

In response to: **Questions submitted to the World Health Organization by the PS, Livre and PCP Parliamentary Groups in the context of a request submitted by the Livre Parliamentary Group for the discussion of Members' Bills Nos 219, 220, 221 and 222/XVii/1.\*(L) Reference**

Your reference: **ICOm6XVII/2026/15**

WHO is pleased to provide a written briefing in reply to the request from the Committee on Economy and Territorial Cohesion for its study of gambling. This briefing is informal and provided on a voluntary basis without prejudice to the privileges and immunities of WHO and its officials, and as a technical contribution.

- The following technical briefing has been developed in response to questions submitted to the World Health Organization by the PS. Livre and PCP Parliamentary Groups in the context of a request submitted by the Livre Parliamentary Group for the discussion of Members' Bills Nos 219, 220, 221 and 222/XVii/1.\*(L) Reference. It needs to be noted that so far WHO has not developed normative guidance on addressing gambling and health or gambling disorder. WHO has not evaluated Portugal's national situation and no comment or assessment can thus be made on the specific situation in Portugal.
- The main sources of information for this technical briefing are a factsheet on gambling that has been published by WHO on 2 December 2024 ([Gambling](#)) and a full technical brief on "Gambling and Gambling Disorder" that will be published by WHO later in 2026. These documents summarize and present evidence available without making recommendations. Gambling disorder is included in ICD-11 and further information is available in the WHO (2024) Clinical descriptions and diagnostic requirements for ICD-11 mental, behavioural and neurodevelopmental disorders (CDDR).

## Public health dimension of gambling

- **Gambling has been framed by WHO as a major public health issue**, not merely an individual behavioural problem. Gambling disorder has been included in the ICD-11 as a disorder due to addictive behaviour<sup>1</sup>.

## Monitoring and epidemiological information on gambling and gambling disorder

- **WHO estimates that approximately 1.2% of the world's adult population has a gambling disorder<sup>2</sup>**. It needs to be noted that these data are global averages and are not disaggregated by age group, region, or country, and thus cannot be used to infer rates specifically for Portugal or for the EU. WHO does not monitor gambling disorder incidence and cannot provide an incidence comparison between young people in Portugal and the European Union average.<sup>1</sup>
- **The Lancet Public Health Commission on Gambling (2024) summarized that 17.9% of adolescents worldwide engaged in gambling in the past year, with 10.3% gambling online**, despite described broad consensus that commercial gambling among minors should be prohibited; among those who gamble, harm levels are high, with 26.4% of adolescents using online casino or slot products and 16.3% of those using sports-betting products meeting criteria for gambling disorder or problematic gambling.
- **While WHO does not collect data on gambling in specific age groups**, current evidence suggests that digital advertising of gambling as a major driver of risk and increased harm among young people contributing to rising gambling engagement, as per *The Lancet Public Health Commission on gambling (2024)*<sup>3</sup>.
- **WHO has not described the future development of gambling and gambling disorder, with or without the implementation of further regulations** A priority at the moment would be to have national, regional and global prevalence data and additional information on health harms.

## Modes of gambling and associated risks

- **Gambling can lead to serious harms to health. These include financial stress, relationship breakdown, family violence, mental illness and suicide.**<sup>4</sup> The Lancet Public Health Commission on Gambling (2024)<sup>5</sup> summarized evidence, among other topics demonstrating that gambling is associated with a wide range of mental-health harms, including psychological distress, depression and anxiety, increased risk of suicidality, domestic violence, and long-term emotional and social difficulties affecting individuals, families, and communities.
- **Easy accessibility of gambling products increases the risk of uptake.** Opportunities to gamble are often disproportionately located in areas of higher disadvantage. High-intensity products including EGMs, high-speed wagering platforms, and casino games, including online versions, are readily accessible almost anywhere. The commercialization of gambling in many countries – which also drives normalization – is increasing the incidence of gambling harm. Sponsorship or other association with popular sporting leagues, and the colocation of gambling products in social settings, are key mechanisms.

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<sup>1</sup> WHO (2024). Clinical descriptions and diagnostic requirements for ICD-11 mental, behavioural and neurodevelopmental disorders content

<sup>2</sup> WHO Factsheet on Gambling: 2 December 2024 [Gambling](#)

<sup>3</sup> The Lancet Public Health Commission on gambling (2024)

<sup>4</sup> WHO Factsheet on Gambling: 2 December 2024 [Gambling](#)

<sup>5</sup> The Lancet Public Health Commission on gambling (2024)

Aggressive promotion of gambling in popular and social media also increases gambling activity.<sup>6</sup>

## Public policies and Prevention of gambling related harm

- Universal, population-wide public health approaches are required to prevent gambling harm. These include ending gambling advertising, promotion and sponsorship of sports and other cultural activities; reducing stigma and shame experienced by those harmed by gambling; universal account registration with binding pre-commitment and effective self-exclusion tools; product safety measures including universal loss limits, maximum bet sizes and required breaks in gambling sessions; effective regulation of gambling providers, including well-resourced enforcement activities; addressing gambling industry corporate political activity and influence on research; and counter-messaging that conveys warnings about harms associated with gambling products<sup>7</sup>. For information: WHO is currently analyzing data received from Member States on the implementation of different regulatory measures across the globe for publication in a report upcoming in 2027.
- **WHO has not done a ranking of policies or higher-impact strategies to address gambling related harm, prioritizing one over the other.** In line with a WHO (2024) factsheet on gambling, multisectoral action to reduce gambling harm is required to reduce the potential for gambling to impede progress on the Sustainable Development Goals. WHO acknowledges the need for Member States to closely monitor and effectively regulate gambling operations, products and activities. This should include reducing stigma and shame related to gambling, ending advertising and promotion, and a focus on other upstream efforts to prevent and reduce gambling harm<sup>8</sup>.
- **Advertising, promotion, and sponsorship of gambling seem to play a significant role in both the initiation of gambling and the intensification of gambling behaviours, particularly among young people and other vulnerable populations<sup>9</sup>.** In WHO's assessment, advertising, promotion, and sponsorship are major structural drivers of gambling uptake and harmful behaviour, especially among youth and vulnerable groups. They contribute to the initiation of gambling, the escalation of risky patterns of use, and the worsening of associated harms. For this reason, WHO suggests regulations of advertising and promotions —to protect public health of affected populations.
- **WHO does not evaluate national level legislative initiatives on gambling,** but data received from Member States on the implementation of different regulatory measures and policies are currently being analyzed for publication in a report upcoming in 2027. In general and in line with the above WHO suggests a number of population-based interventions including but not limited to ending gambling advertising, promotion and sponsorship of sports and other cultural activities<sup>10</sup>

## Responses to gambling related harm

- **WHO has highlighted the need to regulate the digital gambling market, including stronger controls on marketing and online availability<sup>11</sup>.** However, there are currently no WHO recommendations specifically calling for—or formally endorsing—the possibility of a full ban on advertising for online gambling platforms. WHO identifies ending advertising and promotions as one of several population-wide interventions that

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<sup>6</sup> WHO Factsheet on Gambling: 2 December 2024 [Gambling](#)

<sup>7</sup> WHO Factsheet on Gambling: 2 December 2024 [Gambling](#)

<sup>8</sup> WHO Factsheet on Gambling: 2 December 2024 [Gambling](#)

<sup>9</sup> In line with: WHO Technical Brief: Gambling and Gambling Disorder (unpublished, upcoming 2026)

<sup>10</sup> WHO Factsheet on Gambling: 2 December 2024 [Gambling](#)

<sup>11</sup> WHO Factsheet on Gambling: 2 December 2024 [Gambling](#)

can help prevent and reduce harm, but there is no formal WHO guideline or explicit policy recommendations for a complete, comprehensive ban<sup>12</sup>.

- **WHO does not provide specific recommendations on how countries should prevent individuals from circumventing self-exclusion systems through the use of third-party accounts or illegal/unlicensed platforms.** In an upcoming unpublished publication on gambling and gambling disorder, WHO emphasizes the need for strong regulation, including actions such as: restricting accessibility, enforcing existing laws, and implementing population-level harm-reduction measures. But WHO does not issue detailed guidance on technical or operational mechanisms to block third-party account misuse, identity fraud, or engagement with offshore/illegal operators.
- **WHO has not issued specific recommendations on the way countries could technically or operationally limit access to illegal or unlicensed gambling platforms.** WHO calls for strong regulation and strict enforcement of existing laws, identifying gambling as increasingly accessible through digital channels and emphasizing the need for governments to regulate and control the market. However, WHO does not provide detailed guidance on measures such as IP or domain blocking, payment blocking, coordinated enforcement with internet service providers, cross-border regulatory cooperation, or criminal or administrative tools targeting illegal operators. Existing and upcoming WHO publications currently focus on broader population-level interventions, including ending advertising and promotions and strengthening regulation.
- **WHO does not currently recommend any specific screening tools or screening protocols for use in university or school settings to detect at-risk gambling behaviours.** In general, screens or instruments used to assess risk of experiencing harm or problems with gambling vary, but generally seek to identify those at risk of experiencing any problems or harm from gambling (any risk gambling), and those at the highest risk of gambling harm or problems (highest risk gambling). Many different gambling screens have been used in surveys to estimate the comparative extent of harmful gambling across jurisdictions<sup>13</sup>. This complicates the accurate measurement of the extent of harmful gambling, and its severity (Markham et al 2017<sup>14</sup>)<sup>15</sup>. WHO is currently leading an international initiative to develop new, standardized screening and diagnostic instruments for both gaming disorder and gambling disorder.<sup>16</sup>
- **A range of therapies exist for those with gambling disorder. Currently, the most effective are long-term cognitive behavioural therapy or motivational interviewing<sup>17</sup>.** Beyond this, WHO does not currently specify, endorse, or recommend any particular psychotherapy (including CBT) protocol for the treatment of online gambling addiction. Issuing specific CBT protocols—or any clinical treatment recommendations—would require WHO to undergo its formal guidelines development process. WHO has not initiated any gambling-related guideline development processes, due to currently limited resource availability.
- **WHO acknowledges that gambling harms extend beyond individuals to include family violence, relationship breakdown, financial stress, and neglect, but it does not provide gambling specific normative guidelines.** For every person who gambles at high-risk levels, an average of six others (usually non-gamblers) are affected<sup>18</sup>. This

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<sup>12</sup> WHO Factsheet on Gambling: 2 December 2024 [Gambling](#)

<sup>13</sup> Tran, L.T., et al., The prevalence of gambling and problematic gambling: a systematic review and meta-analysis. *The Lancet Public Health*, 2024. 9(8): p. e594-e613.

<sup>14</sup> Markham, F., Young, M., Doran, B. et al. A meta-regression analysis of 41 Australian problem gambling prevalence estimates and their relationship to total spending on electronic gaming machines. *BMC Public Health* 17, 495 (2017). <https://doi.org/10.1186/s12889-017-4413-6>

<sup>15</sup> WHO Technical Brief: Gambling and Gambling Disorder (unpublished, upcoming 2026)

<sup>16</sup> <https://www.who.int/teams/mental-health-and-substance-use/alcohol-drugs-and-addictive-behaviours/addictive-behaviours/new-instruments-for-addictive-behaviours>

<sup>17</sup> WHO Factsheet on Gambling: 2 December 2024 [Gambling](#)

<sup>18</sup> Goodwin BC, Browne M, Rockloff M, Rose J. A typical problem gambler affects six others. *Int Gambl Stud* 2017; 17: 276–89.

number is likely much higher in kinship cultures, including among Indigenous peoples<sup>19</sup>. However, there is other existing WHO guidance that address issues highly relevant to families affected by gambling. These include guidance on managing stress<sup>20</sup>, depression<sup>21</sup>, anxiety, violence, psychological distress, broader mental-health support and more<sup>22</sup>. This guidance might be broadly applicable to families experiencing financial stress, relationship breakdown, and social isolation, which gambling harm often exacerbates.

### **International coordination on gambling**

- **To the knowledge of WHO, there is no international negotiation currently underway to establish global regulation of online gambling.** WHO acknowledges that Gambling harm increases as gambling markets expand, challenging the health and well-being of populations. Unlicensed, illegal or offshore gambling poses significant regulatory challenges for all governments. Responding effectively requires intergovernmental cooperation to share data, protect consumers from unregulated practices and allow governments to capture lawful taxation revenue. Without effective protections, gambling may undermine progress toward the achievement of the Sustainable Development Goals (SDGs), particularly 3, 10 and 16<sup>23</sup>.

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<sup>19</sup> WHO Factsheet on Gambling: 2 December 2024 [Gambling](#)

<sup>20</sup> (WHO, 2020) . [Doing What Matters in Times of Stress](#)

<sup>21</sup> WHO (2025) Factsheet. Depressive disorder (depression) [Depressive disorder \(depression\)](#)

<sup>22</sup> WHO (2023) Mental Health Gap Action Programme (mhGAP) guideline for mental, neurological and substance use disorders. [Mental Health Gap Action Programme \(mhGAP\) guideline for mental, neurological and substance use disorders](#)

<sup>23</sup> WHO Factsheet on Gambling: 2 December 2024 [Gambling](#)