4%	8%	1%	6%	2%
More than one year ago	2%	0%	0%	0%	3%	7%	0%	1%	2%	2%	0%	4%	7%	2%	0%
A few times in the past year	11%	4%	4%	4%	27%	10%	6%	38%	11%	10%	2%	6%	16%	0%	0%
Never	32%	44%	47%	40%	53%	27%	22%	22%	9%	30%	0%	50%	44%	6%	48%

	Outliers	Highest	Lowest												
Measures	Uganda	Acholi (Gulu)	Ankole (Mbarara)	Bukedi (Tororo)	Bunyoro (Hoima)	Busoga (Jinja)	Central I (Masaka)	Central II (Mukono)	Elgon (Mbale)	Kampala (4-Division)	Kigezi (Kabale)	Lango (Lira)	Teso (Soroti)	Tooro (Kabarole)	West Nile (Arua)
<b>Self-identification of gambling problems: Gamblers who are confident they would be able to recognize the signs that themselves, a friend, a family member, or an acquaintance has a gambling problem</b>															
Extremely Confident	28%	19%	29%	36%	13%	38%	22%	35%	17%	31%	7%	37%	32%	42%	18%
Moderately Confident	32%	40%	46%	8%	32%	10%	51%	29%	51%	27%	55%	37%	28%	12%	44%
Slightly Confident	25%	19%	22%	24%	50%	36%	10%	22%	28%	25%	25%	21%	13%	10%	22%
Not confident at all	16%	23%	3%	32%	5%	16%	18%	14%	4%	17%	13%	6%	28%	36%	16%
<b>How frequent surveyed gamblers feel they have a problem with gambling</b>															
Most of the time	13%	3%	3%	6%	5%	15%	14%	10%	14%	15%	16%	25%	16%	24%	24%
Almost always	28%	45%	25%	32%	17%	15%	37%	12%	17%	30%	71%	42%	10%	42%	22%
Sometimes	27%	3%	46%	4%	28%	46%	31%	42%	33%	24%	11%	31%	27%	18%	38%
Never	32%	48%	26%	58%	50%	24%	18%	36%	37%	31%	2%	2%	48%	16%	16%

Source: Survey data