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Effect of social gambling on the mental well-being of the youth in Nakawa Division, Kampala District, Uganda. A cross-sectional study.

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ABSTRACT

Background:
The effect of social gambling is most pronounced on social and environmental well-being. The study aims to analyse the effect of social gambling on the mental well-being of the youth in Nakawa Division, Kampala District, Uganda.

Methodology:
A quantitative cross-sectional study. The target population was all youth in Nakawa Division, Kampala. The accessible population comprised youth in four randomly selected parishes in Nakawa Division, totaling about 11,050 youth.

Results:
There was a significant effect of social gambling on mental well-being (β=.139, p=.007). The study results show that social gambling significantly accounted for 1.9% of the variance in mental well-being (R^2 = .0.19, F (1,369), p =.007). The regression coefficient for social gambling was 1.093, with a standard error of 0.405. This implies that for every unit increase in social gambling behaviour, mental well-being increases by 1.093 units. The positive relationship between social gambling and mental well-being was found to be statistically significant (t (369) = 2.701, p=0.007). R^2 is below 0.25, indicating that the effect size is small. The R^2 of 0.019 obtained in the present regression model indicates that social gambling behaviour plays a less substantial role in mental well-being. The majority of the participants had attained Advanced Level (A-level) education (37.9%) as their highest level of education.

Conclusion:
Social gambling has a weak but statistically significant positive relationship with youth mental well-being, mainly influencing social and environmental well-being. Social gambling appears to provide opportunities for peer bonding and recreation, which may offer temporary psychological benefits.

Recommendations:
It is recommended that the Ministry of Education and Sports and the National Council for Higher Education introduce courses and modules on problem gambling in universities and other higher learning institutions.

Keywords: *Social gambling, Mental well-being, Youth in Nakawa Division.*
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Background
Evidence of gambling dates back to around 2300 BC in the early Chinese dynasties that cherished games of chance that were often tied to religious and cultural practices (Schwartz, 2006). In the medieval and early modern periods, gambling became more common among all social classes (McMillen, 2009). Viewed with suspicion and often associated with moral decay and societal disruption, some societies, like colonial America, formulated laws prohibiting or regulating it (Reith, 2011). By the 19th century, organised gambling avenues like casinos and racetracks were commonplace in the United States and Europe, and coincided with early psychological and psychiatric works about the subconscious motivations behind gambling behaviours, linking them to

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broader psychoanalytic concepts, including mental well-being (Cassidy, Loussouarn & Pisac, 2013; Rosenthal, 1992).

The results of a study by Mugisha et al. (2021) in Uganda show that social gaming is becoming more and more popular among young people in urban areas like Kampala. When people experience financial losses from gambling, this conduct may cause them to feel stressed and anxious. Calado and Griffiths (2016) reveal that social gambling among youth may cultivate addictive behaviours, thereby exacerbating pre-existing mental well-being problems. This phenomenon is frequently intensified by cycles of debt and loss, which contribute to elevated stress levels and a pervasive sense of hopelessness. The inherently unpredictable nature of gambling can create a deceptive sense of control, inciting compulsive betting and subsequent psychological distress as losses mount.

Empirical evidence indicates that the effect of social gambling is most pronounced on social and environmental well-being. Interaction within gambling environments such as betting centres may foster familiarity and peer bonds (Estévez et al., 2022), especially in urban areas where gambling is less stigmatised (Tolchard, 2015). Yet, emotional and occupational well-being remain largely unaffected, suggesting that the perceived benefits of social gambling may not extend to mental or economic stability (Blackman et al., 2019). The study aims to analyse the effect of social gambling on the mental well-being of the youth in Nakawa Division, Kampala District, Uganda.

METHODOLOGY

Research Design

The study employed a cross-sectional survey and case study research design. This design enabled the study to quickly collect primary data over a short period of time and can contain multiple variables at the time of the data snapshot (Farnsworth, 2019). On the other hand, a case study design was adopted because it enables an in-depth exploration of gambling behaviour and mental well-being within the real-life context of Uganda's youth. This approach is particularly appropriate for examining complex social issues that are shaped by cultural expectations and individual experiences. By focusing on a bounded system, the design allows the collection of rich, contextualised data, enhancing the validity and depth of insights (Yin, 2018). It also provides a holistic understanding of the lived experiences of the youth with gambling, thereby generating practical, sector-specific knowledge that can inform policy interventions.

Research approach

The study also employed a quantitative approach of data collection.

Area of Study

The study was conducted in Nakawa Division, Kampala District. Nakawa Division lies on the eastern side of Kampala City at the coordinates 0°20'00.0"N, 32°37'00.0"E (Latitude: 0.333333; Longitude: 32.616667). This area was chosen for its significant youth population and high prevalence of gambling.

Study population

The target population was all youth in Nakawa Division, Kampala. The accessible population was youth in four randomly selected parishes in Nakawa Division, giving a population of about 11,050 youth. Since Nakawa Division has a population of 318,447, of which 36.7 % are youth aged below 35 years (UBOS, 2014), the youth population is about 116870. Aabout 52% of the youth in urban centres are active in gambling. It is estimated that the gambling population of the youth is about 2762 in every one of the 22 parishes in Nakawa Division. The four selected parishes would thus have a population of about 11,050 youth active in gambling, which would be the accessible population.

Sample and sampling procedures

Simple random sampling was used to select four out of the 22 parishes that make up Nakawa Division. This was used to ensure that every parish has an equal chance of being selected, hence avoiding bias.

Convenience sampling was used to select 95 participants from each of the four selected parishes to form a total of 380 respondents. Convenience sampling was used because the accessible population of the study is scattered and mobile.

Purposive sampling was used to select 12 participants for personal interviews. This enabled the study to get respondents who are knowledgeable about gambling activities; hence, they were in a position to provide relevant and rich information about the same. The sample included four active gamblers, three managers of betting centres, three local council members, and one member of the National Gaming Board.

Data Collection Instruments

This study employed a questionnaire and an interview guide. Quantitative data were collected using the questionnaire method. This is because questionnaires can be collected from a large number of participants in a short time. Besides,

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questionnaires give the participants a sense of anonymity, thus giving honest and open responses since gambling behaviour and mental well-being are sensitive topics. Standardised questionnaires were used for this study.

Data Collection Procedure

The study obtained a letter of introduction and permission to conduct research from the University of Kisubi, which he presented to the gambling centre managers to seek permission to interview them or collect data at their businesses. Permission was sought from participants. The questionnaires were anonymously given out, and the respondents did not indicate their names on the questionnaires. The filled questionnaires were checked before they were received to ensure that they were fully completed.

Data Analysis

Quantitative data were analysed using a computerised data analysis program known as Statistical Package for Social Sciences (SPSS) version 25. The data was organised and analysed into descriptive statistics of frequencies, percentages, mean, and range.

Quality Control

To ensure the validity and reliability of the data collected, the following quality control methods were implemented.

Reliability

The reliability of the questionnaire was assessed through pretesting. Before full-scale data collection, the data collection instruments underwent pretesting with a small sample of 20 participants from Makindye Division. A reliability analysis was run to establish the reliability of Cronbach's alpha coefficient of the instrument. The tools were considered reliable measures of the study variables if they showed a Cronbach's alpha coefficient of .70 or higher.

Validity

The validity of the questionnaire was assessed by presenting it to the researchers' supervisor for expert judgement. The supervisor elevated the content and construct validity of the questionnaire, checking for appropriate wording, relevance of items, and alignment with the research context. Recommendations for modifications to improve the validity of the instrument were implemented based on the feedback received.

To establish the validity of the instrument, the average content validity index (CVI) was calculated. The CVI was calculated as the number of items declared valid divided by the total number of items. Items with a CVI of 0.7 or above, as recommended by Amin (2005), are considered valid and retained in the questionnaire. Items with lower CVI scores were reviewed and revised to ensure their relevance and validity.

Data collection validation

Regular checks and validation of the collected data were conducted throughout the data collection process. These validations ensured accuracy, consistency, and completeness of the gathered data. Any discrepancies or errors identified during data validation were addressed promptly to maintain data quality and integrity.

By implementing these quality control methods, the research study aimed at enhancing the validity and reliability of the data collected, ultimately strengthening the credibility of the study findings and conclusions.

Ethical Considerations

The study formally asked respondents for their consent to participate in the study. Before filling in the questionnaires, the study's objective was clearly explained to the respondents, who were assured of the confidentiality of information provided only for academic purposes. Confidentiality was ensured by keeping respondents' identities anonymous, and no names of respondents appear in the final report. Conclusions of the study were based on data collected, and findings are not to the disadvantage of anybody.

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RESULTS

Descriptive Statistics

Table 1: ***Frequency table for gender and education level of participants***

Variable	Category	Frequency	Percentage (%)
Gender	Male	328	88.2
	Female	44	11.8
Education level	None	88	23.7
	Primary	05	1.30
	O'Level	16	4.30
	A'level	141	37.9
	Diploma	40	10.8
	Degree	71	19.1
	Post graduate	11	2.90

Gender Distribution of Participants

The study results reveal that a significant majority of respondents were male (88.2%), with females constituting only 11.8%. This disparity is consistent with gambling behaviours observed in urban centres of Uganda, where gambling spaces are largely male-dominated (Tumwesigye et al., 2020). Besides, in Uganda, social stigma and cultural norms often discourage female participation in gambling, while men typically enjoy greater freedom of movement and access to these leisure spaces. Therefore, gender differences in exposure and societal tolerance towards gambling may explain the higher male representation in this study.

Educational Level of Participants

The study results also reveal that the majority of the participants had attained Advanced Level (A-level) education (37.9%) as their highest level of education, though a notable number had no formal education (23.7%). This trend may be attributed to the large population of youth in Kampala who have completed secondary school and are in transition to either tertiary education or are already in employment. The idle time and uncertainty associated with this phase of a youth's life may make them more susceptible to engaging in gambling. Meanwhile, the notable presence of respondents with no formal education may be attributed to the urban migration patterns, where uneducated youth relocate to Kampala in search of economic opportunities but often end up in vulnerable informal livelihoods, which may push them toward gambling as an alternative income source.

Age range of participants

The study results *(Fig. 1A)* show that the majority of the participants were above 34 years (36.83%), followed by those between 18 and 23 years (23.92%), while very few were below 18 years (2.42%). This trend may be explained by the unique characteristics of these age groups. Individuals above 34 years typically have greater autonomy over their lives and decisions, including financial and recreational choices, which makes them more likely to engage in gambling without external restriction. Meanwhile, those aged 18 to 23 years are at a life stage marked by newfound independence and exploration, often following secondary education or leaving parental care. This developmental phase, coupled with peer pressure and urban exposure, may increase the likelihood of experimenting with gambling. The low representation of participants below 18 years may be attributed to legal restrictions on youth gambling, as the Lotteries and Gaming Act of Uganda (2016) prohibits gambling among minors.

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Original Article

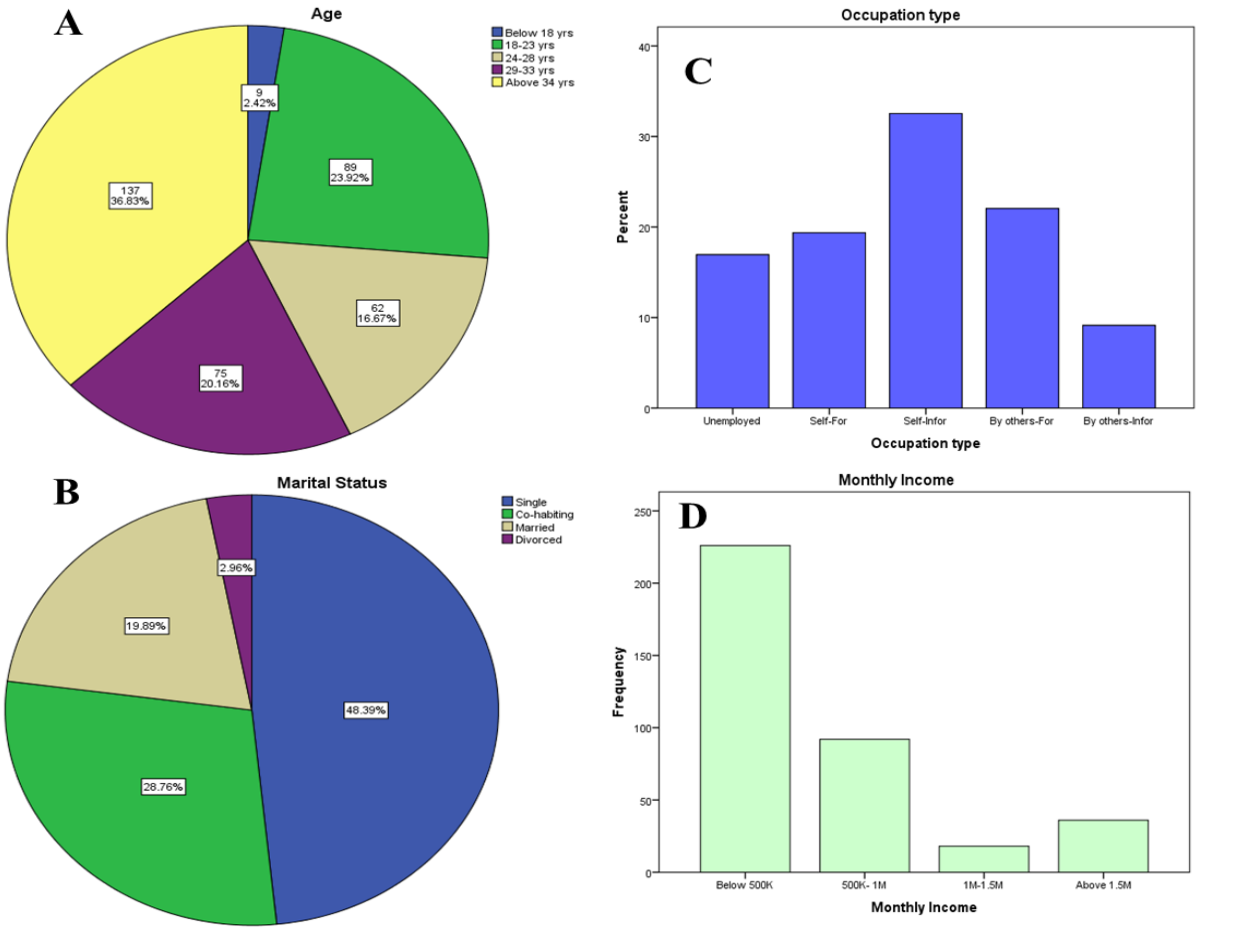

Figure 1: ***Distribution of different demographic variables. A: Age of respondents, B: Pie chart for the marital status of respondents, C: Occupation type of respondents, D: Monthly Income of the respondents.***

Marital Status of the Participants

The study findings *(Fig. 1B)* show that nearly half of the participants were single (48.39%), followed by those who were cohabiting (28.76%), with fewer married (19.89%) or divorced (2.96%) individuals. This trend may be attributed to the high cost of living, unemployment, and shifting societal values in urban areas that have contributed to the delay in formal marriages among youth. Uganda Bureau of Statistics (2019) reports that young urban residents often prioritise economic stability over family formation, leading to prolonged singlehood and increased cohabitation. This prolonged singlehood may increase the likelihood of participation in gambling, as single individuals often face fewer familial responsibilities and more leisure time. The relatively high proportion of cohabiting participants is also indicative of informal unions that are common in urban areas where formal marriage is financially prohibitive.

Employment Status of the Participants

The study results *(Fig. 1C)* reveal that the majority of the respondents were self-employed (51.9%). Of these, the majority were employed in the informal sector. This trend may be attributed to the structure of Kampala's labour force, where informal employment accounts for over 75% of all

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Original Article

youth jobs (UBOS, 2021). The flexibility, irregular earnings, and unstable nature of informal employment can increase both the opportunity and motivation to engage in gambling. Meanwhile, there was also a significant representation of those employed by others in the formal sector (22.0%). This representation may be attributed to significant earnings; they have the resources to invest in gambling. On the other hand, the lower representation of informally employed by others (9.1%) and the unemployed (16.9%) respondents might be due to their limited access to disposable income required for gambling.

Income Levels of the Participants

The study findings *(Fig. 1D)* show that a significant majority of participants reported monthly earnings below Uganda shillings 500,000 (60.8%), with the frequency decreasing with an increase in earnings. This implies that the majority of the gamblers were low-income earners. This may be attributed to a view that low income can drive youth to perceive gambling as a quick and accessible means of supplementing income, particularly in an environment where formal employment opportunities are limited and financial insecurity is prevalent. This is consistent with the findings of the Uganda National Gaming Board (2022), which found a high correlation between low-income earners and betting frequency. Therefore, high-income earners may be less likely to engage in gambling.

Inferential results

This section contains results that address the study objectives and hypotheses analysed using simple and multiple regression analysis.

The effect of social gambling on the mental well-being of the youth in Nakawa Division, Kampala District, Uganda

The first objective of the study was to analyse the influence of social gambling on the mental well-being of the youth in Nakawa Division, Kampala District, Uganda. The corresponding hypotheses were;

H_0 There is no significant influence of social gambling on the mental well-being of the youth in Nakawa Division, Kampala District, Uganda

H_1 There is a significant influence of social gambling on the mental well-being of the youth in Nakawa Division, Kampala District, Uganda.

Effect of Social Gambling on Mental Well-being

The effect of social gambling on the mental well-being of the youth was analysed using linear regression analysis, and the results are shown in Table 2.

Table 2: ***Regression Analysis Results for the Effect of Social Gambling on Mental Well-being***

	Unstandardized Coefficients		Standardized Coefficients			ANOVA[d]		Model Summary	
	B	Std. E	Beta	t	Sig.	F	P	R^2	AdjR^2
(Constant)	65.86	3.242		20.311	.000	7.293	.007[b]	.019	.017
Social gambling	1.093	.405	.139	2.701	.007				

a. Dependent Variable: Mental Well-being

The results in Table 2 reveal that there was a significant effect of social gambling on mental well-being (β=.139, p=.007). Specifically, the study results show that social gambling significantly accounted for 1.9% of the variance in mental well-being (R^2 = .0.19, F (1,369), p =.007). Furthermore, the regression coefficient for social gambling was found to be 1.093 with a standard error of 0.405. This implies that for every unit increase in social gambling behaviour, mental well-being increases by 1.093 units. The positive relationship between social gambling and mental well-being was found to be statistically significant (t(369)=2.701, p=0.007). This affirms the predictive power of social gambling behaviour on mental well-being. However, since the R^2 is below 0.25, this indicates that the effect size is small. Thus, the R^2 of 0.019 obtained in the present regression model indicates that social gambling behaviour plays a less substantial role in mental well-being. Therefore, the alternative hypothesis that there is a significant influence of social gambling on the mental well-being of the youth in Nakawa Division, Kampala District, Uganda is retained, while the null hypothesis that there is no significant influence of social gambling on the mental well-being of the youth in Nakawa Division, Kampala District, Uganda is rejected.

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Original Article

Effect of Social Gambling on Specific Dimensions of Mental Well-being

Table 3: Linear *Regression Analysis Results for the Effect of Social Gambling on the Dimensions of Mental Well-being*

	Unstandardized Coefficients		Standardized Coefficients	ANOVA[d]			Model Summary	
Dependent variable	B	Std. E	Beta	t	F	P	R^2	AdjR^2
Overall Mental Well-being	1.093	.405	.139	2.701	7.293	.007[b]	.019	.017
Occupational Well-being	.308	.157	.101	1.962	3.849	.051[b]	.010	.008
Emotional Well-being	-.263	.164	-.083	-1.606	2.579	.109[b]	.007	.004
Social Well-being	.569	.128	.226	4.463	19.917	.000[b]	.051	.049
Environmental Well-being	.475	.140	.174	3.392	11.509	.001[b]	.174	.030

Independent Variable: Social Gambling

The study results reveal that of the four dimensions of mental well-being, only two were significantly affected by social gambling, that is, social well-being (β=.226, p=.000) and environmental well-being (β=.174, p=.001). This implies that social gambling affects one's understanding of his or her social, natural, and built environments and how they affect one's health and well-being. Meanwhile, the effect of social gambling on occupational (β=.101, p=.051) and emotional (β=-.083, p=.109) well-being was not significant. Therefore, social gambling does not significantly affect an individual's satisfaction with their employment or emotional control.

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Original Article

Table 4: ***Multiple Regression Analysis for Demographic Predictors of Mental Health among Social Gamblers***

Coefficients[a]						
Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	65.857	3.242		20.311	.000
	Social Gambling	1.093	.405	.139	2.701	.007
2	(Constant)	50.951	4.647		10.965	.000
	Social Gambling	.795	.395	.101	2.013	.045
	Gender	-4.746	2.204	-.108	-2.153	.032
	Age	2.295	.629	.203	3.649	.000
	Monthly Income	.786	.856	.053	.918	.359
	Education Level	2.095	.405	.269	5.169	.000
	Occupation type	.933	.578	.078	1.614	.108
	Marital Status	1.249	.963	.076	1.297	.196
a. Dependent Variable: Mental Well-being						

The study results reveal that gender (β= -.108, p=.032), age (β= .203, p=.000), and education level (β= .269, p=.000) are significant predictors of mental well-being among social gamblers. However, of the three predictors, gender is the best predictor of mental well-being among social gamblers since it has the highest regression coefficient (B = -4.746). Specifically, male social gamblers are more likely to have better mental well-being than female social gamblers. Besides, social gamblers who are older and have attained a higher education level are more likely to have a better mental well-being than those with a lower education level and a lower age.

DISCUSSION

The study results revealed that there was a weak but significantly positive effect of social gambling on mental well-being (β=.139, p=.007). This finding suggests that, for some youth, gambling in social contexts may offer short-term psychological or recreational benefits. Social gambling, which is characterised by informal, low-stakes betting with peers, can foster social bonding, provide leisure, and offer a sense of excitement or belonging. This aligns with studies that suggest recreational gambling, when done in moderation, may not necessarily lead to negative outcomes and can serve as a form of social engagement (Blackman et al., 2019).

However, the small effect size ($R^2 = 0.019$) implies that this positive influence is limited and potentially unsustainable. Without protective measures, even social gambling can escalate into at-risk or pathological behaviour (Calado & Griffiths, 2016), especially in environments with limited regulation and high economic vulnerability.

The study results also reveal that The study results reveal that gender (β= -.108, p=.032), age (β= .203, p=.000), and education level (β= .269, p=.000) are significant predictors of mental well-being among social gamblers, with gender being the best predictor. Their identification as significant predictors of mental well-being among social gamblers highlights the importance of demographic context in understanding gambling outcomes. Specifically, the finding that male gamblers have better mental well-being than females may reflect gender-based differences in coping mechanisms, social support networks, and societal expectations (Jun, Sacco, Bright & Cunningham-Williams, 2019). In many Ugandan contexts, gambling is more socially acceptable for males (Mugisha et al., 2021), who may experience less stigma and more peer reinforcement compared to females.

The study results show that social gamblers who are older and have attained a higher education level are more likely to have better mental well-being than those with a lower education level and younger in age. This may be attributed to the fact that older and more educated gamblers may be better equipped with emotional maturity, risk awareness, and financial control, which buffer them against the potential psychological harms of gambling (Turowski et al., 2022). Older adults who engage in gambling for recreational purposes benefit from social interaction, along with sensory and cognitive stimulation that comes with sharing with

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Original Article

others (Desai, 2004). As long as individuals experience the positive aspects of gambling without developing problematic behaviours, they can derive favourable evaluations of their lives and overall well-being. Generally, these findings suggest that targeted interventions should be sensitive to these demographic factors, especially the heightened vulnerability of young, less educated, and female social gamblers.

Conclusion

Social gambling has a weak but statistically significant positive relationship with youth mental well-being, mainly influencing social and environmental well-being. Social gambling appears to provide opportunities for peer bonding and recreation, which may offer temporary psychological benefits. However, these perceived benefits are limited and potentially misleading, as repeated engagement may normalise gambling behaviour and create pathways toward at-risk gambling. This suggests that while social gambling does not directly harm mental well-being in the short term, it carries underlying risks of escalation.

Limitations of the study

Potential limitations of the study included constraints related to sample size, data collection, and generalisability of findings, as well as external factors that could affect the research outcomes. It is important to acknowledge these limitations to provide a realistic assessment of the study's scope and implications. Since convenience sampling was to be used, the sample may have been gender biased. This was overcome by ensuring that all available participants are given an equal chance without gender bias.

Recommendations

It is recommended that the Ministry of Education and Sports and the National Council for Higher Education introduce courses and modules on problem gambling in universities and other higher learning institutions. Currently, there is no structured training for professionals on gambling-related harm in Uganda. This limits the country's capacity to develop counsellors, psychologists, and social workers with expertise in addressing the effects of gambling on youth mental well-being. Including these topics in psychology, public health, and social work programs will build a skilled workforce equipped to prevent and manage gambling-related mental health challenges.

It is recommended that Non-Governmental Organisations and Community-Based Organizations develop community-level awareness campaigns targeting youth to discourage the normalisation of social gambling. The study found that social gambling in Nakawa Division is often perceived as harmless recreation, yet it can lead to riskier gambling behaviours over time. The above organisations should design youth-friendly messages that highlight these risks while promoting healthy alternatives for socialisation.

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List of abbreviations

UBOS: Uganda Bureau of Statistics
SPSS: Statistical Package for Social Sciences

Source of funding

The study was not funded.

Conflict of interest

The author did not declare any conflict of interest.

Data availability

Data is available upon request.

Author contribution

Albert Elwa Louis collected data and drafted the manuscript of the study
Br. Chrysostom Ahimbisibwe collected data and drafted the manuscript of the study

Author biography

Albert Elwa Louis is a student of a masters of Science in Clinical Psychological Counselling at the University of Kisubi.

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