REPORT

Report on behavioral addictions and other addictive disorders 2024

Admissions to treatment for behavioral addictions indicator.
Gambling, gaming, problematic Internet use and other addictive disorders in EDADES and ESTUDES drug surveys conducted



Spanish Observatory on Drugs and Addictions
Government Delegation for the National Plan on Drugs



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Abbreviations

COVID-19 Coronavirus Disease 2019.

DGOJ Directorate General for the Regulation of Gambling.

DGPNSD Government Delegation for the National Plan on Drugs.

DSM Diagnostic and Statistical Manual of Mental Disorders.

EDADES Survey on Alcohol and Drugs amongst the general population in Spain.

ESPAD The European School Survey Project on Alcohol and Other Drugs.

eSports Electronic sports.

ESTUDES Survey on Drug Use in Secondary Education in Spain.

ICD-11 11th Revision of the WHO International Classification of Diseases.

OEDA Spanish Observatory on Drugs and Addictions.

SEIDA State Information System on Drugs and Addictions.

WHO World Health Organisation.

1. Introduction

We live in increasingly dynamic and changing societies where new technologies have practically become standard. In this context, there is growing concern about a possible problematic use of the Internet, digital media and social networks, as well as about the role of new technologies as facilitators of access to, or enhancers of, other addictive behaviors, such as pornography or online gambling, especially among adolescents.

It is the responsibility of all the institutions and entities involved and, ultimately, of society as a whole, to prevent misuse and possible problems arising from this powerful incursion into our social reality.

The National Plan on Drugs is responding to this need. Thus, the National Strategy on Addictions 2017-2024 has incorporated non-substance or behavioral addictions as a new field in all lines of action, with special emphasis on betting (face-to-face or online) and addictions through new technologies, which are specified in specific actions within its four-year action plans.

The Government Delegation for the National Plan on Drugs (DGPNSD), with the collaboration of Autonomous Communities and Cities, carries out two periodic national surveys: the Survey on Alcohol and Drugs in Spain (EDADES) and the Survey on Drug Use in Secondary Education in Spain (ESTUDES), completed every other year. ESTUDES began in 1994 and EDADES in 1995, each generating current results under fourteen editions. Both surveys make it possible to observe the evolutionary prevalence of alcohol, tobacco use, hypnosedatives, opioid analgesics and illegal psychoactive drugs consumption, as well as other addictive behaviors.

Since 2014, a number of modules have been included in both surveys to understand the extent of problematic Internet use, gambling, possible gaming disorder and pornography in the general or student population, as well as to explore behaviors related to these patterns in more depth.

Survey information is complemented by information on treatment admissions for behavioral or non-substance addictions such as gambling disorders (also called compulsive gambling, problematic gambling, pathological gambling or gambling addiction). In order to make this information available nationwide, the indicator on treatment admissions for behavioral/non-substance addictions was created in 2021. In 2023, for the first time, national data became available, namely for treatment admissions in 2021.

Throughout this report, the results obtained in EDADES and ESTUDES survey modules are presented, as well as the results of the behavioral addiction treatment admissions indicator.

2.Objectives

The general objective of ESTUDES and EDADES surveys and the behavioral addiction treatment admissions indicator is to provide relevant information with which to design and evaluate policies aimed at preventing the use and problems derived from substance use and other addictive behaviors.

The main objective of this monographic Report is to contribute to understanding the current situation regarding behavioral addictions and, specifically, gambling, problematic Internet use, possible gaming disorder and pornography in Spain. In this way, it is hoped that it will ultimately help to prevent misuse and possible problems associated with these activities.

As part of this general objective, the following specific aims are established:

- To find out the prevalence of gambling, both online and face-to-face, in the 15 to 64-year age
 group in the Spanish population and in the 14 to 18-year student population age group, as well as
 its evolution since 2014.
- To determine possible differences in the extent of online and face-to-face gambling by sex, age, frequency, type of game and amount of money spent.
- To find out the prevalence of possible problematic gambling and possible gambling disorder in the 15 to 64-year age group in the Spanish population and in the 14-18 student population age group.
- To find out the prevalence of possible problematic Internet use in the 15 to 64-year age group in the Spanish population and in the 14 to 18 student population age group, as well as its evolution since 2014.
- To find out the prevalence of gaming, as well as potentially associated disorders, in the 14 to 18 student population age group.
- To find out the prevalence of gambling with cryptocurrencies and on the stock exchange in the 15 to 64-year age group in the Spanish population.
- To find out the prevalence of pornography use in the in the 15 to 64-year age group in the Spanish population and in the 14 to 18 student population age group.
- To know the number of people admitted to treatment for behavioral addictions, their profile and the type of behavioral addiction generating the disorder.

3. **Methodology**

A descriptive study of gambling, gaming, gambling with cryptocurrencies and on the stock exchange, Internet use and pornography use has been carried out on the basis of the answers given to specific questions included in the latest editions of the ESTUDES and EDADES surveys, which offer nationwide representative results.

For the purpose of this work, gambling is presumed when all of the following conditions are met:

- When participating in the game, the player bets with money (Participation with money).
- There is an uncertain outcome about the facts being wagered on (Chance).
- There are financially assessable prizes (Prizes).

Questions on gambling and Internet use were introduced in 2014 in the ESTUDES survey in an exploratory way and have been accordingly modified with the aim of improving the quality of the information obtained. For this reason, comparability between successive editions is limited to a certain extent.

In 2014, a module on Internet use and other related behaviors (gambling) was introduced for the first time in the ESTUDES survey. In 2016, questions on Internet use and gambling continued to be asked, but were shorter, and the wording of the questions and placement in the questionnaire were modified, in order to include these questions in the leisure activities section. That same year, additional modules were introduced in the survey, requiring that other sections be shortened so as not to affect the overall response rate. In both 2014 and 2016, questions on the Internet were included before questions on gambling, as presented in other similar European surveys (e.g. European School Survey on Alcohol and Other Drugs ESPAD)¹. After analyzing question behavior, it was decided in 2019 to place them after the 'gambling' module in order to avoid confusion and interference between the Internet and gambling questions. A module on gaming was also introduced that year. Questions on pornography were included for the first time in the 2023 ESTUDES survey.

In the EDADES general population survey, a module on Internet use and related behaviors was introduced in 2015. It initially consisted of two questions, which were expanded to six in the 2018 edition. In that year, questions were also reordered so that Internet questions came after those on gambling. This decision was made after finding that, in similar surveys conducted in

¹ ESPAD: The European School Survey Project on Alcohol and Other Drugs. http://www.espad.org/.

other countries, including gambling module after Internet use questions changed the results by decreasing prevalence, as respondents tended to understand the gambling questions as Internet-related, to the detriment of face-to-face gambling responses. This change was also made in the European ESPAD 2019 survey after observing the same results. In 2024, it was agreed with the DGOJ to exclude the gaming, cryptocurrencies and stock exchange from a gambling analysis and to analyze them separately, as they do not fit in with the established definition of gaming; likewise, arcade games and casino gambling were excluded from the analysis as they are gambling venues and not types of gambling. This information must be taken into account when interpreting the results of online and face-to-face gambling prevalence, as well as problematic gambling and/or gambling disorder with respect to previous years. In turn, as a novelty, in conjunction with the DGOJ, an analysis by gambling category has been included, for which different types of gambling have been classified into 3 categories according to the following variables:

- Gambling interval: time elapsed between betting and obtaining the result (deferred, near-instantaneous, instantaneous).
- Gambling continuity and availability: the period of time during which it is possible to bet without interruption.
- Other structural characteristics of gambling.

They are grouped as follows:

- **TYPE I:** lotteries (primitiva, *bonoloto*, ONCE tickets, Participative Eurojackpot, 7/39), soccer pools and/or *quinigol*, competitions (television, radio, press...) with economic betting.
- TYPE II: Instant lotteries (ONCE scratch cards), bingo.
- TYPE III: sports betting, horse racing bets, gambling machines (slots, slot machines), card games (poker, blackjack, baccarat...).

In addition, in this 2024 edition, a series of questions have been included for the first time in EDADES, with the aim of finding out the level of pornography use in the 15 to 64-age group in the Spanish population.

With the aim of exploring possible problematic use, different scales have been incorporated in both surveys to approach the actual situation. Thus, since 2014, the "Compulsive Internet Use Scale" (CIUS)² has been introduced, which allows us to find out the prevalence of possible problematic Internet use. In addition, a scale based on the DSM-5 diagnostic criteria for Gambling Disorders was introduced in the EDADES 2020 survey to explore the existence of possible problematic gambling or gambling disorders. The potential of this problematic gambling is investigated in the 14-18 student population age group in the 2019 edition of the ESTUDES survey through the Lie/Bet³ scale, which had already been tested and introduced in the European ESPAD survey. In this same edition, a scale based on DSM-5 criteria is incorporated for an exploratory analysis of the prevalence of a possible gaming disorders.

² Meerkerk, G. J., Van Den Eijnden, R. J. J. M., Vermulst, A. A., y Garretsen, H. F. L. (2009). The Compulsive internet Use Scale (CIUS): Some psychometric properties. CyberPsychology & Behavior, 12, 1-6

³Johnson EE, Hamer R, Nora RM, Tan B, Eisentsein N, Engerhart C. The Lie/Bet questionnaire for screening pathological gamblers. Psychol Rep, 80 (1997), pp. 83-8. http://dx.doi.org/10.2466/pr0.1997.80.1.83.

The following definitions are applicable in this Report:

- Possible problematic gambling in the 15-64-year population: person scoring 1-3 on the DSM-5 scale⁴.
- Possible gambling disorder in the 15-64-year population: persons scoring 4 or more on the DSM-5 scale.
- Possible problematic gambling in the 14-18 student population age group: persons scoring 1-2 on the Lie/Bet scale.
- Possible problematic Internet use: a person scoring 28 or more on the Compulsive Internet Use Scale (CIUS)⁵, both in the 15-64 population age group and in the 14-18 student population age group.
- Possible gaming disorder: a person scoring 5 or more on the DSM-5 scale in the 14-18 student population age group.

Eln 2019, the need arose to design an indicator of admissions to treatment for behavioral/non-substance addictions as a further component of the indicator program used by the State Information System on Drugs and Addictions (SEIDA). As a result, the current SEIDA is made up of four main indicators (treatment for psychoactive substance use; treatment for behavioral or non-substance addictions; emergencies and mortality) and two cross-sectional indicators that are obtained by crossing information from these indicators, surveys and other sources of information (problematic use of psychoactive substances and infectious diseases related to the use of psychoactive substances). The four main indicators collect information on an annual basis and are processed as part of the National Plan on Drugs, as an inter-institutional venture where Autonomous Communities and Cities play a very active role, as well as data source institutions (drug care network, behavioral addiction care network, hospitals, institutes of legal medicine and toxicological laboratories).

In 2023, data on admissions to treatment for behavioral addictions in Spain became available for the first time, specifically for the year 2021.

The following tables summarize the main methodological aspects of the surveys and indicator used for this Report:

⁴ Study and analysis of the risk factors of gambling disorder. Directorate General for the Regulation of Gambling. Subdirección General de Información, Documentación y Publicaciones. Madrid: Ministry of Finance and Public Function. 2017.

⁵ Meerkerk, G. J., Van Den Eijnden, R. J. J. J. M., Vermulst, A. A., & Garretsen, H. F. L. (2009). The Compulsive Internet Use Scale (CIUS): Some psychometric properties. CyberPsychology & Behavior, 12, 1-6.

EDADES

	GENERAL ASPECTS
Title	EDADES. Survey on Alcohol and Drugs in Spain.
Survey description	Household survey of the general population (15-64 years old), conducted at home.
Survey manager	Ministry of Health.
	SCOPE OF THE SURVEY
Geographical scope	The survey is conducted nationwide, with nationally representative results.
Population scope	Universe: Population residing in Spain ages 15 to 64 years old, both inclusive.
Time scope. Frequency	EDADES has been held every 2 years since 1995. In 2015-2016, the data collection period was from 1 to 18 December 2015 and from 7 February to 29 April 2016. In 2018, the data collection period was from 5 February to 27 April. In 2020, the data collection period was from 7 February to 13 March. In 2022, fieldwork was carried out between 15 February and 3 June. In 2024, fieldwork was carried out between 12 February and 21 June.
	SAMPLE DESIGN AND CHARACTERISTICS. WEIGHTING
Sampling scope	Urban and rural population (municipalities with less than 2,000 inhabitants) in all Autonomous Communities and the autonomous cities of Ceuta and Melilla, living in the family home.
Sampling procedure	Three-stage cluster sampling without replacement. The second stage units are family homes (households). In the third stage, one individual from each household was selected. The first-stage units are census sections (36,127 in 2015), corresponding to 8,117 municipalities in 2015. In 2015, 2,277 census sections corresponding to 948 municipalities were selected. In 2018, first-stage units are census sections (36,215), corresponding to 8,125 municipalities. A total of 2,147 census sections corresponding to 954 municipalities were selected. In 2020, the first-stage units are census sections (36,288), corresponding to 8,123 municipalities. A total of 1,793 census sections corresponding to 744 municipalities were selected. In 2022, the sample design took into account the latest research design data published at the time, from 2020. The first-stage units were census sections 36,366, corresponding to 8,131 municipalities. A total of 2,639 census sections corresponding to 1,004 municipalities were selected. In 2024, the sample design took into account the latest research design data published at the time, from 2022. The first-stage units were the 36,372 census sections, corresponding to 8,131 municipalities. A total of 2,658 census sections corresponding to 1,052 municipalities were selected.
Weighting	The weighting for results analysis is carried out by autonomous community (19 groups), size of municipality (7 groups), age (7 groups) and sex (2 groups) to compensate for sample disproportionality with respect to the universe.

Sample size	In 2015, 22,541 valid questionnaires. In 2018, 21,249 valid questionnaires. In 2020, 17,899 valid questionnaires. In 2022, 26,344 valid questionnaires. In 2024, 26,878 valid questionnaires.
Sampling error	In 2016 the maximum sampling error (95% confidence level for p=0.5) was 0.7%, ranging from 2% in the Valencian Community to 6.7% in Melilla. In 2018 the maximum sampling error (95% confidence level for p=0.5) was 0.8%, ranging from 2.1% in Andalusia to 4.7% in La Rioja. In 2020 the maximum sampling error (95% confidence level for p=0.5) was 0.8%, ranging from 2.1% in the Valencian Community to 8.6% in Melilla. In 2022 the maximum sampling error (95% confidence level for p=0.5) was $\pm 0.71\%$, ranging from $\pm 1.96\%$ in the Community of Madrid to $\pm 6.48\%$ in Melilla. In 2024 the maximum sampling error (95% confidence level for p=0.5) was $\pm 0.61\%$, ranging from $\pm 2.00\%$ in the Community of Madrid to $\pm 4.03\%$ in Ceuta.
Method of collection. Questionnaires	Personal interview at home. The interviewer remains present throughout the process and collects the completed questionnaire. The questionnaire consists of two parts: interviewer questionnaire and self-administered questionnaire. The questionnaire is completed in writing (pencil and paper). Questionnaire available in all of Spain's official languages.
Response rate	In 2015 the effective response rate was 50.5%. In 2018 the effective response rate was 51%. In 2020 the effective response rate was 37.2%. In 2022 the effective response rate was 32.45%. In 2024 the effective response rate was 34.21%.
	NOVELTIES
Specific Modules	In 2015: a module on cannabis (including the CAST scale), a module on hypnosedatives (including the DSM-5 scale) and a module on the Internet (including the CIUS scale). In 2018: a module on alcohol (including the AUDIT scale), a module on cannabis (including the CAST scale), a module on new substances, a module on opioid analgesics, a module on gambling (including the DSM-5 scale) and a module on the Internet (including the CIUS scale). In 2020: a module on alcohol (including the AUDIT scale), a module on cannabis (including the CAST scale), a module on new substances, a module on opioid analgesics, a module on gambling (including the DSM-5 scale) and a module on the Internet (including the CIUS scale). In 2022: a module on alcohol (including the AUDIT scale), a module on cannabis (including the CAST scale), a module on new substances, a module on opioid analgesics, a module on gambling (including the DSM-5 scale), a module on the Internet (including the CIUS scale) and a module on mental health. In 2024: a module on alcohol (including the AUDIT scale), a module on cannabis (including the CAST scale), a module on new substances, a module on opioid analgesics, a module on gambling (including the DSM-5 scale), a module on the Internet (including the CIUS scale), a module on mental health and a module on pornography module, included for the first time in this edition.

ESTUDES

	GENERAL ASPECTS
Title	ESTUDES. Survey on Drug Use in Secondary Education in Spain.
Survey description	Survey of students (14-18 years old), carried out in schools.
Survey manager	Spanish Observatory on Drugs and Addictions (OEDA). Government Delegation for the National Plan on Drugs (DGPNSD). Ministry of Health.
	SCOPE OF THE SURVEY
Geographical scope	The survey is conducted nationwide, with nationally representative results.
Population scope	Universe: Students between 14 and 18 enrolled in Secondary Education in Spain (3rd and 4th year of Compulsory Secondary Education, 1st and 2nd year of Baccalaureate, Basic Vocational Training Cycles and Intermediate Vocational Training Cycles).
Time scope. Frequency	ESTUDES has been held every 2 years since 1994. In 2014-2015, the data collection period was from 14 November 2014 to 8 April 2015. In 2016-2017, the data collection period was from 18 November 2016 to 8 March 2017. In 2019, the data collection period was from 4 February to 5 April. In 2021, the data collection period was from 8 March to 18 May. In 2023 the data collection period was from 5 February to 28 May.
	SAMPLE DESIGN AND CHARACTERISTICS. WEIGHTING
Sampling scope	The population of students enrolled in educational centers completing the 3rd and 4th year of Compulsory Secondary Education (ESO), 1st and 2nd year of Baccalaureate and Intermediate Vocational Training Cycles in Spain.
Sampling procedure	Two-stage cluster sampling, in which, initially, schools were randomly selected (first-stage units), followed by classrooms (second-stage units), providing the questionnaire to all students in attendance.
Weighting	By Autonomous Community, school owner (public, private) and type of studies (ESO, Baccalaureate, Basic Vocational Training Cycles, Intermediate Vocational Training Cycles), in order to adjust sample proportionality to the universe.
Sample size	In 2014, results were obtained from 941 schools and 1,858 classrooms, with a final valid sample of 37,486 students. In 2016, results were obtained from 863 schools and 1,726 classrooms, with a final valid sample of 35,369 students. In 2019, results were obtained from 917 schools and 1,769 classrooms, with a final valid sample of 38,010 students. In 2021, results were obtained from 531 schools and 1,324 classrooms, with a final valid sample of 22,321 students. In 2023, results were obtained from 888 schools and 1,992 classrooms, with a final valid sample of 42,208 pupils.

Sampling error	In 2014, the maximum sampling error for a confidence level of 95.5% and p=q=0.5 is 0.6% for Spanish students ages 14-18. In 2016, the maximum sampling error for a confidence level of 95.5% and p=q=0.5 is 0.5% for Spanish students ages 14-18. In 2019, the maximum sampling error for a confidence level of 95.5% and p=q=0.5 is 0.5% for Spanish students ages 14-18. In 2021, the maximum sampling error for a confidence level of 95.5% and p=q=0.5 is 0.7% for Spanish students ages 14-18. In 2023, the maximum sampling error for a confidence level of 95.5% and p=q=0.5 is 0.6% for Spanish students ages 14-18.
	FIELDWORK. DATA COLLECTION
Collection method. Questionnaires	Standardized and anonymous questionnaire completed in the classroom. The interviewer remains in the classroom throughout the process and collects the questionnaires upon completion. The questionnaire is "self-administered" and is completed in writing (pencil and paper) by all students in the selected classrooms during a regular class (45-60 minutes). The questionnaire is available in all of Spain's official languages.
Response rate	In 2014, 87% of the selected schools participated in the survey. In 2016, 91.4% of the selected schools and 99.1% of the students present participated in the survey. In 2019, 93.2% of the selected schools and 99.3% of the students present participated in the survey. In 2021, 88.7% of the selected centers participated in the survey. In 2023, 86.7% of the selected schools and 99.7% of the students present participated in the survey.
Specific Modules	In 2014, the questionnaire included a module on 'new substances', a module on problematic cannabis use and a module on Internet use and related behaviors. In 2016, the questionnaire included a module on 'new substances', a module on problematic cannabis use, a module on Internet use and related behaviors, and a module on stimulants to improve study performance. In 2019, the questionnaire included a module on 'new substances', a module on problematic cannabis use, a module on Internet use, a module on gambling, a module on stimulants to improve study performance and a module on "new substances", a module on problematic cannabis use, a module on Internet use, a module on gambling, a module on stimulants to improve study performance and a module on gaming. In 2021, the questionnaire included a module on gambling, a module on stimulants to improve study performance and a module on problematic cannabis use, a module on 'new psychoactive substances', a module on Internet use and related behaviors, a module on gambling (betting with money), a module on stimulants to improve study performance, a module on gaming and a module on pornography.

ADMISSIONS TO TREATMENT FOR BEHAVIORAL ADDICTIONS INDICATOR

	GENERAL ASPECTS
Title	Admissions to treatment for behavioral/non-substance addictions indicator.
Case study	Person admitted to outpatient treatment for a behavioral/non-substance addiction at a treatment center in a given year, in an autonomous community or city in Spain.
Indicator manager	Spanish Observatory on Drugs and Addictions (OEDA). Government Delegation for the National Plan on Drugs (DGPNSD). Ministry of Health.
	ÁMBITO DEL INDICADOR
Geographical scope	Nationwide. Each Autonomous Community and Autonomous City will be responsible for collecting data in its territory and the number of admissions to treatment in each will be counted. Indicator value at the state level is determined by the sum of the admissions to treatment registered in each Autonomous Community.
Population scope	The entire resident population in Spain.
Time scope. Frequency.	Data are collected continuously and on an annual basis. A calendar year applies for reporting purposes, i.e. each year includes admissions, i.e. treatment starts from 1 January to 31 December of that year. Admission to treatment in a facility will only be reported for the first time that year. If a person is admitted to treatment more than once during the same year and in the same Autonomous Community, only the first admission that year will be considered.
	DATA COLLECTED
Data collected	A protocol clearly specifies the variables to be recorded, as well as the reporting criteria: https://pnsd.sanidad.gob.es/profesionales/sistemasInformacion/sistemaInformacion/pdf/2022_Protocolo_(adicciones_comportamentales).pdf

4. **Results**

4.1.

Distribution of gambling competencies and statewide gambling market.

Gambling is an activity where prizes are offered in exchange for money or other economically assessable objects, which are staked on uncertain future outcomes that are dependent to some extent on chance, irrespective of the part played by player skills.

The marketing of gambling in Spain is subject to authorization from the competent regulating authorities.

If marketed within Spain, the competent regulator is the Directorate General for the Regulation of Gambling (DGOJ), except for ONCE, which is regulated by the Protectorate Council. If the scope corresponds to that of an Autonomous Community, competence is attributed to the competent regional administrative unit.

The **State** is entrusted with competence for statewide online gambling (betting, casino games, poker, slot machines and bingo), competitions and games subject to the reservation of activity (lotteries): SELAE and ONCE, whose gambling activity is supervised through the ONCE's Protectorate Council.

Each **Autonomous Community enjoys competence** for face-to-face gambling: casino games, bingo, slot machines and betting. Regional online gambling, regional lotteries and other traditional games.

In order to assist in documenting existing regulations, exerted by Autonomous Communities (CCAA) and the General State Administration (AGE) in the matter, one of the actions carried out by the Government Delegation for the National Plan on Drugs, as part of the Action Plan on Addictions 2018-2020 under the current National Strategy on Addictions 2017-2024, is a **review of all regional regulations on non-substance addictions**. For this, in 2021, the DGPNSD has compiled the main restrictions regulated in regional legislation on gambling and betting to preventively protect the mental health and assets of gamblers and bettors, to particularly include the most vulnerable, such as minors, and to specifically prevent pathological gambling and its negative effects⁶.

⁶ Government Delegation for the National Plan on Drugs. Current regional laws to prevent gambling and betting. Madrid: Ministry of Health, 2021. 106 p.

Each year, the Directorate General for Gambling Regulation (DGOJ) reports on evolvement in the national online gambling market; this has been the case since June 2012, when regulated online gambling started up in Spain⁷, through **Gambling Regulation Act 13/2011**, of 27 May, which basically regulates statewide gambling activity carried out through electronic, computerized, telematic and interactive channels (face-to-face instrument are accessory only). The Directorate General for Gambling Regulation is responsible for its authorization, supervision and control in order to guarantee adequate operations in the sector and the protection of all players and vulnerable groups.

The data shown below in this summary include the operations of non-reserved gambling operators with a national license. It does not include mutual betting under Sociedad Estatal de Loterías y las Apuestas del Estado, carried out online. Such data were mainly obtained from quarterly reports received by the DGOJ from authorized gambling operators.

In 2023, GGR (Gross Gaming Revenue), i.e. the total monetary amounts spent by gamblers minus bonuses and prizes paid by the operator to participants, was €1,236.75 million, 28.38% higher than in the previous year. Compared to the previous year, bets grew at a rate of 36.57%. This growth is due to conventional sports betting, which increased by 15.30% in the last year, and live betting by 48.73%. In 2023, the Other counterparty betting market also increased by 191.88%.

Bingo increased in 2023 with an annual rate of change of 0.90%.

This GGR of €1,236.75 million was distributed as follows: €491.80 million in Betting (39.77%); €14.37 million in Bingo (1.16%); €624.76 million in Casino (50.52%); €0.48 million in Competitions (0.04%) and €115.34 million in Poker (8.52%).

4.2.

EDADES Survey. General situation of gambling (online and/or face-to-face) in the 15-64-year-old population.

In 2024, 53.8% of the population ages 15-64 gambled (56.1% amongst men and 51.5% amongst women) (Table 1). In evolutionary terms, the prevalence of gambling has continued to decline since 2022, decreasing among both men and women.

⁷ Annual report. State online gambling market. 2023. Directorate General for Gambling Regulation (DGOJ). General Secretariat for Consumer Affairs and Gambling. Ministry of Consumer Affairs.

Table 1. Prevalence of online and/or face-to-face gambling in the last 12 months in the 15-64-year-old population, by sex (%). Spain, 2018-2024.

	2018			2020			2022			2024		
	Т	М	W	Т	М	W	Т	М	W	Т	М	W
Never or not in the last 12 months	39.8	36.5	43.1	35.8	33.2	38.5	41.9	39.6	44.3	46.2	43.9	48.5
Has gambled (online and/or face-to-face) in the last 12 months	60.2	63.5	56.9	64.2	66.8	61.5	58.1	60.4	55.7	53.8	56.1	51.5

T: total, H: men, M: women,

SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).

Yet another wave shows that among the Spanish population ages 15-64, gambling is less widespread in the online channel (5.5%) than face-to-face (52.9%). Despite this higher prevalence, there has been a decline in the prevalence of face-to-face gambling (Chart 1)..

Chart 1. Prevalence of gambling in the last 12 months in the population ages 15-64 (%), by gambling modality (online or face-to-face). Spain, 2015-2024.



SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).

A total of 4.6% of the Spanish population ages 15-64 reported gambling, both online and face-to-face, in the last 12 months. By sex, as part of this low prevalence, gambling is more widespread among men (6.9%) than among women (2.3%). In evolutionary terms, prevalence remains at similar levels to those of 2022 (Table 2).

Table 2. Prevalence of <u>online and face-to-face</u> gambling in the last 12 months in the 15-64-year-old population, by sex (%). Spain, 2018-2024.

	2018		2020		2022		2024					
	Т	М	W	Т	М	W	Т	М	W	Т	М	W
Never or not in the last 12 months	97.2	95.3	99.0	93.9	91.9	96.0	95.5	93.2	97.7	95.4	93.1	97.7
Has gambled (online and face-to-face) in the last 12 months	2.8	4.7	1.0	6.1	8.1	4.0	4.5	6.8	2.3	4.6	6.9	2.3

T: total, M: men, W: women.

SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).

With regard to the type of games played, conventional and instant lotteries are by far the most popular games, as has been observed over the years. In the online channel, sports betting, although still showing a notable loss of followers, is still the most played game along with traditional lottery (Chart 2).

Chart 2. Types of games used by the 15-64 population age group, gambling online or face-to-face in the last 12 months (%). Spain, 2018-2024.

	2018		202	20	202	22	2024		
	Online	Face to face							
Sports betting	64.9	6.4	50.1	5.3	45.9	4.8	36.0	3.6	
Lotteries*	14,1	94,0	28.2	94.4	34.8	94.1	33.0	99.0	
Card games ***	17.2	1.8	13.3	1.3	11.2	0.9	19.2	0.9	
Soccer pools and/ or quinigol	10.4	16.4	14.1	14.6	10.2	12.5	9.6	11.7	
Bingo	10.4	5.2	7.8	4.8	6.7	3.7	8.7	4.3	
Gambling machines (slots)	6.6	3.4	6.2	3.4	4.1	2.6	7.3	3.6	
Instant lotteries**	5.2	22.1	12.5	24.9	8.8	30.0	7.2	30.9	
Horses racing bets	9.4	0.5	6.9	0.6	3.5	0.3	4.4	0.3	
Competitions ****	5.8	0.2	3.6	0.2	1.4	0.2	2.2	0.2	

^{*} primitiva, bonoloto, ONCE tickets, Participative Eurojackpot, 7/39.

Note: Online gambling data should be interpreted with caution given the small number of cases.

SOURCE: OEDA. Spanish Alcohol and Drugs Survey (EDADES).

^{**} ONCE scratch cards

^{*** (}poker, mus, blackjack, baccarat...).

^{****} television, radio, press... betting money.

With regard to the largest amount of money spent in a single day by gamblers, there are hardly any differences between those who have gambled online and those who have gambled face-to-face; the usual amount spent is between 6 and 30 euros. On an evolutionary basis, there is a slight increase in the amount of money spent compared to 2022 among both those who have gambled online and face-to-face (Chart 3).

Chart 3. Maximum amount of money spent in a single day over the last 12 months in the 15-64 population age group, who have gambled online or face-to-face in the last 12 months (%). Spain, 2018-2024.

	2018		2	2020	2	2022	2024		
	Online	Face-to-face	Online	Face-to-face	Online	Face-to-face	Online	Face-to-face	
Less than € 6	27.3	32.3	33.5	33.8	26	29,8	23.0	23.6	
Between € 6 and € 30	42.	.5 45.7	38	3.5 45,7	43.	0 48.9	40	.6 46.9	
Between €31 and €60	16.3	13.0	15.6	12.1	14.0	13.9	19.0	17.6	
Between € 61 and € 30	8.1	7.4	9.3	7.3	9.8	6.3	11.4	10.1	
More than € 300	5.8	1.6	3.1	1.1	6.8	1,0	6.8	1.0	

SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).

The age at which gambling is first played face-to-face is still lower than that of online gambling (24.1 and 27.5, respectively). Compared to 2022, there is a slight delay in the onset of both face-to-face and online gambling in the Spanish population ages 15-64.

Table 3. Age at which the 15-64 population age group first gambled online or face-to-face (years). Spain, 2018-2022.

	2018	2020	2022	2024
Age at which you first gambled online	26.8	25.9	26.3	27.5
Age at which you first gambled face-to-face	22.8	22.7	23.3	24.1

SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).

When grouping different types of gambling into three categories according to gambling interval, continuity, availability, as well as other structural characteristic categories, it can be seen that the vast majority of online and/or face-to-face gamblers in the last 12 months have played category I games (90.4%). However, as shown in Table 5, the highest amounts of money spent in a single day are concentrated among those who have played category III games.

Table 4. Prevalence of online and/or face-to-face gambling among those who have gambled in the last 12 months (%). Spain, 2024.

	2024
Type I Primitiva, bonoloto, ONCE tickets, Participative Eurojackpot, 7/39, Soccer pools and/or quinigol, television, radio, press competitions betting money.	90.4%
Type II Instant lotteries (scratch cards, ONCE), bingo.	30.6%
Type III Sports betting, horse racing bets, gambling machines (slots), card games (poker, mus, blackjack, baccarat)	9.4%

SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).

Table 5. Largest amount of money spent in a single day in the population ages 15-64 who have gambled online and/or face-to-face in the last 12 months, by game category (%). Spain, 2024.

		2024		
	Total	Type I	Type II	Type III
Less than 6 euros	23.0	23.9	24.7	19.4
Between 6 and 30 euros	46.5	47.1	45.0	36.0
Between 31 and 60 euros	18.0	17.3	16.9	22.5
Between 61 and 300 euros	10.5	9.8	11.2	16.5
More than 300 euros	2.0	1.8	2.2	5.6

TYPE I: primitiva, bonoloto, ONCE tickets, Participative Eurojackpot, 7/39, soccer pools and/or quinigol, television, radio, press competitions... betting with money.

TYPE II: Instant lotteries (scratch cards, ONCE), bingo.

TYPE III: sports betting, horse racing bets, gambling machines (slots), card games (poker, mus, blackjack, baccarat...). SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).

4.3.

ESTUDES survey. General situation of online and/or face-to-face gambling in the student population ages 14-18.

In 2023, 21.5% of students ages 14-18 have gambled online and/or face-to-face in the last 12 months. With regard to sex, there are significant differences, with this percentage rising to 29.4% among men and falling to 13.3% among women. With respect to 2021, this percentage has increased from 20.1% to 21.5% (Table 6).

Table 6. Prevalence of gambling (online and/or face-to-face) in the last 12 months in the 14-18-year-old population, by sex (%). Spain, 2019-2023.

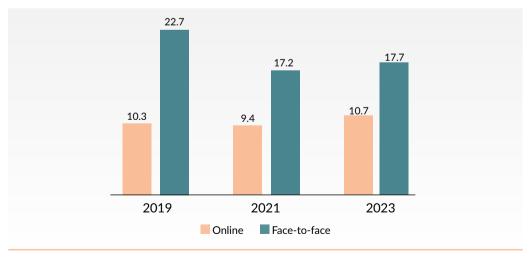
	2019				2021		2023		
	Т	М	W	Т	М	W	Т	М	W
Never or not in the last 12 months	74.5	64.4	83.9	79.9	72.4	87.4	78.5	70.6	86.7
Has gambled in the last 12 months	25.5	35.6	16.1	20.1	27.6	12.6	21.5	29.4	13.3

T: total, M: men,W: women.

SOURCE: OEDA. Survey on Drug Use in Secondary Education in Spain (ESTUDES).

The prevalence of face-to-face gambling remains higher than that of online gambling. However, these differences are smaller compared to 2021 as the prevalence of online gambling has increased from 9.4% to 10.7% and that of face-to-face gambling from 17.2% to 17.7% (Chart 4).

Chart 4. Prevalence of gambling during the last 12 months in the 14-18-year-old population (%), by mode of gambling (online or face-to-face). Spain, 2019-2023.



In 2023, the prevalence of online and face-to-face gambling in the last 12 months among students ages 14-18 was 6.9%. However, this prevalence rises to 11.0% for men and just 2.7% for women.

On an evolutionary basis, this percentage has increased slightly compared to 2021 (6.4%) but without reaching 2019 levels (7.4%) (Table 7).

Table 7. Prevalence of <u>online and face-to-face</u> gambling during the last 12 months in the 14-18-year-old population, by sex (%). Spain, 2019-2023.

	2019				2021		2023		
	Т	М	W	Т	М	W	Т	М	W
Never or not in the last 12 months	92.6	87.6	97.1	93.6	90.0	97.2	93.1	89.0	97.3
Has gambled (online and face-to-face) in the last 12 months	7.4	12.4	2.9	6.4	10.0	2.8	6.9	11.0	2.7

T: total, M: men, W: women.

SOURCE: OEDA. Survey on Drug Use in Secondary Education in Spain (ESTUDES).

The **age of onset** is similar for online and face-to-face gambling, 14.7 years and 14.8 years, respectively (Table 8).

Table 8. Age at which 14-18-year olds first gambled online or face-to-face (years). Spain, 2019-2023.

	2019	2021	2023
Age at which you first gambled online	14.7	15.0	14.7
Age at which you first gambled face-to-face	14.6	14.6	14.8

SOURCE: OEDA. Survey on Drug Use in Secondary Education in Spain (ESTUDES).

In relation to the **type of game** played, Chart 5 provides an evolutionary overview of students ages 14-18 who have gambled online or face-to-face in the last 12 months.

In 2023, with regard to **online gambling**, video games rank first, where more than half of young people admit to having gambled money (51.5%), followed by sports betting (35.2%). Cryptocurrencies or trading rank third, with a relevant 26.8%.

Regarding the betting modality with **money face-to-face**, lotteries rank first at 40.6%, followed by bingo at 35.9% and instant lotteries at 33.6%.

With regard to evolution in type of gambling, some changes in young people's habits are worth highlighting. In **online gambling**, eSports has drastically dropped from 34.4% in 2021 to 21.8% in 2023, and there is less weight in sports betting, from 40.6% in 2021 to 35.2% in 2023. In **face-to-face** gambling, the largest increase is in slot machines, from 17.7% in 2021 to 27.5% in 2023, followed by bingo (29.4% vs. 35.9%).

Chart 5. Types of games played by 14-18-year-olds who have gambled online or face-to-face in the last 12 months (%). Spain, 2019-2023.

	201	19	20	21	20)23
	Online	Face-to-face	Online	Face-to-face	Online	Face-to-face
Lotteries*	15.3	48.0	13.7	48.6	14.7	40.6
Bingo	18.0	30.9	16.6	29.4	15.6	35.9
Instant lotteries**	10.7	39.4	11.5	40.7	10.9	33.6
Gambling (slots)	17.3	20.0	14.8	17.7	18.2	27.5
Soccer pools and/or quinigol	25.1	39.2	22.4	32.5	19.5	27.5
Sport betting	45.5	36.9	40.6	31.0	35.2	26.9
Card games***	20.1	20.6	18.9	21.1	16.9	20.8
Video games	56.1	20.6	54.3	13.0	51.5	13.4
Horses racing bets	17.4	10.9	15.2	9.5	13.7	10.1
eSports	35.9	10.4	34.4	9.4	21.8	9.3
Criptocurrencies, trading					26.8	

^{*} primitiva, bonoloto, ONCE tickets, Participative Eurojackpot, 7/39;

^{**} scratch cards, ONCE;

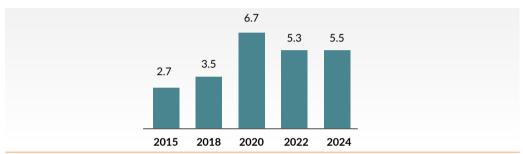
^{*** (}poker, mus, blackjack, baccarat...).

4.4.

EDADES survey. Online gambling in the 15-64-year-old population.

In the 15-64-year-old population, 5.5% have gambled online in the last 12 months, a very similar proportion to that obtained in 2022 (Chart 6).

Chart 6. Prevalence of <u>online</u> gambling in the 15-64 population age group in the last 12 months (%). Spain, 2015-2024.



SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).

By sex, there is a higher prevalence of online gambling among men (8.2%) than among women (2.7%), reflecting a pattern since 2015 (Table 9).

By age group, and as manifested since 2015, there is a greater number of young people who have gambled online (7.4% among 15-24 years old and 8.8% among 25-34 years old), declining as age increases to 2.5% among 55-64 years-olds. In terms of evolution, albeit stable, there is a slight upturn in prevalence among young people after the fall registered in 2022 (Chart 7).

Table 9. Prevalence of <u>online</u> gambling in the 15-64 population age group in the last 12 months (%). Spain, 2015-2024.

		2015			2018			2020			2022			2024	
	Т	М	W	Т	М	W	Т	М	W	Т	М	W	Т	М	W
Has not gambled online in the last 12 months or has never gambled at all	97.3	95.4	99.2	96.5	94.2	98.8	93.3	90.9	95.8	94.7	92.0	97.5	94.5	91.8	97.3
Has gambled online in the last 12 months	2.7	4.6	0.8	3.5	5.8	1.2	6.7	9.1	4.2	5.3	8.0	2.5	5.5	8.2	2.7

T: total, M: men, W: women.

SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).



Chart 7. Prevalence of online gambling in the last 12 months, by sex and age (%). Spain, 2024.

SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).

In terms of sex and age, the prevalence of online gambling among men increases up to the age of 34, with a notable drop thereafter. Among women, the prevalence of online gambling, albeit more stable, also increases up to the age of 34, but remains at its highest level until the age of 44, after which it begins to decline. Irrespective of the age range, there is a greater presence of online gamblers among men than among women, with the largest differences arising in the younger age groups (Chart 8).

Although the prevalence of online gambling in the last 12 months has remained the same as in 2022, when gambling frequency is analyzed, we do find differences with respect to 2022. Thus, there is an increase of almost 12 percentage points amongst those who have gambled once a year, i.e. one day a month or less. This lower frequency is observed among men, but especially among women, where the annual frequency has gone from 55.1% to 74.2% (Table 10).

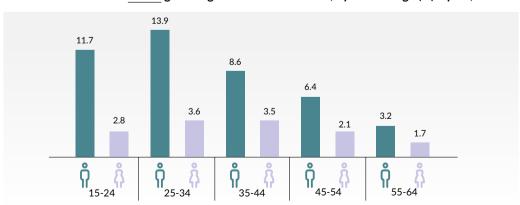


Chart 8. Prevalence of online gambling in the last 12 months, by sex and age (%). Spain, 2024.

SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).

Table 10. Frequency of gambling among 15-64 years old who have gambled <u>online</u> in the last 12 months, by sex (%). Spain, 2015-2024.

		2015			2018			2020			2022			2024	
	Т	М	W	Т	М	W	Т	М	W	Т	М	W	Т	М	W
Once a year (one day a month or less)	59.9	58.5	68.8	50.9	49.1	60.2	49.5	50.1	47.8	49.1	47.7	55.1	61.0	56.1	74.2
Once a month (2 to 4 days a month)	23.2	23.7	19.8	29.6	31.6	19.3	35.0	34.1	37.5	37.8	39.3	31.2	28.5	32.6	17.5
Once a week (2 to 5 days a week)	12.6	13.5	7.3	15.6	15.8	15.0	11.3	11.0	12.3	10.1	9.8	11.3	8.4	9.3	5.8
Once a day (6 or more days a week)	4.3	4.3	4.2	3.9	3.6	5.5	4.2	4.8	2.3	3.0	3.2	2.4	2.1	2.0	2.5

T: total, H: men, M: women.

SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).

Analyzing the types of games played online according to sex, it appears that sports betting is the most popular among men, despite continuing to significantly lose popularity among this group. In turn, traditional lotteries have been the most popular among women, although they have also lost popularity compared to 2022. In comparative terms, online card players are more common among men than women, whilst bingo is more common among women. Furthermore, both games have gained the most popularity over 2022 among their respective users (Chart 9).

Chart 9. Types of games with which the population aged 15-64 has gambled <u>online</u> in the last 12 months (among those who have gambled online), by sex (%). Spain, 2018-2024.

		018		020 W		022		024
	М	W	М	VV	М	W	М	W
Lotteries*	71.5	32.9	58.8	22.6	53.9	17.8	40.2	21.5
Sports billing	10.3	32.9	22.6	45.5	27.9	58.7	27.8	51.0
Card games***	18.8	9.2	14.9	8.4	12.6	6.3	22.4	8.0
Soccer pools and/ or quinigol	11.7	4.3	15.0	11.3	11.0	7.5	10.6	6.2
Bingo	10.1	11.9	6.4	12.2	6.0	9.4	7.7	12.2
Instant lotteries**	5.5	4.0	8.3	25.5	6.0	18.9	6.5	9.5
Gambling (slots)	6.7	5.8	6.4	5.6	4.5	2.7	7.4	6.8
Horse racing bets	11.0	1.5	6.4	8.3	3.3	4.2	4.6	3.6
Competitions****	7.0		3.0	5.8	1.1	2.6	1.7	3.9

M: men, M: women.

Note: These data should be interpreted with caution given the small number of cases.

SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).

In the case of online gambling, it is observed that the majority of players in the last 12 months have played type III games (40.1%), in contrast to the situation when online and/or face-to-face gambling were analyzed together (Table 11).

Table 11. Prevalence of types of online games among online gamblers in the last 12 months, by type of game (%). Spain, 2024.

	2024
Type I <i>Primitiva, bonoloto,</i> ONCE tickets, Participative Eurojackpot, 7/39, Soccer pools and/ or <i>quinigol</i> , television, radio, press competitions betting money.	31.4
Type II Instant lotteries (scratch cards, ONCE), bingo.	11.4
Type III Sports betting, horse racing bets, gambling machines (slots), card games (poker, mus, blackjack, baccarat)	40.1

SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).

^{*} primitiva, bonoloto, ONCE tickets, Participative Eurojackpot, 7/39

^{**} scratch cards, ONCE

^{*** (}poker, mus, blackjack, baccarat...)

^{****}television, radio, press... betting money.

In terms of the maximum amount of money spent in a single day on online gambling in the last 12 months, the usual amount spent was between \le 6 and \le 30 (40.6%). Among women, however, the highest presence of female players is concentrated among those who have spent less than \le 6 (44.9%). In terms of evolution, the percentage of players who have spent a maximum of between \le 31 and \le 60 in a day has increased by 5 percentage points compared to 2022, with this increase being concentrated among men (Table 12).

Table 12. Distribution of the maximum amount of money spent in a single day on <u>online gambling</u> in the last 12 months among the 15-64 population age group who have gambled online, by sex (%). Spain, 2018-2024.

		2018			2020			2022			2024	
	Т	М	W	Т	М	W	Т	М	W	Т	М	W
Less than 6 euros	27.3	25.0	38.7	33.5	29.0	45.5	26.4	24.6	34.6	23.0	17.0	44.9
Between 6 and 30 euros	42.5	41.8	46.0	38.5	39.8	35.2	43.0	44.3	36.9	40.6	42.2	34.8
Between 31 and 60 euros	16.3	17.6	9.3	15.6	17.5	10.5	14.0	15.0	9.3	19.0	21.7	9.0
Between 61 and 300 euros	8.1	9.2	2.5	9.3	10.2	6.8	9.8	8.9	14.3	11.4	12.6	6.6
More than 300 euros	5.8	6.3	3.5	3.1	3.4	2.0	6.8	7.1	5.0	6.0	6.4	4.8

T: total, H: men, M: women.

SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).

4.5

ESTUDES survey. Online gambling in the 14-18 student population.

In 2023, the prevalence of online **gambling** among students ages 14-18 in the last 12 months registered an upturn compared to 2021 (9.4% vs. 10.7%), reaching similar values to 2019 (10.3%).

When analyzed by **sex**, all editions indicate that the prevalence of online gambling is higher among men than among women. However, to note is that in 2023 the highest prevalence of online gambling among women is registered in the historical series (4.3%) (Table 13).

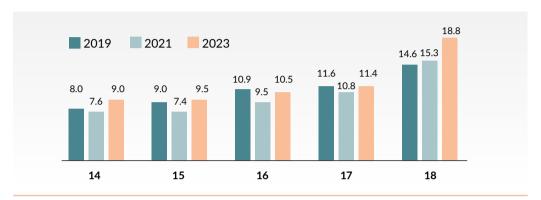
Table 13. Prevalence of online gambling among students ages 14-18 in the last 12 months, by sex (%). Spain, 2019-2023.

	2019				2021				
	Т	М	W	Т	М	W	Т	М	W
Has not gambled online in the last 12 months or has never gambled at all	89.7	82.6	96.4	90.6	85.0	96.2	89.3	82.9	95.7
Has gambled online in the last 12 months	10.3	17.4	3.6	9.4	15.0	3.8	10.7	17.1	4.3

T: total, H: men, M: women.

The **prevalence of online gambling** among students ages 14-18 in the last 12 months follows, as in other measurements, an upward trend. Students aged 18 continue to show the greatest tendency towards online gambling; this measurement has registered the highest increase from 15.3% in 2021 to 18.8% in 2023 (Chart 10).

Chart 10. Prevalence of online gambling among students ages 14-18 in the last 12 months, by age (%). Spain, 2019-2023.



SOURCE: OEDA. Survey on Drug Use in Secondary Education in Spain (ESTUDES).

With regard to the evolution of **gambling frequency** among students ages 14 to 18 who have gambled online in the last 12 months, the figures continue to decrease, as in 2023 the percentage of students who reported online gambling one day a month or less increases again, from 52.0% to 56.1%. In turn, a decrease is observed in all other frequencies analyzed with respect to available data since 2019 (Table 14).

In segmentation by **sex**, women bet more than men on an annual basis (66.9% vs. 53.8% respectively), whereas men have a greater weight in monthly (23.7% vs. 17.6%) and weekly (16.0% vs. 8.7%) bets; however, on a daily basis, it is once again women who bet more (6.9% vs. 6.5%) (Table 14).

Table 14. Frequency of gambling among students aged 14-18 who have gambled online in the last 12 months, by sex (%). Spain, 2019-2023.

	2019				2021		2023		
	Т	М	W	Т	М	W	Т	М	W
Once a year (one day a month or less)	48.6	47.6	55.0	52.0	49.1	67.6	56.1	53.8	66.9
Once a month (2 to 4 days a month)	25.3	25.9	21.6	24.7	25.4	20.8	22.6	23.7	17.6
Once a week (2 to 5 days a week)	15.9	16.5	12.1	15.4	17.0	6.8	14.7	16.0	8.7
Once a day (6 or more days a week)	10.2	10.0	11.3	7.9	8.4	4.9	6.6	6.5	6.9

T: total, H: men, M: women.

Regarding prevalence of the **type of online gambling** in the last 12 months among students ages 14 to 18, video games continue to rank first followed by sports betting for both men and women. However, in the third position, there are in fact differences by sex, with cryptocurrencies and trading in the case of men and bingo in the case of women.

Compared to 2021, the decrease in eSports online gambling is noteworthy, with 13.2 percentage points down for men and 9.9 percentage points less for women (Chart 11).

Chart 11. Prevalence of online gambling in the last 12 months among secondary school students ages 14 to 18 who have gambled online in the last 12 months, by type of game and sex (%). Spain, 2019-2023.

	20	19	20	21	2023			
	Men	Women	Men	Women	Men	Women		
Video games	56.1	56.5	54.7	52.3	51.8	49.9		
Sports betting	46.8	39.5	41.3	37.7	36.5	28.9		
Cryptocurrencies, trading	-	-	-	-	28.5	19.2		
eSports	34.9	40.8	34.8	32.5	21.6	22.6		
Soccer pools and/or quinigol	23.1	34.8	20.6	29.9	18.6	23.4		
Gambling (slots)	13.5	35.0	12.8	23.5	18.3	17.5		
Card games***	16.9	35.2	17.3	25.4	16.0	20.9		
Bingo	14.8	33.4	14.2	26.6	13.7	24.4		
Lotteries*	14.4	19.8	12.2	19.7	13.0	22.5		
Horse racing bets	13.6	35.2	12.7	26.2	12.4	19.6		
Instant lotteries**	9.4	17.0	9.6	19.3	9.3	18.3		

^{*}primitiva, bonoloto, ONCE tickets, Participative Eurojackpot, 7/39 ** scratch cards, ONCE *** (poker, mus, blackjack, baccarat...)

In relation to the **largest amount of money spent in a single day** on online games in the last 12 months among students ages 14-18, to note is the increase in the highest spending brackets, with the "between 61 and 300 euros" bracket rising from 6.0% in 2021 to 8.5% in 2023 and the "more than 300 euros" bracket from 3.9% in 2021 to 6.9% in 2023.

By sex, in the "between 61 and 300 euros" bracket, the greatest increase is registered in female expenditure (1.7% vs. 7.4%) and in the highest spending bracket, "more than 300 euros", by men (4.0% vs. 7.5%) (Table 15).

Table 15. Largest amount of money spent in a single day on online gambling in the last 12 months among secondary school students ages 14-18 who have gambled online in the last year, by sex (%). Spain, 2019-2023.

		2019			2021		2023			
	Т	М	W	Т	М	W	Т	М	W	
Less than 6 euros	47.3	45.7	60.7	44.2	42.4	53.8	38.2	36.2	48.4	
Between 6 and 30 euros	27.7	28.9	17.8	33.6	34.0	31.4	33.0	33.7	29.4	
Between 31 and 60 euros	10.4	10.4	9.9	12.3	12.8	9.7	13.4	13.9	10.7	
Between 61 and 300 euros	7.8	8.0	5.4	6.0	6.8	1.7	8.5	8.7	7.4	
More than 300 euros	6.9	7.0	6.3	3.9	4.0	3.3	6.9	7.5	4.1	

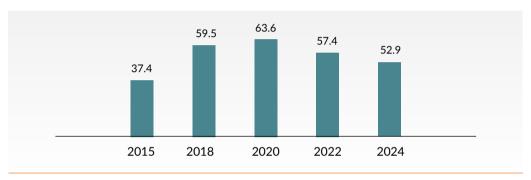
T: total, H: men, M: women.

4.6.

EDADES Survey. Face-to-face gambling in the 15-64-year-old population.

In 2024, 52.9% of the population ages 15-64 report having gambled face-to-face in the past year, indicating that prevalence is still falling since 2022 (Chart 12).

Chart 12. Prevalence of <u>face-to-face</u> gambling in the 15-64-year-old population in the last 12 months (%). Spain, 2015-2024.



SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).

The prevalence of face-to-face gambling exceeds 50% among both men (54.8%) and women (51.1%), being slightly higher among men, but without the large gap registered in online gambling. Since 2020, a downward trend in face-to-face gambling has been observed in both the male and female sectors (Table 16).

Table 16. Prevalence of <u>face-to-face</u> gambling in the last 12 months in the 15-64-year-old population, by sex (%). Spain, 2015-2024.

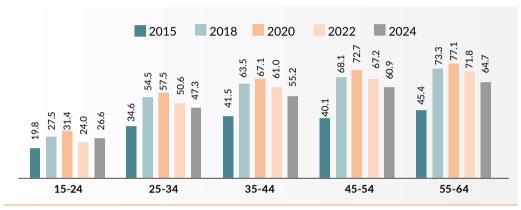
	2015			2018			2020			2022			2024		
	Т	М	W	Т	М	W	Т	М	W	Т	М	W	Т	М	W
Has not gambled face-to-face in the last 12 months or has never gambled at all	62.6	59.5	65.7	40.5	37.6	43.4	40.6	37.9	43.2	42.9	41.0	44.7	47.1	45.2	48.9
Has gambled face- to-face in the last 12 months	37.4	40.5	34.3	59.5	62.4	56.6	63.6	65.9	61.2	57.4	59.2	55.5	52.9	54.8	51.1

T: total, M: men, W: women.

SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).

In contrast to the online environment, the prevalence of face-to-face gambling increases with age, rising to 64.7% among 55-64 years old. In all other age groups, with the exception of those aged 15 to 24, there are less gamblers than two years ago, with the drop being more pronounced in the older segments (Chart 13).

Chart 13. Prevalence of <u>face-to-face</u> gambling in the 15-64-year-old population in the last 12 months, by age (%). Spain, 2015-2024.

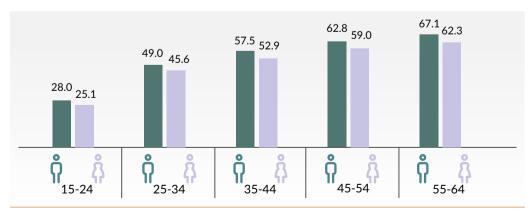


SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).

When analyzing the prevalence of face-to-face gambling by **age and sex**, the proportion of men who have gambled is higher in all age groups (Chart 14).

With regard to the frequency with which gambling takes place on a face-to-face basis, it is most common to have gambled very occasionally: 45.3% of men and 55.5% of women admit to having gambled less than once a month in the last year.

Chart 14. Prevalence of <u>face-to-face</u> gambling in the 15-64 years old population in the last 12 months, by sex and age (%). Spain, 2024.



SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).

On an evolutionary basis, the recorded frequency of gambling remains almost unchanged compared to 2020 and 2022 data (Table 17).

Table 17. Frequency of gambling among the 15-64-year-old population who has gambled <u>face-to-face</u> in the last 12 months, by sex (%). Spain, 2015-2024.

	2015			2018			2020			2022			2024		
	Т	М	W	Т	М	W	Т	М	W	Т	М	W	Т	М	W
Once a year (one day a month or less)	56.3	50.6	63.1	53.2	46.8	60.4	50.2	44.4	56.6	50.5	44.9	56.6	50.2	45.3	55.5
Once a month (2 to 4 days a month)	31.8	34.7	28.2	34.6	38.1	30.7	39.4	43.2	35.2	37.6	41.0	34.0	36.5	39.0	33.8
Once a week (2 to 5 days a week)	10.6	13.1	7.7	11.1	13.4	8.4	9.4	11.0	7.6	10.6	12.6	8.5	11.2	13.1	9.2
Once a day (6 or more days a week)	1.3	1.6	1.0	1.1	1.7	0.5	1.0	1.4	0.6	1.2	1.5	0.9	2.1	2.6	1.5

T: total, H: men, M: women.

SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).

Irrespective of sex, traditional lotteries are by far the most popular type of gambling, followed by instant lotteries. In comparative terms, sports games, pools and sports betting are more popular among men than among women, despite the fact that both games have lost a significant number of followers in recent years (Chart 15).

As shown in Table 18, the vast majority of players in the last 12 months have played type I games (91.2%), as was the case when online and/or face-to-face gambling were analyzed together, and in contrast to the results obtained when online gambling was analyzed independently, where type III games were the most prevalent.

Chart 15. Types of games with which the 15-64-year-old population has gambled <u>face-to-face</u> in the last 12 months (among those who have gambled face-to-face), by sex (%). Spain, 2018-2024.

	2018 M W		20 M	20 W	20 M	022 W	20 M	24 W
Lotteries*	92.3	95.9	92.7	96.3	92.9	95.5	98.7	99.4
Instant lotteries**	22.3	22.0	25.1	24.7	30.1	30.0	31.6	30.2
Soccer pools and/or quinigol	26.5	4.8	24.1	4.4	20.9	3.4	16.7	6.3
Sports betting	10.6	1.6	9.1	1.1	8.3	1.0	5.9	1.0
Gambling (slots)	5.5	0.9	5.2	1.4	4.3	0.8	5.8	1.2
Bingo	4.9	5.6	4.1	5.4	3.5	3.9	3.9	4.7
Card games***	2.6	0.9	2.0	0.6	1.5	0.3	1.3	0.5
Horse racing bets	0.8	0.3	0.9	0.2	0.5	0.1	0.4	0.1
Competitions****	0.1	0.4	0.2	0.3	0.2	0.3	0.2	0.3

H: men; M: women.

SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).

Table 18. Prevalence of type of games played among <u>face-to-face</u> gamblers in the last 12 months (%). Spain, 2024.

	2024
Type I Primitiva, bonoloto, ONCE tickets, Participative Eurojackpot, 7/39, Soccer pools and/ or quinigol, television, radio, press competitions betting money.	91.2
Type II Instant lotteries (scratch cards, ONCE), bingo.	30.5
Type III Sports betting, horse racing bets, gambling machines (slots), card games (poker, mus, blackjack, baccarat)	6.6

SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).

Analyzing the maximum amount of money spent in a single day on face-to-face gambling in the last 12 months, the usual amount spent in a single day is between 6 and 30 euros, something shared by both men and women.

^{*} primitiva, bonoloto, ONCE tickets, Participative Eurojackpot, 7/39;

^{**} scratch cards, ONCE *** (poker, mus, blackjack, baccarat...);

^{****}television, radio, press... betting money.

Table 19. Distribution of the maximum amount of money spent in a single day on <u>face-to-face</u> gambling among the 15-64-year-old population who have gambled face-to-face in the last 12 months, by sex (%). Spain, 2018-2024.

	2018				2020			2022			2024		
	Т	Н	М	Т	Н	М	Т	Н	М	Т	Н	М	
Less than 6 euros	32.3	30.5	34.3	33.8	32.0	35.7	29.8	27.8	32.0	23.6	22.5	24.9	
Between 6 and 30 euros	45.7	44.1	47.4	45.7	45.2	46.1	48.9	48.0	49.8	46.9	44.8	49.2	
Between 31 and 60 euros	13.0	14.4	11.5	12.1	12.8	11.3	13.9	15.3	12.4	17.6	18.2	17.0	
Between 61 and 300 euros	7.4	8.5	6.1	7.3	8.5	6.1	6.3	7.3	5.2	10.1	12.1	7.8	
More than 300 euros	1.6	2.4	0.7	1.1	1.5	0.7	1.0	1.5	0.6	1.8	2.4	1.1	

T: total, H: men, M: women.

SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).

On an evolutionary basis, there is a slight increase in the maximum amount spent among both men and women compared to 2022 (Table 19).

4.7. ESTUDES survey. Face-to-face gambling in the 14-18 student population.

The prevalence of face-to-face gambling among students ages 14 to 18 has remained stable with respect to 2021 data, registering just a 0.5 percentage point increase with respect to the previous measurement, from 17.2% in 2021 to 17.7% in 2023 (Table 20). Throughout the historical series, men have a higher prevalence of face-to-face gambling, with this measurement increasing by 0.7 percentage points.

Table 20. Prevalence of <u>face-to-face</u> gambling among students ages 14-18 in the last 12 months, by sex (%). Spain, 2019-2023.

	2019			2021			2023		
	Т	Н	М	Т	Н	М	Т	Н	М
No face-to-face gambling in the last 12 months or has never gambled at all	77.3	69.3	84.7	82.8	77.3	88.4	82.3	76.6	88.2
Has gambled face-to-face in the last 12 months	22.7	30.7	15.3	17.2	22.7	11.6	17.7	23.4	11.8

T: total, M: men, W: women.

The prevalence of face-to-face gambling among students ages 14-18 in the past 12 months, as with online gambling, increases progressively as students get older (Chart 16).

Chart 16. Prevalence of <u>face-to-face</u> gambling among students ages 14-18 in the last 12 months, by age (%). Spain, 2019-2023.



SOURCE: OEDA. Survey on Drug Use in Secondary Education in Spain (ESTUDES).

On an evolutionary basis, an upturn is observed after a general decline in 2021 in all age groups, except among 17-year-old students where the prevalence of face-to-face gambling continues to decrease (20.9% in 2021 and 19.5% in 2023).

Regarding the **frequency of gambling**, as in previous years, the majority of students ages 14-18 who gambled face-to-face in the last 12 months have done so one day a month or less during this period (59.4%), despite a decrease of 1.6 percentage points compared to 2021. In turn, the percentage of students who play once a week has increased in this measurement (9.9% vs. 11.4%). By sex, it still appears that men play more frequently than women (Table 21).

Table 21. Frequency of gambling among 14-18-year-old students who have gambled <u>face-to-face</u> in the last 12 months, by sex (%). Spain, 2019-2023.

	2019			2021			2023		
	Т	М	W	Т	М	W	Т	М	W
Once a year (one day a month or less)	57.0	52.6	70.7	61.0	57.5	72.5	59.4	54.9	74.9
Once a month (2 to 4 days a month)	26.2	28.3	19.8	25.5	27.3	19.7	25.6	27.8	17.8
Once a week (2 to 5 days a week)	11.9	13.7	6.4	9.9	11.2	5.9	11.4	13.3	4.9
Once a day (6 or more days a week)	4.9	5.4	3.2	3.5	4.0	1.9	3.6	4.0	2.4

SOURCE: OEDA. Survey on Drug Use in Secondary Education in Spain (ESTUDES).

When analyzing the **type of game** played among students who have gambled face-to-face, significant differences are observed by sex.

Chart 17. Prevalence of <u>face-to-face</u> gambling in the last 12 months among Secondary School students ages 14-18 who have gambled face-to-face in the last 12 months, by type of game and sex (%). Spain, 2019-2023.

M: men, W: women.

	20:	19	20	21	20	23
	М	W	М	W	М	W
Lotteries*	43.9	55.4	43.3	58.5	37.7	46.3
Sports betting	48.4	15.9	41.2	11.8	35.4	10.7
Soccer pools and/or quinigol	49.2	21.0	40.8	17.0	34.6	13.8
Gambling (slots)	23.7	13.3	20.5	12.2	34.4	14.2
Instant lotteries**	35.9	45.6	37.2	47.5	32.3	36.2
Bingo	23.7	44.1	21.6	44.3	29.3	48.5
Card games***	22.6	16.8	22.7	18.1	23.0	16.7
Video games	19.1	7.5	16.5	6.2	16.6	7.2
Horse racing bets	13.2	6.8	10.4	7.8	11.5	7.3
eSports	13.3	5.0	12.2	3.9	11.1	5.9

^{*}primitiva, bonoloto, ONCE tickets, Participative Eurojackpot, 7/39;

SOURCE: OEDA. Survey on Drug Use in Secondary Education in Spain (ESTUDES).

For men, the most popular games are lotteries, sports betting and soccer pools and/or quinigol, while for women, bingo is the most representative form of gambling, followed by lotteries and instant lotteries (Chart 17).

In terms of the maximum amount spent in a single day in person among students ages 14 to 18, there is a decrease of 5.6 percentage points in students who spend 'Less than 6 euros'; however, this decrease is offset by greater expenditure in the 'Between 6 and 30 euros' (23.1% in 2021 to 26.6% in 2023), 'Between 31 and 60 euros' (5.0% in 2021 to 6.0% in 2023) and 'Between 61 and 300 euros' (2.8% in 2021 to 3.7% in 2023) brackets. By sex, there is a noteworthy increase in expenditure of between 6 and 30 euros among women (Table 22).

Table 22. Largest amount of money spent in a single day on <u>face-to-face</u> gambling in the last 12 months among secondary school students ages 14-18 who have gambled face-to-face (%). Spain, 2019-2023.

	2019			2021			2023		
	Т	М	W	Т	М	W	Т	М	W
Less than 6 euros	68.1	63.8	77.1	66.8	63.4	74.0	61.2	57.8	68.9
Between 6 and 30 euros	21.1	23.2	16.8	23.1	25.3	18.4	26.6	27.6	24.5
Between 31 and 60 euros	5.2	6.0	3.3	5.0	5.2	4.5	6.0	7.2	3.4
Between 61 and 300 euros	3.1	3.8	1.8	2.8	3.4	1.7	3.7	4.7	1.7
More than 300 euros	2.5	3.2	1.0	2.3	2.7	1.4	2.4	2.8	1.5

^{**} scratch cards, ONCE;

^{*** (}poker, mus, blackjack, baccarat...).

4.8.

Problematic Gambling and Gambling Disorder.

When gambling becomes the center of a person's life, occupying a large part of his/her daily activity, thinking about how to gamble, when or where to procure enough gambling money, and are unable to stop gambling despite the negative consequences that seriously harm their family, work or personal relationships, the situation amounts to a gambling disorder.

The ability to engage in certain activities online encourages many possible addictive behaviors, including gambling disorders. Immediacy of the reward, easy accessibility and access 24 hours a day, anonymity and the intimate environment provided by new technologies, all promote a loss of control.

A gambling disorder, or what is also known as pathological gambling, was initially considered an impulse control disorder since its recognition as a nosological disease in the U.S. classification of mental disorders, DSM-III⁸, Diagnostic and Statistical Manual of Mental Disorders. According to the latest version of this manual, in DSM-5⁹ a gambling disorder is defined as "persistent, maladaptive gambling behavior that results in clinically significant distress". Based on current evidence, in DSM-5 pathological gambling is classified under the "Substance-related and addictive disorders" chapter.

The World Health Organisation (WHO), which introduced pathological gambling as a disease in its ICD-104, also treats it as an impulse control disorder. This disorder usually begins in adolescence in men and later in life in women, going through various stages, but tending towards becoming a chronic problem. In other words, the problem is considered to have an onset, followed by periods of remission and exacerbation throughout adulthood. Typically, preoccupation, necessity and gambling behavior increase during periods of stress and, likewise, gambling-related problems tend to intensify gambling behavior¹⁰.

With the appearance of DSM-IV, a new aspect is added to the diagnostic criteria for this problem by starting to emphasize both the consequences of gambling and its triggering factors, suggesting the need for both symptomatic and non-symptomatic treatment for this problem. Likewise, this edition adds a criterion to those of its previous version, by referring to a new symptom: "gambling is used as an escape mechanism, or to mitigate a depressed or dysphoric state of mind".

⁸ The American Psychiatric Association (APA). Diagnostic and Statistical manual of Mental Disorders (third edition). Washington DC, 1980.

⁹ The American Psychiatric Association (APA). Diagnostic and Statistical manual of Mental Disorders (fifth edition). Washington DC, 2013.

¹⁰ World Health Organisation (WHO). International Statistical Classification of Diseases and Related Health Problems (ICD-10). Geneva, WHO, 1992

DSM-5 diagnostic criteria for gambling disorders (312.31).

- A.Persistent and recurrent problematic gambling behavior leading to clinically significant impairment or distress, as indicated by the individual exhibiting four (or more) of the following in a 12-month period:
 - 1. Needs to gamble with increasing amounts of money in order to achieve the desired excitement..
 - 2. Is restless or irritable when attempting to cut down or stop gambling.
 - 3. Has made repeated unsuccessful efforts to control, cut back or stop gambling.
 - 4. Is often preoccupied with gambling (e.g. having persistent thoughts of reliving past gambling experiences, handicapping or planning the next venture, thinking of ways to get money with which to gamble).
 - 5. Often gambles when feeling distressed (e.g. helpless, guilty, anxious, depressed).
 - 6. After losing money gambling, often returns another day to get even ("chasing" one's losses).
 - 7. Lies to conceal the extent of involvement with gambling.
 - 8. Has jeopardized or lost a significant relationship, job, educational or career opportunity because of gambling.
 - 9. Relies on others to provide money to relieve desperate financial situations caused by gambling.
- B. The gambling behavior is not better explained by a manic episode.

Gambling can be described as a continuum, with levels and stages reflecting the degree of gambling involvement. In this sense, different terms are used to classify people according to their gambling patterns¹¹.

From this perspective, scoring 1-3 on the DSM-5 scale would be considered problematic gambling, representing excessive gambling behavior, experiencing some related problem but without a very significant impact. In this category, there is a range of symptoms, you may have problems at home or feel guilty about having invested too much time or too much money in a gambling episode, etc.... A score equal to or greater than 4 would be considered a gambling disorder, differentiated into three levels according to the score: mild (DSM-5 \geq 4 \leq 5), moderate (DSM-5 \geq 6 \leq 7) or severe (DSM-5 \geq 8 \leq 9) gambling disorder.

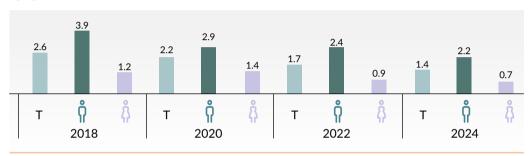
EDADES survey results (15-64 population age group)

In the 2018 edition of the EDADES survey, a scale based on DSM-5 diagnostic criteria was introduced to identify any possible problematic gambling and/or gambling disorder. The correction of the scale allows the possibility of two cut-off points, with a score equal to or greater than 1 indicating possible problematic gambling, and a possible gambling disorder when a score of 4 or more is reached on the scale.

¹¹ National Research Council (NRC, 1999).

Throughout the Report, we will generally refer to possible problematic gambling at scores above 1 on the DSM-5 scale, indicating specifically if a possible gambling disorder exists. Taking this into account, it is estimated that, in 2024, 1.4% of the 15-64 population age group would reveal possible problematic gambling, with this proportion increasing to 2.2% among men and reduced to half among women (0.7%). Evolutionarily, this prevalence continues to decrease from 2020 in general and among men, and from 2022 among women (Chart 18).

Chart 18. Prevalence of possible <u>problematic gambling</u> (DSM-5≥1) among the 15-64 population age group, by sex (%). Spain, 2018-2024.



T: total, M:men, W: women.

SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).

In 2024, among gamblers in the last 12 months who have completed the DSM-5 scale, 3.2% would exhibit possible problematic gambling, having obtained a score of 1 to 3 on this scale, and 1.3% would have a possible gambling disorder, due to confirming 4 or more positive items on the DSM-5. In evolutionary terms, there is a greater impact of possible problematic gambling and possible gambling disorder among gamblers when compared to 2022.

Extrapolating these data to the Spanish population aged 15-64 years, this would indicate that 1.0% of these individuals could engage in possible problematic gambling and 0.4% would have a possible gambling disorder. Thus, it seems that, in general terms, although the number of gamblers has decreased, they are more prone to possible problematic gambling (Table 23).

Table 23. Categorization of DSM-5 scale results among the 15-64 population age group and among gamblers in the last 12 months (%). Spain, 2018-2024.

	2018		20	2020		22	2024		
								Players last 12 months	
Possible problematic gambling (DSM-5 ≥1 and <4)	2.0	3.4	1.6	2.7	1.3	2.2	1.0	3.2	
Possible gambling disorder (DSM-5)	0.5	0.9	0.6	1.0	0.4	0.7	0.4	1.3	

SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).

Analyzing the prevalence of possible problematic gambling (DSM-5) among the gambling population by type of game, this is higher among those who have gambled online than among those who have gambled face-to-face (something already present in previous years). In terms of evolution, there is a greater risk of problematic gambling than in 2022 in both online and face-to-face gambling (Table 24).

Table 24. Prevalence of possible <u>problematic gambling</u> (DSM-5≥1) among the population who has gambled online or face-to-face in the last 12 months (%). Spain, 2018-2024.

	2018		2020		2022		2024	
Possible problematic gambling among those who have gambled online or face-to-face in the last 12 months	22.9	4.2	15.8	3.5	13.6	2.9	18.4	4.3
Possible problematic gambling among the total population in the 15-64 age group	0.8	2.5	0.9	2.0	0.7	1.6	0.6	1.4

SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).

For both online and face-to-face gambling, the frequency of gambling is higher among those with a tendency to problematic gambling than for the population aged 15-64 who has gambled in the last 12 months (Tables 25 and 26).

Table 25. Frequency of <u>online</u> gambling in the last 12 months in the 15-64 population age group, who has gambled online, and amongst possible problematic gamblers (DSM-5) (%). Spain, 2018-2024.

	2018		20	2020		2022	2024		
	Players 15-64 years old								
Once a year	50.9	29.0	49.5	25.7	49.1	30.6	61.0	41.7	
Once a month	29.6	34.0	35.0	40.0	37.8	35.4	28.5	30.2	
Once a week	15.6	29.0	11.3	25.4	10.1	25.5	8.4	18.4	
Once a day	3.9	8.0	4.2	8.8	3.0	8.5	2.1	9.7	

SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).

Table 26. Frequency of <u>face-to-face</u> gambling over the last 12 months in the 15-64 population age group, who has gambled face-to-face, and among those with possible <u>problematic gambling</u> (DSM-5) (%). Spain, 2018-2024.

	2018			020	20)22	2024		
	Players 15-64 years old	Possible problematic gambling	Players15-64 years old	Possible proble matic gambling	Players 15-64 years old	Possible problematic gambling	Players 15-64 years old	Possible proble matic gambling	
Once a year	53.2	30.3	50.2	24.5	50.5	28.0	50.2	18.8	
Once a month	34.6	40.8	39.4	39.6	37.6	37.1	36.5	37.8	
Once a week	11.1	24.2	9.4	32.5	10.6	27.3	11.2	35.0	
Once a day	1.1	4.8	1.0	3.3	1.2	7.6	2.1	8.4	

SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).

Analyzing the prevalence of possible problematic gambling by type of game played online, the highest values are observed among users of slot machines (31.1%), followed by horse racing bets (25.4%) and bingo (24.6%). Compared to 2022, there is a drop in the prevalence of possible problematic gambling among those who have played card games, instant lotteries and competitions, while the prevalence of problematic gambling increases among slot machine users (Chart 19).

Chart 19. Prevalence of possible <u>problematic gambling</u> (DSM-5≥1) by type of <u>online game</u> played in the last 12 months. Spain, 2020-2024.

	2020	2022	2024
Gambling machines (slots)	30.6	24.4	31.1
Horse racing bets	41.1	27.0	25.4
Bingo	22.0	26.6	24.6
Sports betting	22.8	17.6	18.9
Soccer pools and/or quinigol	15.4	17.4	15.1
Card games***	29.3	27.7	14.3
Comptitions****	13.1	20.1	11.2
Lotteries*	5.9	5.3	5.9
Instant lotteries**	8.9	10.2	5.7

^{*} primitiva, bonoloto, ONCE tickets, Participative Eurojackpot, 7/39;

Note: These data should be interpreted with caution given the small number of cases.

SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).

In the case of **face-to-face** gambling, the highest prevalence of possible problematic gambling is found among card players (22.6%) and, again, among slot machine users (22.3%). In turn, there are very few players with possible problematic gambling in traditional lotteries (2.7%) and instant lotteries (4.6%).

^{**} scratch cards, ONCE;

^{*** (}poker, mus, blackjack, baccarat...);

^{****}television, radio, press... betting money.

Chart 20. Prevalence of possible <u>problematic gambling</u> (DSM-5≥1) by type of <u>face-to-face</u> game played in the last 12 months. Spain, 2020-2024.

	2020	2022	2024
Card games***	4.3	26.1	22.6
Gambling machines (slots)	19.4	22.5	22.3
Horse racing bets	26.4	41.0	16.1
Competitions****	6.9	8.5	15.1
Bingo	14.3	20.4	12.7
Sports betting	12.9	12.8	12.1
Soccer pools and/or quinigol	5.6	5.2	6.6
Instant lotteries**	6.9	4.1	4.6
Lotterie	2.9	2.4	2.7

^{*} primitiva, bonoloto, ONCE tickets, Participative Eurojackpot, 7/39;

SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).

Comparing the results with those of 2022, there are fewer players with possible problematic gambling among horse race betters and bingo players. In contrast, there is greater prevalence among those who have participated in competitions betting money (Chart 20).

When analyzing the prevalence of problematic gambling among those who have played online and/ or face-to-face in the last 12 months, according to the category of game played, type III game players are more than three times more likely to develop problematic gambling than type II game players and more than five times more likely than type I game players. Very similar results are obtained when independently studying the population of face-to-face gamblers. However, when analyzing the population of online gamblers alone, the probability of developing problematic gambling arises in all gambling categories; notably, in online gambling, the probability of developing problematic gambling in type II players reaches the same level as that of type III players (Table 27).

Table 27. Prevalence of problematic gambling among online and/or face-to-face gamblers in the last 12 months, in the 15-64 population age group, by gambling category. Spain, 2024.

	Online and/ or face-to-face			Online			Face-to-face		
		Type II	Type III	Type I	Type II	Type III	Type I	Type II	Type III
Possible problematic gambling or gambling disorder (DSM-5≥1)	4.3	6.8	21.9	11.4	27.2	27.2	4.2	6.6	21.2
No evidence of problematic gambling	95.7	93.2	78.1	88.6	72.8	72.8	95.8	93.4	78.8

TYPE I: primitiva lotteries, bonoloto, ONCE tickets, Participative Eurojackpot, 7/39, soccer pools and/or quinigol, television, radio, press competitions... betting money.

TYPE II: instant lotteries (scratch cards, ONCE), bingo.

TYPE III: sports betting, horse racing bets, gambling machines (slots), card games (poker, mus, blackjack, baccarat...).

SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).

^{**} scratch cards, ONCE;

^{*** (}poker, mus, blackjack, baccarat...);

^{****}television, radio, press... betting money.

As might be expected, in both online and face-to-face gambling, the prevalence of possible problematic gambling is higher the more money is spent as a maximum in a single day. In turn, as shown in Table 28, in all expenditure brackets, the prevalence of problematic gambling is higher amongst on-line players.

Table 28. Prevalence of possible <u>problematic gambling</u> (DSM-5≥1) by maximum amount of money spent in a single day in the 15-64-year-old population who has gambled in the last 12 months (%). Spain, 2024.

	Online	Face-to-face
Less than 6 euros	2.8	1.5
Between 6 and 30 euros	14.9	2.8
Between 31 and 60 euros	22.5	5.8
Between 61 and 300 euros	37.1	11.0
More than 300 euros	52.0	28.5

SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).

Likewise, there is a higher prevalence of **risk behaviors**, such as drunkenness, binge drinking, risky alcohol consumption and daily smoking, among possible problematic gamblers (DSM-5≥1). On an evolutionary basis, the prevalence of binge drinking has declined significantly compared to previous years (18.4 percentage point drop since 2022) among those with possible problematic gambling (Table 29).

Table 29. Prevalence of drunkenness and binge drinking in the past 30 days, risky alcohol consumption (AUDIT≥8) and daily smoking in the past 30 days amongst the general population ages 15-64 and possible problematic gamblers (DSM-5 ≥1) (%). Spain, 2018-2024

	2018		2	020	2022		2	024
	15-64 years	Possible problematic gambling	15-64 years	Possible problematic gambling	15-64 years	Possible problematic gambling	15-64 years	Possible problematic gambling
Drunkenness	7.1	25.5	6.8	17.4	6.4	19.0	4.6	16.0
Binge drinking	15.1	38.6	15.4	43.2	15.4	40.2	16.0	21.8
Risky alcohol consumption (AUDIT≥8)	5.1	24.9	4.2	21.5	4.8	22.6	6.0	24.7
Daily smoking	34.0	53.5	32.3	43.2	33.1	54.6	25.8	54.7

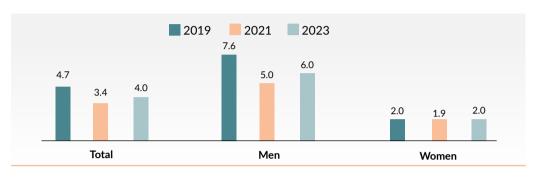
SOURCE: OEDA. Survey on Alcohol and Drugs in Spain (EDADES).

ESTUDES survey results (student population aged 14-18)

In the ESTUDES 2019 survey, the Lie/Bet questionnaire, a scale that was already used in the European ESPAD survey in 2015 and 2019, was introduced for the first time to explore possible problematic gambling. It is a screening instrument that includes just two questions, asking whether the subject has felt the need to bet more and more or has lied to significant others about how much money he/she spends on gambling. The Lie/Bet questionnaire, developed by Johnson et al (1997), follows DSM-IV criteria and is a very useful screening tool.

In 2023, an increase in possible problematic gambling was observed among the 14-18 student population, following a fall in 2021. This increase stems from increased prevalence among men, as gambling prevalence among women has remained stable over the last 3 editions (Chart 21).

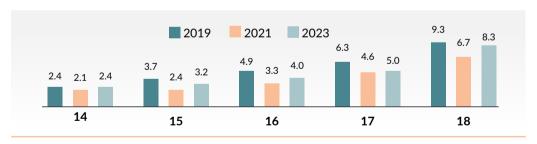
Chart 21. Prevalence of possible <u>problematic gambling</u> estimated from the Lie/Bet scale among the secondary school student population aged 14-18, by sex (%). Spain, 2019-2023.



SOURCE: OEDA. Survey on Drug Use in Secondary Education in Spain (ESTUDES).

By age, it is observed that the prevalence of possible problematic gambling increases the greater the age analyzed, with 18-year-old students showing the highest prevalence (8.3%). Furthermore, in 2023, with respect to previous editions, an increase in prevalence is detected in all age groups, after a clear drop in 2021 (Chart 22).

Chart 22. Prevalence of possible problematic gambling estimated from the Lie/Bet scale among the secondary school student population aged 14-18, by age (%). Spain, 2019-2023.



SOURCE: OEDA. Survey on Drug Use in Secondary Education in Spain (ESTUDES).

According to the prevalence rate of possible problematic gambling (Lie/Bet≥1), 23.5% of all students who have gambled online in 2023 would be possible problematic gamblers, whilst 20.5% is registered among face-to-face gamblers.

When compared to 2021, these prevalence rates have increased, and to a greater extent in face-to-face gambling, from 18.2% to 20.5% (Table 30).

Table 30. Prevalence of possible problematic gambling (Lie/Bet≥1) among students aged 14-18 who have gambled online or face-to-face in the last 12 months (%). Spain, 2019-2023.

	2019	2021	2023
Have gambled online	26.4	23.0	23.5
Have gambled face-to-face	19.8	18.2	20.5

SOURCE: OEDA. Survey on Drug Use in Secondary Education in Spain (ESTUDES).

In relation to the **amount of money spent** in 2023, this is higher among students who have gambled online and are possible problematic gamblers than among total students who have gambled online in the more than 60 euros bracket (15.4% vs. 31.5%). This spending bracket of students who are possible problematic gamblers has also increased when compared to 2021, with an increment of 14 percentage points (17.5% vs. 31.5%) (Table 31).

Table 31. Largest amount of money spent in a single day in the Secondary School student population aged 14-18 who have gambled <u>online</u> in the last 12 months, and in the gambling population with possible problematic gamblers (Lie/Bet≥1) (%). Spain, 2019-2023.

	20	19	20	21	20	23
	14-18-year-old students who have gambled online					14-18-year-old students who are possible problematic gamblers
Less than 6 euros	47.3	31.1	44.2	33.3	38.2	24.9
Between 6 and 30 euros	27.7	26.6	33.6	33.6	33.0	30.4
Between 31 and 60 euros	10.4	15.8	12.3	15.5	13.4	13.3
Between 61 and 300 euros	7.8	13.3	6.0	8.3	8.5	15.1
More than 300 euros	6.9	13.2	3.9	9.2	6.9	16.4

SOURCE: OEDA. Survey on Drug Use in Secondary Education in Spain (ESTUDES). Data refer to the population that has gambled in the last 12 months.

In face-to-face gambling, the difference in the amount of money spent is accentuated starting at the 6+ euro bracket (38.7% vs. 62.1%).

Table 32. Largest amount of money spent in a single day in the Secondary School student population aged 14-18 who have gambled face-to-face over the last 12 months and in the gambling population with possible problematic gamblers (Lie/Bet≥1) (%). Spain, 2019-2023.

	20	019	2	021	2	023
						14-18-year-old students who are possible problematic gamblers
Less than 6 euros	68.1	45.5	66.8	46.0	61.2	37.9
Between 6 and 30 euros	21.1	29.6	23.1	29.7	26.6	34.8
Between 31 and 60 euros	5.2	10.3	5.0	10.7	6.0	11.8
Between 61 and 300 euros	3.1	7.6	2.8	6.7	3.7	9.1
More than 300 euros	2.5	7.1	2.3	6.9	2.4	6.4

SOURCE: OEDA. Survey on Drug Use in Secondary Education in Spain (ESTUDES). Data refer to the gambling population of the last 12 months.

Evolutionarily, the largest expenditure increases amongst students who are possible problematic gamblers is in the 'Between 6 and 30 euros' (29.7% in 2021 and 34.8% in 2023) and 'Between 61 and 300 euros' (6.7% in 2021 and 9.1% in 2023) brackets (Table 32).

In relation to **type of online games**, among the total number of students who have gambled online, video games are predominant (51.5%); however, among students who are possible problematic gamblers, the most relevant games are sports betting. Although video games come second (47.4% and 47.3% respectively) there are much higher percentages in slots-type games. To note also is the higher participation in trading or cryptocurrencies among problematic gamblers (8% more) (Chart 23).

When compared to other measurements, students who have gambled online and who are possible problematic gamblers tend to make more use of slot and gambling machines with respect to previous editions (Chart 23).

Chart 23. Types of games used among 14-18-year-old students who have gambled online in the last 12 months and among student gamblers who display possible problematic gambling (Lie/ Bet≥1) (%). Spain, 2019-2023.

14-18 years-old students who have gambled online 14-18 years-old students displaying possible pathological gambling (Lie/Bet ≥) 2019 2021 2023 Sports betting 45.5 40.6 50.0 35.2 47.4 55.7 56.1 54.3 50.5 51.5 47.3 Video games 53.5 26.8 34.8 Cryptocurrencies, trading 17.3 14.8 19.9 18.2 31.9 Slots, gambling machines 22.8 27.5 34.4 36.3 eSports 35.9 40.5 21.8 26.5 19.5 26.9 Soccer pools and/or quinigol 25.1 30.7 18.9 26.0 16.9 24.6 Card games betting money*** 20.1 27.5 16.6 19.0 15.6 22.5 Bingo 18.0 21.9 Horse racing bets 15.2 22.7 13.7 21.3 17.4 23.7 20.9 Lotteries, primitiva, bonoloto* 19.5 14.7 15.3 22.2 13.7 Instant lotteries** 11.5 15.4 10.9 16.3

14.6

SOURCE: OEDA. Survey on Drug Use in Secondary Education in Spain (ESTUDES).

10.7

In the case of face-to-face gambling, the most popular game among students is "lotteries, primitiva, bonoloto" (40.6%); however, for students who are possible problematic gamblers, the main game is "slots, gambling machines" (41.1%). To note also is the difference in sports betting between problematic gamblers and all other gamblers. Compared to previous surveys, students who are possible problematic gamblers tend to make less use of soccer pools and/or quinigol and sports betting (Chart 24).

^{*}ONCE tickets, Participative Eurojackpot, 7/39;

^{**} scratch cards, ONCE;

^{*** (}poker, mus, blackjack, baccarat...)

Chart 24. Types of games used among 14-18-year-old students who have gambled <u>face-to-face</u> in the last 12 months and among student gamblers who display possible <u>problematic gambling</u> (Lie/Bet≥1) (%). Spain, 2019-2023.

14-18 years-old studens who have played gamblin	g face-to-face	14-18 ye	ars.old studens wh	o display possible p	oathological gamb	ling (Lie/Bet ≥)
	20	019	20	021	20	23
Slots, gambling machines	20.0	35.9	17.7	33.2	27.5	41.1
Lotteries, primitiva, bonoloto*	48.0	48.4	48.6	47.2	40.6	40.7
Sports betting	36.9	53.0	31.0	43.3	26.9	37.2
Bingo	30.9	32.7	29.4	34.3	35.9	36.4
Instant lotteries**	39.4	42.4	40.7	45.7	33.6	36.0
Soccer pools and/or quinigol	39.2	48.1	32.5	35.3	27.5	32.5
Card games whith money***	20.6	29.4	21.1	32.3	20.8	29.3
Video games	15.0	22.0	13.0	19.0	13.4	20.1
Horse racing bets	10.9	17.0	9.5	15.9	10.1	16.1
eSports	10.4	19.8	9.4	18.3	9.3	16.0

^{*} Once tickets, Participative Eurojackpot, 7/39;

SOURCE: OEDA. Survey on Drug Use in Secondary Education in Spain (ESTUDES).

In 2023, it is still evident that students who are possible problematic gamblers have higher prevalence of **risky substance use** than students in general. Compared to 2021 data, the prevalence of students with a possible gambling problem has registered the highest increase in cannabis use in the past 30 days, from 35.2% to 40.7% (Table 33).

Table 33. Prevalence of drunkenness, binge drinking and cannabis use over the past 30 days and daily smoking in the past 30 days among Secondary School students in the 14-18 age group and student gamblers with possible problematic gambling (Lie/Bet≥1) (%). Spain, 2019-2023..

	20	19	20		2023			
	14-18-year-old students	14-18-year-old students who are possible problematic gamblers	14-18-year-old students	14-18-year-old students who are possible problematic gamblers	14-18-year-old students	14-18-year-old students who are possible problematic gamblers		
Drunkenness	24.3	46.5	23.2	45.1	20.8	41.2		
Binge drinking	32.3	57.0	27.9	52.4	28.2	57.7		
Cannabis	19.3	43.2	14.9	35.2	15.6	40.7		
Daily smoking	9.8	21.5	9.0	21.3	7.5	19.9		

^{**} scratch cards, ONCE;

^{*** (}poker, mus, blackjack, baccarat...)

4.9

Problematic use of the Internet.

Almost the entire population in the 15-64 age group has used the Internet for recreational purposes at least once in their lives, in the last year and in the last month. In evolutionary terms, there is an upward trend in the prevalence of use in all time periods, irrespective of sex and age.

By age, even among senior citizens prevalence of use exceeds 94%, which confirms how widespread recreational Internet use has become in current society. In this respect, to note is the increase in the prevalence of use in 2024 with respect to 2022 in the 55-64 age group, which is around 4 percentage points higher in all the time periods analyzed.

In terms of sex, as was the case in 2022, prevalence of use is somewhat higher in women than in men, having increased in both cases compared to the previous edition.

Table 34. Prevalence of recreational Internet use in the 15-64 population age group, by age and sex (%). Spain, 2022-2024.

				2	2022				2024							
	Total	Н	М	15-24	25-34	35-44	45-54	55-64	Total	Н	М	15-24	25-34	35-44	45-54	55-64
First time	96.9	96.6	97.2	99.3	98.9	98.6	97.4	91.2	98.1	97.8	98.3	99.3	99.4	99.2	98.2	95.0
Over the last 12 months	96.6	96.1	97.0	99.3	98.9	98.3	97.0	90.4	97.9	97.7	98.2	99.2	99.3	99.1	98.0	94.8
Over the last 30 days								89.8							97.7	

SOURCE: OEDA Spanish Alcohol and Drugs Survey (EDADES).

Note the differences by age observed in the average number of hours a day spent using the Internet for recreational purposes. Both during the week and at weekends, this time spent on the Internet decreases with age, with young people under 35 spending approximately twice as many hours as those over 54.

In evolutionary terms, there has been a slight increase in the number of hours spent a day at weekends, while the average number of hours a day during the week has remained very stable (Table 35).

Table 35. Average number of hours a day of recreational Internet use in the population aged 15-64, by age and sex (%). Spain, 2022-2024.

				2	022				2024							
		Total Sex														
	IUtai	М	W	15-24	25-34	35-44	45-54	55-64	IUtai	М	W	15-24	25-34	35-44	45-54	55-64
Average hours a day on weekdays	2.65	2.64	2.66	3.88	3.30	2.57	2.22	1.76	2.63	2.62	2.64	3.97	3.19	2.53	2.23	1.78
Average hours a day on weekends	2.59	2.64	2.54	4.18	3.17	2.48	2.12	1.63	2.83	2.83	2.83	4.52	3.42	2.67	2.34	1.83

SOURCE: OEDA Spanish Alcohol and Drugs Survey (EDADES).

Problematic Internet use is a growing phenomenon of our time defined as a pervasive and compulsive use of the Internet, associated with a loss of control and negative consequences for the user¹². Problematic Internet use has not yet been recognized by diagnostic classification systems (ICD-10 or DSM-5), but is receiving increasing attention both in research and clinical practice.

Scientific literature offers various terms that are used interchangeably to refer to the same phenomenon, including Internet addiction, pathological Internet use, problematic Internet use, Internet dependence, problematic Internet use or Internet use disorder.^{13, 14, 15, 16, 17, 18, 19, 20}

The psychological and behavioral consequences that problematic Internet use has on people, especially amongst the younger population, require an effective response. One of the great challenges in this context is to have data allowing us to know the current situation in population terms. To this end, the ESTUDES 2014 and EDADES 2015 surveys introduced a scale to measure problematic Internet use: the Compulsive Internet Use Scale, CIUS²¹. This is a validated scale used for the early detection of possible risk cases and consists of a total of 56 items, in which a score greater than or equal to 28 indicates possible problematic Internet use. The results obtained by applying this scale in the EDADES and ESTUDES surveys are shown below.

EDADES survey results (population aged 15-64)

In 2024, 3.7% of the population aged 15-64 evidenced a possible problematic use of the Internet in Spain (CIUS>28), a similar figure to that recorded since 2020, when a significant increase in this prevalence was observed.

The prevalence of possible problematic Internet use is again similar for men (3.6%) and women (3.7%) (Table 36).

¹² OORTUÑO-SIERRA, Javier et al. Problem Internet use in adolescents: Spanish Validation of the Compulsive Internet Use Scale (CIUS). Adicciones, [S.I.], Oct. 2022. ISSN 0214-4840.

¹³ Fioravanti G, Dèttore D, Casale S. Adolescent Internet addiction: testing the association between self-esteem, the perception of Internet attributes, and preference for online social interactions. Cyberpsychol Behav Soc Netw. 2012 Jun;15(6):318-23.

¹⁴ Griffiths, M. (2000). Internet addiction- Time to be taken seriously? Addiction Research and Theory, 8, 413-418.

¹⁵ Brezing, C., Derevensky, J. L. and Potenza, M. N. (2010). Non-substance-addictive behaviors in youth: pathological gambling and problematic Internet use. Child and Adolescent Psychiatric Clinics of North America, 19, 625-641.

¹⁶ Goldstein, R. Z. and Volkow, N. D. (2011). Dysfunction of the prefrontal cortex in addiction: neuroimaging findings and clinical implications. Nature Reviews Neuroscience, 12, 652-669.

¹⁷ Grant, J. E., Potenza, M. N., Weinstein, A. and Gorelick, D. A. (2010). Introduction to behavioral addictions. American Journal of Drug and Alcohol Abuse, 36, 233-241.

¹⁸ Kormas, G., Critselis, E., Janikian, M., Kafetzis, D. and Tsitsika, A. (2011). Risk factors and psychosocial characteristics of potential problematic and problematic Internet use among adolescents: a cross-sectional study. Bio Medical Central Public Health, 11, 595.

¹⁹ Montag, C., Kirsch, P., Sauer, C., Markett, S. and Reuter, M. (2012). The role of the CHRNA4 gene in Internet addiction: a case-control study. Journal of Addiction Medicine, 6, 191-195.

²⁰ Zhou, Y., Lin, F. C., Du, Y. S., Qin, L. D., Zhao, Z. M., Xu, J. R., Lei, H. (2011). Gray matter abnormalities in Internet addiction: a voxel-based morphometry study. European Journal of Radiology, 79, 92-95.

²¹ Meerkerk, G. J., Van Den Eijnden, R. J. M., Vermulst, A. A., & Garretsen, H. F. L. (2009). The Compulsive Internet Use Scale (CIUS): Some psychometric properties. CyberPsychology & Behavior, 12, 1-6.

Table 36. Prevalence of possible <u>problematic Internet use</u> among the 15-64 population age group, by sex (%). Spain, 2015-2024.

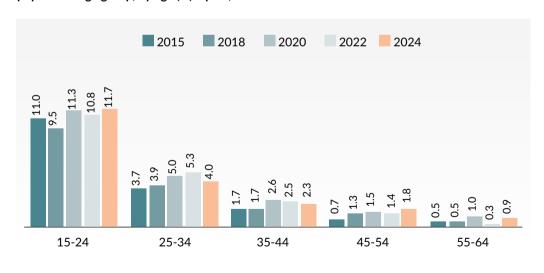
	Prevalence of possib	le problematic Internet use	: (ICUS≥28 score).
	Total	Men	Women
2015	2.9	2.8	3.1
2018	2.9	3.1	2.8
2020	3.7	3.9	3.5
2022	3.5	3.4	3.6
2024	3.7	3.6	3.7

SOURCE: OEDA Spanish Alcohol and Drugs Survey (EDADES).

By age, problematic Internet use peaks among the youngest, 11.7% among 15-24-year-olds, decreasing as users get older until it becomes somewhat residual among 45-54-year-olds (1.8%) and among 55-64-year-olds (0.9%).

In evolutionary terms, 2022 figures are exceeded among those under 25 and over 44 years of age (Chart 25).

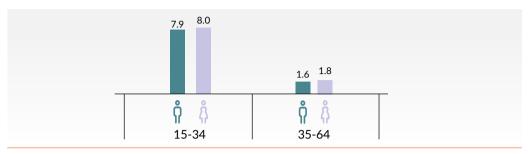
Chart 25. Prevalence of Internet users with possible <u>problematic Internet use</u> among the 15-64 population age group, by age (%). Spain, 2015-2024.



SOURCE: OEDA Spanish Alcohol and Drugs Survey (EDADES).

In both the 15-34 and 35-64 age groups, the proportion of people with possible problematic Internet use is similar between men and women (Chart 26).

Chart 26. Prevalence of possible <u>problematic Internet use</u> among the 15-64 population age group, by age and sex (%). Spain, 2024.



SOURCE: OEDA Spanish Alcohol and Drugs Survey (EDADES).

Comparing the prevalence of certain risk behaviors (binge drinking, drunkenness and cannabis use in the last 30 days) among the general population aged 15-64 years and the 15-64 population age group with possible problematic Internet use, these behaviors seem more prevalent among those who score 28 points or higher on the CIUS scale, a trend already apparent since 2015. In evolutionary terms, the prevalence of these risk behaviors shows that they are less present today than they were in previous years among those with a possible Internet use problem; to highlight is the fall in heavy alcohol consumption (drunkenness and binge drinking) (Table 37).

Table 37. Prevalence of binge drinking, drunkenness and cannabis use in the past 30 days among the population aged 15-64 and the 15-64 population age group with possible <u>problematic Internet</u> use (CIUS≥28 scale score) (%). Spain, 2015-2024.

		2015		2018		2020		2022	2024		
	15-64 Possible problematic Internet use		15-64 Possible problematic Internet use							Possible problematic Internet use	
Binge drinking	17.9	32.3	15.1	30.0	15.4	29.1	15.4	30.5	16.0	22.7	
Drunkenness	6.5	17.3	7.1	18.4	6.8	17.7	6.4	16.7	4.6	11.0	
Cannabis	2.1	17.8	2.1	16.9	2.9	6.2	2.8	7.8	2.5	6.8	

SOURCE: OEDA Survey on Alcohol and Drugs in Spain (EDADES).

ESTUDES survey results (student population aged 14-18)

In 2023, the average number of daily hours spent on recreational Internet use among students aged 14 to 18 in the last 30 days is higher on the weekend than during the week, with a higher average number of hours per day among girls in both time periods. By age, both on weekdays and on the weekend, the average number of daily Internet use hours increases with age, although it decreases among 16-17-year-olds (Table 38).

Table 38. Average number of daily hours of recreational Internet use in the last 30 days among the 14-18 population age group, by age and sex (%). Spain, 2023.

		Se						
	Total	М	W	14	15	16	17	18
Average daily hours on weekdays	5.36	5.00	5.72	5.02	5.27	5.55	5.39	5.82
Average daily hours on weekends	6.97	6.67	7.26	6.88	7.00	7.10	6.79	7.19

SOURCE: OEDA. Survey on Drug Use in Secondary Education in Spain (ESTUDES).

The prevalence of students aged 14-18 at high risk of problematic Internet use in 2023 was 20.5%, registering a 3-percentage point decrease from 2021 (Table 39).

If this indicator is analyzed by **sex**, as in previous years, it becomes clear that possible problematic Internet use is higher among women (15.3% among men and 25.9% among women) (Table 39).

Table 39. Prevalence of Internet users at high risk of possible <u>problematic Internet use</u> (CIUS≥28 score) among the student population aged 14-18, by sex (%). Spain 2014-2023.

	Total	S	ex
	Iotal	Н	M
2014	16.4	14.7	18.0
2016	21.0	18.3	23.8
2019	20.0	16.4	23.4
2021	23.5	18.4	28.8
2023	20.5	15.3	25.9

SOURCE: OEDA. Survey on Drug Use in Secondary Education in Spain (ESTUDES).

Further to an **age** analysis, the prevalence of Internet users with possible problematic use increases with age. Compared to 2021, prevalence decreases in all age groups except for 18-year-olds, which remains stable (23.3% vs. 23.6%) (Chart 27).

Chart 27. Prevalence of Internet users with possible <u>problematic Internet use</u> (CIUS≥28 score) among the student population aged 14-18, by age (%). Spain, 2014-2023.



In relation to other risk behaviors, just as for the general population (15-64 years), **intensive use** of alcohol, cannabis and daily smoking in the last 30 days is higher among students with possible problematic Internet use than among the rest of the student population (Table 40).

Table 40. Prevalence of drunkenness, binge drinking, cannabis use and daily smoking in the past 30 days among students aged 14-18 years and the student population with possible <u>problematic</u> Internet use (CIUS≥28 score) (%). Spain, 2014-2023.

	20	14	20	16		19	20	21	20	23
					Students aged 14 to 18		Students aged 14 to 18		Students aged 14 to 18	Possible problematic Internet use
Drunkenness	22.2	28.4	21.8	28.8	24.3	30.7	23.2	27.6	20.8	26.9
Binge drinking	32.2	40.4	31.7	39.3	32.3	37.9	27.9	31.5	28.2	32.2
Cannabis	18.6	22.9	18.3	21.7	19.3	23.0	14.9	16.7	15.6	18.4
Daily smoking	8.9	10.7	8.8	10.4	9.8	10.4	9.0	8.8	7.5	9.4

SOURCE: OEDA. Survey on Drug Use in Secondary Education in Spain (ESTUDES).

4.10.

Gaming.

In recent decades, the addictive potential of video games has been a widely discussed topic in the media and, in scientific literature since 1992, there are more than 1,000 published scientific articles on the topic.

This scientific debate led the fifth edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) of the American Psychiatric Association published in 2013, in section III, reserved for conditions requiring further study, to include "Internet Gaming Disorder", which only includes Internet games that do not involve betting money.

Subsequently, in 2019, WHO included gaming disorder in its 11th Revision of the International Classification of Diseases (ICD-11). The decision to include gaming disorder in ICD-11 was based on reviews of current scientific evidence and reflected a consensus amongst multidisciplinary experts from different parts of the world who participated in the technical consultation process that WHO launched as part of the ICD-11 development process.

A gaming disorder is defined, according to ICD-11, as a pattern of gaming behavior ('digital gaming' or 'gaming') characterized by impaired control over gaming, increasing the priority given to gaming over other activities to the extent that gaming takes precedence over other interests and day-to-day life, together with continued gaming despite its negative consequences.

When diagnosing a gaming disorder, the behavioral pattern must be severe enough to cause significant impairment in personal, family, social, educational, occupational or other important areas of individual functioning and must usually be evident for at least 12 months.

The International Classification of Diseases (ICD) is the basis for identifying global health trends and statistics, acting as an international standard for reporting diseases and health conditions. It is used by professionals worldwide for the diagnosis and categorization of diseases. Inclusion of a disorder in the ICD is a consideration that countries take into account when planning public health strategies and monitoring trends in disorders.

The National Strategy on Addictions 2017-2024 includes, within its field of action as a fundamental backbone of the Strategy, non-substance or behavioral addictions, with a special emphasis on gambling with money (face-to-face and online), as well as video games and other addictions promoted by new technologies.

Likewise, the Strategy indicates that so-called "non-substance addictions" or addictive behaviors that do not involve drugs (compulsive gambling, Internet, video games, screens, etc.) have recently made a grand entrance and their presence is already generating healthcare demands.

Therefore, in 2019, a gaming module was included in the framework of the Secondary School Student Survey on Drugs and Addictions. The first part of the module included general questions on prevalence and frequency of use and a second part posed questions based on the DSM-5 criteria in order to detect possible gaming disorders. Questions on eSports use as a player or spectator were also included. The main results of its analysis are itemized below.

ESTUDES survey results (student population aged 14-18)

In relation to 2023 prevalence, 83.1% of all the students report having played video games, 39.3% have played eSports and 52.5% have been eSports spectators. Evolutionarily, a significant drop-in eSports play is apparent, combined with a considerable increase in eSports viewership.

Regarding differences by **sex**, as was the case in 2019 and 2021, all three activities are much more frequent among boys than among girls. The drop-in eSports play is more pronounced for men (65.9% in 2021 and 53.2% in 2023). However, the increase in eSports viewership is more evenly spread between the sexes despite being slightly higher for girls (18.8% in 2021 and 35.6% in 2023) (Chart 28).

96.9 96.0 96.2 85 1 82,2 83.1 73.0 690 690 69.7 53.2 52.5 39.3 35.6 25.2 30.3 19.5 18.8 2019 2021 2023 2019 2021 2023 2019 2021 2023 Total ■ Video games ■ eSports eSports spectator

Chart 28. Prevalence of gaming, eSports use and viewership in the last 12 months among secondary school students aged 14-18, by sex (%). Spain, 2019-2023.

SOURCE: OEDA. Survey on Drug Use in Secondary Education in Spain (ESTUDES).

In terms of **age**, there is a negative trend as age increases in all three activities analyzed, with the sole exception of eSports players, which increases slightly from 17 to 18 years of age (34.4% and 37.4% respectively) (Chart 29).

Chart 29. Prevalence of gaming, eSports use and viewership in the last 12 months among Secondary School students aged 14-18, by age (%). Spain, 2019-2023.



SOURCE: OEDA. Survey on Drug Use in Secondary Education in Spain (ESTUDES).

When analyzing the **frequency of gaming** in 2023, weekly gaming appears to be the most common (29.8%). However, by **sex**, there are opposite trends between boys and girls. A total of 43% of boys have played video games between 1 and 4 days a week in the last 12 months, while only 16.0% of girls have done so with this frequency, and once a year seems to be the most common (31.8%) (Chart 30).

Chart 30. Frequency of gaming in the last 12 months among Secondary School students aged 14 to 18, by sex (%). Spain, 2019-2023.



SOURCE: OEDA. Survey on Drug Use in Secondary Education in Spain (ESTUDES).

By age, there is a perceived decrease in the frequency of gaming as age increases from 14 to 17 years but, at 18 years of age, the frequency of playing video games at least once a week increases again (Chart 31).

Chart 31. Frequency of gaming in the last 12 months among Secondary School students aged 14-18, by age (%). Spain, 2019-2023.



As for the number of hours spent playing video games, 48.6% of all students who have played video games in the last 12 months spend less than 2 hours a day and 6.5% spend more than 5 hours a day.

By sex, as in other measurements, boys are the ones who play a greater number of video game hours (Chart 32).

Chart 32. Time spent playing video games in the last 12 months among Secondary School students aged 14-18, by sex (%). Spain, 2019-2023.



SOURCE: OEDA. Survey on Drug Use in Secondary Education in Spain (ESTUDES).

By age, the time spent playing video games decreases slightly the older the gamer, from 14 to 17 years, with the trend changing again at age 18, with increased use of more than 5 hours a day, from 5.4% at age 17 to 7.5% at age 18 (Chart 33).

Chart 33. Time spent playing video games in the last 12 months among Secondary School students aged 14-18, by age (%). Spain, 2019-2023.



To note is that, in 2023, more than three out of four students reported not having spent money on video games in the last 12 months to improve their position (72.0%), 18.5% spent less than 50 euros and only 9.4% spent more than 50 euros. When comparing the results with those obtained in 2021, there is a slight increase in the percentage of students who report not spending money on video games (70.9% vs. 72.0%) (Chart 34).

By sex, men still spend more money on video games.

Chart 34. Percentage of Secondary School students aged 14-18 according to total money spent on video games in the last 12 months to improve their position, avatar, accessories, image, etc., by sex (%). Spain, 2019-2023.



SOURCE: OEDA. Survey on Drug Use in Secondary Education in Spain (ESTUDES).

In terms of **age**, spending money on video games decreases as age increases between 14 and 17. The opposite is true from 17 to 18 years of age, as the percentage of students who report spending money on video games increases in the 100+ euro bracket (4.7% vs. 5.6%) (Chart 35).

Chart 35. Percentage of Secondary School students aged 14-18 according to total money spent on video games in the last 12 months to improve their position, avatar, accessories, appearance, etc., by age (%). Spain, 2019-2023.



Possible gaming disorder in the 14-18 student population age group

According to the DSM-5 criteria-based scale, in 2023, 5.1% of all students aged 14-18 could have a possible gaming disorder. This is the lowest percentage recorded since 2019 (Table 41).

By **sex**, men are more likely to suffer a gaming disorder, although this percentage has decreased considerably when compared to 2021 data (11.3% vs. 7.7%) (Table 41).

When analyzing prevalence by **age**, there is a generalized decrease with respect to 2021, except in the case of 18-year-olds, which is the age with the highest possibility of a gaming disorder, similarly to the percentage of 14-year-olds (5.9% and 5.8% respectively) (Table 41).

Table 41. Prevalence of a possible gaming disorder (DSM-5 ≥5) among the 14-18 student population age group, by age and sex (%). Spain, 2019-2023.

	lotal	М	W	14	15	16	17	18
2019	6.1	10.4	1.9	7.5	6.5	5.3	5.5	5.9
2021	7.1	11.3	2.7	8.7	7.6	6.6	6.2	5.7
2023	5.1	7.7	2.5	5.8	5.1	4.9	4.6	5.9

SOURCE: OEDA Survey on Drug Use in Secondary Education in Spain (ESTUDES).

In relation to the **frequency** of gaming, it continues to be higher among students with a possible gaming disorder than among students who have played video games in the last 12 months (Table 42).

Table 42. Frequency of gaming in the last 12 months among Secondary School students aged 14-18 who have played video games and among the student population with a possible gaming disorder (DSM-5≥5) (%). Spain, 2019-2023.

	20	19	20	21	2023		
Yearly (1 to 3 days a year)	17.4	1.9	15.1	1.9	15.1	2.8	
Monthly (1 to 3 days a month)	25.3	6.9	23.3	5.0	25.8	7.0	
Weekly (1 to 4 days a week)	35.1	33.0	36.3	31.9	36.1	28.0	
Daily (5 to 7 days a week)	22.1	58.2	25.4	61.2	23.0	62.2	

SOURCE: OEDA. Survey on Drug Use in Secondary Education in Spain (ESTUDES).

When analyzing the frequency of gaming in the last 12 months by number of hours, the same is true in daily terms. Students with a possible disorder play more hours a day than other students aged 14-18 (Table 43).

A total of 13.5% of students with a possible gaming disorder spend more than 8 hours a day playing video games compared to 2.8% of students aged 14 to 18 who have played video games in the last year; this last edition has registered the maximum among those with a possible gaming disorder (Table 43).

Table 43. Frequency of gaming in the last 12 months (average number of hours spent playing video games per day) among Secondary School students aged 14-18 years and among the student population with a possible gaming disorder (DSM-5≥5) (%). Spain, 2019-2023.

	20)19	20	21	2023		
	14-18-year-old students who have played video games						
Less than 2 hours	64.0	23.4	56.9	19.5	60.2	22.2	
2 to 5 hours a day	28.9	50.5	33.3	49.3	31.8	47.6	
6 to 8 hours a day	4.7	15.6	6.7	18.8	5.2	16.8	
More than 8 hours a day	2.4	10.5	3.2	12.4	2.8	13.5	

SOURCE: OEDA. Survey on Drug Use in Secondary Education in Spain (ESTUDES).

With regard to the **money spent on video games**, it is still higher among 14-18-year-old students with a possible gaming disorder than among 14-18-year-old students who have played video games in the last year (Table 44).

When comparing the expenditure of students with a possible gaming disorder with previous years, the more than 100-euro bracket has increased (from 15.8% in 2021 to 19.1% in 2023), reflecting the highest percentage in this bracket for all the periods analyzed (Table 44).

Table 44. Percentage of Secondary School students aged 14-18 who have played video games in the last 12 months and among the student population with a possible gaming disorder (DSM-5≥5), according to total money spent on video games in the last 12 months to improve their position, avatar, accessories, appearance, etc. (%). Spain, 2019-2023.

	20:	19	20	21	2023		
Nothing	71.6	34.8	70.9	37.9	72.0	38.3	
Between 1 and 50 euros	19.2	33.4	20.1	34.1	18.5	31.3	
Between 51 and 100 euros	4.8	14.5	4.5	12.2	4.5	11.4	
More than 100 euros	4.4	17.3	4.5	15.8	4.9	19.1	

SOURCE: OEDA. Survey on Drug Use in Secondary Education in Spain (ESTUDES).

If we look at **other types of behavior** amongst 14- to 18-year-old students with a possible gaming disorder, as was the case in previous editions, the prevalence of gambling with money online, face-to-face or problematic gambling is higher among students with a possible gaming disorder than among all 14- to 18-year-old students. When comparing the prevalence of students with a possible gaming disorder with those obtained in previous years, there is a notable increase in possible problematic gambling with respect to 2021 (9.9% vs. 13.0%), although levels are somewhat lower than in 2019 (Table 45).

Table 45. Prevalence of online, face-to-face and possible problematic gaming (Lie/Bet>1) among the population of Secondary School students aged 14-18 and among the student population with a possible gaming disorder (DSM-5≥5) (%). Spain, 2019-2023.

	2019			2021			2023		
	Online betting with money last 12 months								Possible problematic gaming
Total 14-18-year-old students	10.3	22.7	4.7	9.4	17.2	3.4	10.7	17.7	4.0
Students with a possible gaming disorder	27.7	35.0	14.9	23.4	25.1	9.9	26.8	27.2	13.0

SOURCE: OEDA. Survey on Drug Use in Secondary Education in Spain (ESTUDES).

To conclude, when analyzing the **consumption of legal psychoactive substances** (cigarettes and alcohol) amongst 14-18-year-old students and students of the same age who present a possible gaming disorder, there are no major differences, as has been historically the case (Table 46).

Table 46. Prevalence of drunkenness, binge drinking and smoking in the past 30 days among the population of Secondary School students aged 14-18 years and among the student population with a possible gaming disorder (DSM-5≥5) (%). Spain, 2019-2023.

	20	19	20	21	2023		
	14-18-year-old student population						
Drunkenness	24.3	24.9	23.2	20.9	20.8	21.2	
Binge drinking	32.3	34.7	27.9	27.8	28.2	29.1	
Smoking	26.7	29.3	23.9	24.0	21.0	22.1	

SOURCE: OEDA. Survey on Drug Use in Secondary Education in Spain (ESTUDES).

4.11.

Gambling with cryptocurrencies and the stock exchange.

As a novelty, this block is included in response to a growing interest amongst public policy makers and researchers in understanding the impact that constantly evolving financial technologies can have on consumer population habits and mental health.

EDADES survey results (Spanish population aged 15 to 64)

Cryptocurrencies

In 2024, 0.4% of the Spanish population aged 15 to 64 will admit to having gambled with cryptocurrencies in the last 12 months. Despite being very rare in the general population, gambling with cryptocurrencies is slightly more common among men (0.5%) than among women (0.2%), and among those under 35 (0.5%) than among those over 35 (0.3%).

Table 47. Prevalence of gambling with cryptocurrencies in the last 12 months among the total population aged 15-64, by sex and age (%). Spain, 2024.

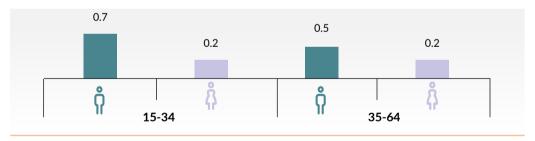
	Prevalence of gambling with cryptocurrencies in the last 12 months							
	Total	М	W	15-34	35-64			
2024	0.4	0.5	0.2	0.5	0.3			

Note: these data should be interpreted with caution given the small number of cases.

SOURCE: OEDA Survey on Alcohol and Drugs in Spain (EDADES).

By sex and age, among women gambling with cryptocurrencies is equally widespread among those under and over 35 (0.2%), while men register a slightly higher rate amongst the youngest gamblers (Chart 36).

Chart 36. Prevalence of gambling with cryptocurrencies in the last 12 months among the total population aged 15-64, by age and sex (%). Spain, 2024.



Note: these data should be interpreted with caution given the small number of cases.

SOURCE: OEDA Survey on Alcohol and Drugs in Spain (EDADES.

Stock exchange

Stock market gambling is still a very residual habit among the general population in Spain, as evidenced by the fact that only 0.3% of the population aged 15 to 64 reported having gambled this past year. This figure has remained unchanged since 2020, when it experienced a slight increase (Table 48).

By **sex**, there are more men than women who have traded, either online or face-to-face, although it is not common practice for either group. In terms of evolution, both men and women maintain the prevalence registered in 2022 (Table 48).

Table 48. Prevalence of online and/or face-to-face stock exchange gambling in the last 12 months among the total population aged 15-64, by sex (%). Spain, 2018-2024.

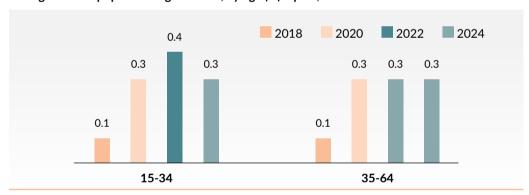
	Prevalence of gambling on the stock exchange in the last 12 months						
	Total						
	iotai	Men	Women				
2018	0.1	0.2	0				
2020	0.3	0.4	0.2				
2022	0.3	0.5	0.2				
2024	0.3	0.5	0.2				

Note: these data should be interpreted with caution given the small number of cases.

SOURCE: OEDA Survey on Alcohol and Drugs in Spain (EDADES).

Taking 35 years of age as the cut-off point, it is clear that among both 15-34-year-olds and 35-64-year-olds, the prevalence of gambling on the stock exchange remains at 0.3% in 2024 (Chart 37). In view of these results, it appears that sex has a greater impact on this habit than age.

Chart 37. Prevalence of online and/or face-to-face stock exchange gambling in the last 12 months among the total population aged 15-64, by age (%). Spain, 2018-2024.

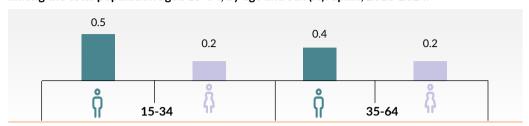


Note: these data should be interpreted with caution given the small number of cases.

SOURCE: OEDA Survey on Alcohol and Drugs in Spain (EDADES).

If sex and age are analyzed jointly, in both the 15-34 and 35-64 groups, the proportion of men who have gambled on the stock exchange in the last year is higher than that of women. For women, prevalence is 0.2% in both layers, while among men it rises to 0.5% in the 15-34 age group and remains at 0.4% in the 35+ age group (Chart 38).

Chart 38. Prevalence of online and/or face-to-face stock exchange gambling in the last 12 months among the total population aged 15-64, by age and sex (%). Spain, 2018-2024.



Note: these data should be interpreted with caution given the small number of cases.

SOURCE: OEDA Survey on Alcohol and Drugs in Spain (EDADES).

4.12.

Use of pornography.

The term pornography refers to any literary, artistic, or cinematographic material that explicitly displays genitalia and sexual actions, which is primarily intended to arouse the viewer in a sexual manner.

Currently, access to pornography has changed drastically due to easy access through the Internet and the emergence of new technologies²²,²³. Adolescents are initiated into this practice at a very early age and its consumption is increasing as explained by the "triple A" theory: easy access to content via the Internet (accessibility), the low or zero cost of this material (affordability) and Internet anonymity (anonymity)²⁴. Moreover, normalized use of this type of content has promoted new sexual practices²⁵, especially among adolescents, such as "sexting", i.e. "receiving or sending sexually explicit text messages, images or videos via mobile phones or social networks" or "revenge porn", which involves an exchange of sexually explicit content as revenge after a break-up.

Various research papers have indicated the impact of Internet-distributed pornography on sexual behavior and sex relations (Peter and Valkenburg, 2016)²⁶.

²² Peter J & Valkenburg P, (2016). Adolescents and pornography: a review of 20 years of research. The Journal of Sex Research, 53(4-5), 509-531.

²³ Ballester L, Orte C, & Gordaliza Y, (2019). New pornography and changes in the interpersonal relationships of adolescents and young people. Editorial Octaedro.

²⁴ Cooper, A. (1998). Sexuality and the Internet: Surfing into the new millennium. CyberPsychology & Behavior, 1(2), 187-193. https://doi.org/10.1089/cpb.1998.1.187.

²⁵ Villena Moya, A. Mestre-Bach, G. & Chicalana Actis, C. (2020). Use and problematic use of pornography in adolescents: an unresolved debate.

²⁶ Peter, J., & Valkenburg, Patti M. (2008). Adolescents' exposure to sexually explicit Internet material, sexual uncertainty, and attitudes toward uncommitted sexual exploration: Is there a link? Communication Research, 35, 569-601

Familiarity with risky practices, decontextualized sexuality, immediacy, simplification of interpersonal relationships, as well as the link to new forms of prostitution, all make pornography a particularly relevant phenomenon in the comprehension of interpersonal relationships (Döring, 2009)²⁷. Research indicates that the adolescent population is at risk for the harmful effects of pornography use, mainly due to their current developmental stage²⁸.

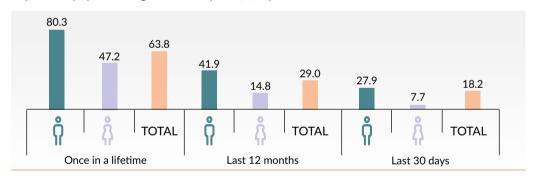
Therefore, in order to explore the prevalence of pornography use among young people, a module on pornography use was introduced in the 2023 ESTUDES survey. Likewise, in 2024, a series of questions were added to the EDADES questionnaire to discover the level of pornography use amongst the Spanish population aged 15 to 64.

EDADES survey results (Spanish population aged 15 to 64)

A total of 63.8% of the Spanish population aged 15-64 admits to having consumed pornography at some time in their lives, with this proportion falling to 29.0% in the last 12 months and to 18.2% in the 30 days prior to the survey (Chart 39).

By sex, the level of consumption is higher among men irrespective of the time period analyzed (Chart 39).

Chart 39. Prevalence of pornography use once in a lifetime, in the past 12 months and past 30 days in the population aged 15-64, by sex (%). Spain, 2024.



SOURCE: OEDA Survey on Alcohol and Drugs in Spain (EDADES).

Analysis of the prevalence of pornography use by sex and age shows that in the most recent time periods (in the last 12 months and last 30 days), consumption decreases the older the user, both for men and women, with the highest prevalence in the 15-24 age group. In the once in a lifetime

 $^{^{27}} https://www.nicola-doering.de/wp-content/uploads/2014/08/D\%C3\%B6ring-2009-The-Internet\%E2\%80\%99s-impact-on-sexuality.pdf.$

²⁸ Peter J & Valkenburg P, (2016). Adolescents and pornography: a review of 20 years of research. The Journal of Sex Research, 53(4-5), 509-531.

bracket, however, the highest prevalence is registered in the 35-44 age group for men (84.5%) and in the 25-34 age group for women (53.1%).

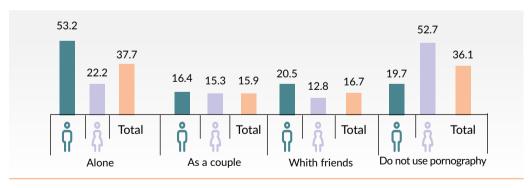
Once in a lifetime 13-44 25-34

Chart 40. Prevalence of pornography use in the population aged 15-64, by age and sex (%). Spain, 2024.

SOURCE: OEDA Survey on Alcohol and Drugs in Spain (EDADES).

As can be seen in Chart 41, among the total population aged 15-64, the most prevalent practice in pornography consumption is using it alone (as opposed to along with a partner or friends). This same pattern is also observed if we analyze by sex, although among women the percentage of those who do not use pornography is much higher (52.7% among women compared to 19.7% among men).

Chart 41. Prevalence of pornography use according to the user's company, in the 15-64-year-old population, by sex (%). Spain, 2024.



SOURCE: OEDA Survey on Alcohol and Drugs in Spain (EDADES).

ESTUDES survey results (student population aged 14-18)

The results show that 66.8% of students admit to having used pornography at least once in their lifetime, 58.6% in the last 12 months and 44.5% in the last 30 days (Table 49).

When differentiated by **sex**, there are large differences, with much higher pornography use among men than women for the three time periods analyzed. The greatest differences are registered in the last month (68.4% of male students vs. 19.3% of female students) (Table 49).

By age, there is a direct relationship with pornography use, as the higher the age, the higher the prevalence of pornography use in the three periods considered (Table 49). To note is that 37.1% of 14-year-olds have seen pornography in the last month.

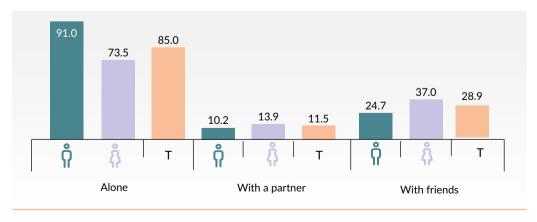
Table 49. Prevalence of pornography use among the 14-18 student population, by age and sex (%). Spain, 2023.

	Total	Sex			Age			
	IUlai	М	W	14	15	16	17	18
Once in a lifetime	66.8	86.3	46.7	57.1	63.4	69.3	72.8	74.6
Last 12 months	58.6	82.3	33.7	50.4	55.7	61.1	63.8	64.0
Last 30 days	44.5	68.4	19.3	37.1	41.1	47.2	49.1	49.8

SOURCE: OEDA. Survey on Drug Use in Secondary Education in Spain (ESTUDES).

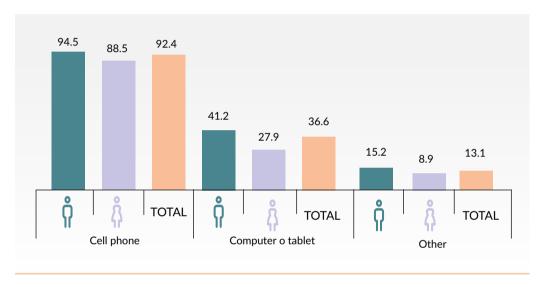
In terms of the **company with which pornography** consumption takes place, 85% of all 14-18-year-old students consume it alone, increasing to 91% in the case of men. However, women have a higher rate of viewing with both partners and friends, with a notable difference of 12.3 percentage points between the two sexes (37.0% of women and 24.7% of men) when viewing with friends (Chart 42).

Chart 42. Prevalence of pornography use according to the user's company, among Secondary School students aged 14-18 who have used pornography, by sex (%). Spain, 2023.



In relation to the pornography viewing device, to note is that most pornography is viewed from cell phones (92.4%), followed by a computer or tablet (36.6%). When differentiated by **sex**, the greatest discrepancy is found in computer or tablet use, where 41.1% of men view pornography in this format, dropping to 27.9% for women (Chart 43).

Chart 43. Prevalence of pornography use by device used among Secondary School students aged 14-18 who have used pornography, by sex (%). Spain, 2023.



SOURCE: OEDA. Survey on Drug Use in Secondary Education in Spain (ESTUDES).

Finally, when comparing the **consumption of legal psychoactive substances** (tobacco and alcohol) in the total student population aged 14-18 against the student population who has used pornography in the last 30 days in the same age group, there is greater prevalence in the case of regular pornography users (Table 50).

Table 50. Prevalence of drunkenness, binge drinking and smoking in the last 30 days among the Secondary School student population aged 14-18 and among the student population who has used pornography in the last 30 days. Spain, 2023.

		2023					
	In the 14-18 student population age group	In the student population who has used pornography in the last 30 days					
Drunkenness	20.8	25.8					
Binge drinking	28.2	34.8					
Smoking	21.0	25.3					

4.13.

Admissions to treatment for behavioral/non-substance addictions indicator.

In 2020, the indicator on admissions to treatment for behavioral addictions started up, seeking to complement survey data with information on the treatment of people diagnosed with behavioral or non-substance addictions. The reporting protocol for this indicator is available on the website of the National Plan on Drugs (PNSD)²⁹.

The participation of Autonomous Communities and Cities is essential for the indicator's operation, as they constitute the data source. Indicator data are provided to the Spanish Observatory on Drugs and Addictions (OEDA), in charge of the necessary analyses to obtain information on the number and characteristics of persons admitted to treatment for behavioral or non-substance addictions.

This information, analyzed and interpreted together with other OEDA epidemiological information, displays the current situation of addictions in Spain with useful information for policy design, implementation and evaluation.

Methodology

The Admissions to Treatment for behavioral or non-substance addictions indicator is a register that collects individualized data on admissions to outpatient treatment for behavioral addictions in an Autonomous Community/City in a given year. After a pilot study in 2020, in which information was collected from part of Spain's Autonomous Communities, the indicator began to collect data from all Autonomous Communities and Cities in 2021. A detailed protocol is available describing the variables to be included, the behavioral/non-substance addictions collected and any inclusion and exclusion criteria. This information is available on the website of the National Plan on Drugs (PNSD)³⁰.

Results

In 2022, 4,670 admissions to treatment for behavioral addictions were reported. Of these, 4,031 admissions were male (86.3%) and 639 female (13.7%) (Table 51). Female weight is lower than in admissions to treatment for psychoactive substances, both legal and illegal.

These data represent an increase with respect to the previous year (Table 51), explained by a greater exhaustiveness in indicator reporting. To note is that although indicator coverage is nationwide, work is underway to incorporate into the reporting network all centers that deal with this type of addiction which, in some Autonomous Communities, is not covered by the public health system. As the process is progressive, more notifications are expected in the coming years.

²⁹ https://pnsd.sanidad.gob.es/profesionales/sistemasInformacion/sistemaInformacion/indicadores.htm.

³⁰ https://pnsd.sanidad.gob.es/profesionales/sistemasInformacion/sistemaInformacion/indicadores.htm

Table 51. Number of admissions to treatment, by sex. Spain, 2021-2022.

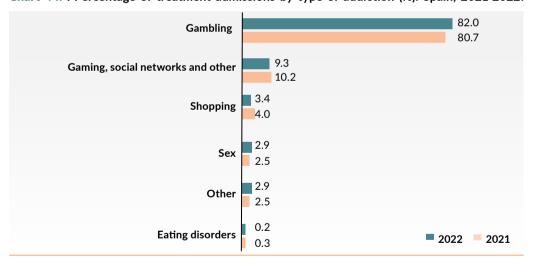
	Total		Sex
	Total	М	W
2021	4052	3520	528
2022	4670	4031	639

SOURCE: OEDA. Admissions to treatment for behavioral addictions indicator.

A total of 82.0% of admissions to treatment in 2022 were for gambling addiction, 9.3% for compulsive use of the Internet, mobile or electronic devices, social networks or video games, 3.4% for shopping addiction and 2.9% for sex-related addictions. These figures are similar to last year's (Chart 44).

By sex (Chart 45), although the behavioral addiction that generates the most admissions in both cases is gambling, in the case of men it accounts for 85.6% while in women it drops to 58.8%. Addictions related to shopping (16.4%) as well as those related to use of the Internet, cell phones, electronic devices or social networks as a whole (15.6%) and eating disorders account for a greater weight in women; the weight of addictions related to sex and those specific to gaming is greater in men.

Chart 44. PPercentage of treatment admissions by type of addiction (%). Spain, 2021-2022.



SOURCE: OEDA. Admissions to treatment for behavioral addictions indicator.

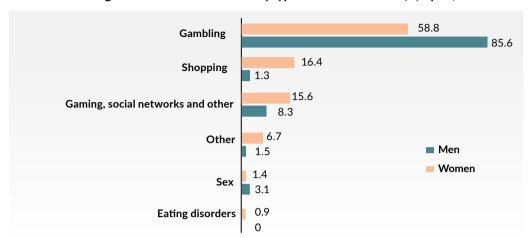


Chart 45. Percentage of admissions to treatment by type of addiction and sex (%), Spain, 2022.

SOURCE: OEDA. Indicator of those admitted to treatment for behavioral addictions.

In socio-demographic profile terms (Table 52), 74.9% are admissions to treatment for behavioral addictions in people seeking treatment for the first time. The average age of those admitted to treatment is 37.1 years, with many differences arising by behavioral addiction that generates the admission. The majority of those admitted for these behavioral addictions have higher education (Baccalaureate, higher level training or university degrees) (36.7%), are employed (56.5%), seek treatment voluntarily (38.0%) or prompted by family or friends (30.5%). They live with their family (43.0%), in stable accommodation (houses, flats, etc... 95.8%) and 11.2% are foreigners. There are no notable differences with respect to 2021.

Table 52. Socio-demographic characteristics of those admitted to treatment for behavioral addictions. Spain, 2021-2022

				2021*					2022		
		Total	Se	ex		ior ment					ior ment
			М	W	YES	NO		М	W	YES	NO
Total		4,052	3,520	528	1,049	2,782	4,670	4,031	639	1,106	3,303
Prior	Yes	27.4	27.7	24.8	100.0	0.0	25.1	25.9	19.9	100.0	0.0
treatment	No	72.6	72.3	75.2	0.0	100.0	74.9	74.1	80.1	0.0	100.0
Sex	Men	87.0	100.0	0.0	88.4	86.8	86.3	100.0	0.0	89.3	85.6
	Women	13.0	0.0	100.0	11.6	13.2	13.7	0.0	100.0	10.7	14.4
Age		36.6	36.0	40.7	38.6	35.8	37.1	36.3	42.5	40.0	36.3
	Uneducated	8.7	8.5	10.2	8.1	8.5	9.7	9.4	11.3	10.5	9.5
Highest level	Primary education	28.2	27.6	32.2	27.4	28.8	27.5	27.2	29.5	27.7	27.7
of education	Secondary education	52.8	53.9	44.9	55.8	51.8	26.2	26.8	22.0	26.1	26.0
ı	Higher education (ISCED 5 to 8)	10.3	10.0	12.7	8.6	10.9	36.7	36.6	37.3	35.7	36.8

				2021*					2022		
		Total	Se	ex		ior ment		S	ex	Pr treat	rior tment
			М	W	YES	NO		М	W	YES	NO
	Employed	53.2	55.6	36.9	54.1	53.2	56.5	58.6	42.9	58.7	56.2
Employment	Unemployed, never worked before	2.9	2.8	3.5	2.4	3.0	2.7	2.7	2.6	2.7	2.6
status	Unemployed, having worked before	17.0 26.9	16.7	19.1	18.0	16.6	15.1	15.2	14.4	17.4	14.6
	Other		24.8	40.4	25.4	27.1	25.7	23.5	40.1	21.2	26.7
	Other drug dependence treatment service	2.2	2.1	2.8	3.3	1.8	2.8	2.8	2.4	3.6	2.6
	General practitioner, primary care physician	11.9	12.3	9.6	10.4	12.5	13.2	13.3	12.6	12.6	13.2
	Hospital, other health services	5.2	4.5	9.8	4.7	5.3	4.7	4.6	5.8	4.1	4.8
	Social services	3.0	2.8	4.8	1.9	3.4	2.7	2.3	5.5	2.5	2.9
Main source of reference	Prison, reform or internment center for minors	1.1	1.1	0.7	1.8	0.8	1.4	1.6	0.0	1.8	1.3
	Legal or police services	1.0	1.0	0.7	1.1	0.9	0.6	0.6	1.0	0.7	0.5
	Company or employer	0.2	0.2	0.2	0.4	0.1	0.3	0.3	0.3	0.1	0.3
	Family or friends	31.2	32.0	25.9	21.3	34.6	30.5	31.2	25.4	24.2	32.5
	Own initiative	36.7	36.7	37.0	49.9	32.6	38.0	37.9	38.7	45.8	36.2
	Educational services	1.3	1.0	3.3	0.2	1.3	0.9	0.8	1.1	0.0	1.0
	Other: Specify	6.2	6.3	5.4	5.1	6.6	4.9	4.5	6.9	4.6	4.6
	Single	12.5	12.0	15.7	14.8	11.8	13.0	12.2	18.2	16.6	12.0
	With a partner only	14.2	14.4	12.8	13.8	14.3	15.7	15.7	15.7	15.6	15.7
	With children only	2.9	1.9	9.6	2.3	3.1	2.1	1.2	8.3	1.7	2.2
	With a partner and children	20.1	20.0	20.4	21.0	19.9	19.8	19.8	19.3	19.5	20.0
Living	With parents or parental family	42.9	44.3	33.6	39.1	44.2	43.0	44.6	32.4	38.5	44.2
situation	With friends	2.8	2.8	2.4	3.5	2.4	2.3	2.3	2.8	2.9	2.2
	Detainee: prison or social insertion center	1.2	1.2	0.8	1.6	1.0	1.2	1.3	0.3	1.8	1.0
	In non-detainee institutions	1.6	1.5	2.2	2.4	1.4	1.7	1.7	1.6	2.3	1.6
	Other: specify	2.0	1.9	2.4	1.6	1.9	1.2	1.2	1.5	1.2	1.2
	Own house, flat, apartment	95.5	95.3	96.6	93.5	96.2	95.8	95.7	96.8	94.0	96.3
	Prison, reform or internment center for minors	1.4	1.5	0.6	1.6	1.3	1.4	1.6	0.5	2.2	1.3
Housing	Other institutions	1.5	1.4	1.6	2.6	1.2	1.5	1.6	1.3	2.0	1.3
Housing	Guesthouse, hostel, hotel	0.3	0.2	0.8	0.6	0.2	0.3	0.3	0.3	0.5	0.2
	Unstable/precarious accommodation	1.0	1.2	0.2	1.3	1.0	0.9	0.9	1.0	1.1	0.8
	Other	0.3	0.3	0.2	0.4	0.3	0.1	0.1	0.2	0.2	0.0
Foreign		10.0	9.9	10.5	7.4	10.9	11.2	11.3	10.5	8.0	11.8

^{*}Revised 2021 data.

SOURCE: OEDA. Indicator Admissions to treatment for behavioral addictions.

With regard to **social or health issues**, 21.8% have a dual pathology (a mental health diagnosis) other than the addiction for which they were admitted to treatment. This percentage is higher among women (33.3%) than among men (20.1%), as well as among people who had received prior treatment. In addition, different **consequences associated with behavioral addiction** are reported, mainly referring to family issues (26.6%), financial hardship (25.1%) and health problems (16.9%). These consequences also vary according to the behavioral addiction behind each admission, but do not vary by sex.

Results by type of behavioral addiction

As discussed above and similarly to the case of substance treatment admissions, patient profile varies according to the behavioral addiction behind each admission.

Table 53. Socio-demographic characteristics of the total number of people admitted to treatment for behavioral/non-substance addictions, by type of addiction behind each admission (absolute number and %). Spain, 2021-2022.

				20	21*					202	2		
		Gambling	Eating disorders	Sex	Shopping	Gaming, social networks, other	Other behavioral addictions	Gambling	Eating disorders	Sex	Shopping	Gaming, social networks, other	Other behavioral addictions
Total	Yes	3269	14	102	162	412	93	3228	8	135	158	436	105
Prior treatment	Yes No	28.4 71.6		31.3 68.7	18.5 81.5	18.6 81.4	37.8 62.2	27.3 72.7	33.3 66.7	20.0	15.6 84.4	10.6 89.4	
Sex	Men	91.6		96.1		78.8		90.2	25.0	93.3	33.5	77.1	59.0
A = -	Women	8.4	78.6	3.9	64.8	21.2		9.8	75.0	6.7	_	22.9	
Age		38.0	37.4		45.1	21.0	38.2	38.5	34.1	40.0		20.5	
Age of onset	Handrook d	26.3		25.4	34.0		25.1	26.2	17.3		35.8		
	Uneducated	8.7	7.7	4.0	5.6	12.0	3.5	9.8	0.0	4.6	11.1		14.0
Highest level of education	Primary education	27.5		21.0	19.4	29.6		26.6	33.3	16.9	_	41.7	
	Secondary education	54.3		49.0		42.0		27.0	16.7		22.2		
	Higher education (ISCED 5 to 8)	9.5		26.0	23.1	6.4	16.3	36.7	50.0	59.2		25.5	
Employment	Employed	58.6	15.4	59.8	53.4	12.0	44.4	62.3	66.7	58.6	48.4	10.7	41.8
	Unemployed, never worked before	2.5	30.8	4.9	2.5	4.9	4.4	2.0	16.7	2.3	1.3	6.5	16.3
status	Unemployed, having worked before	18.1	30.8	20.6	13.0	8.3	20.0	15.6	0.0	21.8	15.0	8.1	19.4
	Other		23.1	14.7	31.1	74.8	31.1	20.2	16.7	17.3	35.3	74.7	22.4
Foreign		10.0	14.3	14.9	6.8	9.3	11.0	11.7	12.5	8.9	5.1	8.0	16.2
	Other drug dependence treatment service	2.4	0.0	1.1	4.2	0.8	1.3	3.1	0.0	2.3	0.7	1.4	2.2
	General practitioner, primary care physician	13.0	30.0	12.0	4.9	6.1	10.7	14.1	50.0	15.0	13.7	5.2	8.6
	Hospital, other health services	4.3	10.0	13.0	12.7	5.8	12.0	4.3	0.0	8.3	13.7	3.6	7.5
	Social services	2.4	10.0	2.2	2.1	7.8	6.7	2.2	0.0	0.0	4.6	5.2	14.0
Main source	Penitentiary, reform or internment center for minors	1.0	20.0	2.2	0.0	1.1	1.3	1.3	0.0	3.0	0.0	0.9	7.5
of reference	Legal or police services	0.7	0.0	1.1	0.7	2.8	2.7	0.4	0.0	0.0	0.0	1.2	9.7
	Company or employer	0.2	0.0	0.0	0.0	0.0	0.0	0.3	0.0	0.0	0.0	0.5	0.0
	Family or friends	30.1	0.0	15.2	20.4	53.2	16.0	29.2	33.3	14.3	16.3	54.5	17.2
	Own initiative	38.6	20.0	51.1	45.8	12.7	46.7	40.6	16.7	48.9	39.2	14.7	24.7
	Educational services	0.5	0.0	1.1	0.7	8.0	0.0	0.3	0.0	0.0	0.0	6.2	2.2
	Other. Specify	6.8	10.0	1.1	8.5	1.7	2.7	4.3	0.0	8.3	11.8	6.7	6.5

				20	21*					202	2		
		Gambling	Eating disor- ders	Sex	Shopping	Gaming, social networks, other	Other behavioral addictions	Gambling	Eating disor- ders	Sex	Shopping	Gaming, social networks, other	Other behavioral addictions
	Single	13.1	15.4	15.7	17.7	3.4	17.8	13.6	33.3	19.5	22.2	2.3	13.3
	With a partner only	15.6	15.4	12.7	15.2	3.6	11.0	17.1	0.0	15.8	17.0	2.6	19.4
	With children only	2.9	7.7	4.9	6.3	0.0	4.1	1.8	0.0	8.0	11.8	0.9	6.1
	With a partner and children	21.6	23.1	19.6	29.7	4.9	15.1	21.2	16.7	26.3	24.2	4.9	13.3
Living	With parents or parental family	38.9	23.1	40.2	25.9	82.8	42.5	39.6	33.3	28.6	22.2	85.6	35.7
situation	With friends	3.0	0.0	3.9	1.3	8.0	5.5	2.4	0.0	6.0	1.3	1.2	2.0
	Detainee: penitentiary or social inclusion center	1.2	15.4	2.0	0.0	0.8	1.4	1.2	0.0	1.5	0.7	0.0	6.1
	In non-detainee institutions	1.7	0.0	0.0	1.3	1.8	0.0	1.8	0.0	1.5	0.0	1.6	3.1
	Other: specify	2.0	0.0	1.0	2.5	1.8	2.7	1.3	16.7	.0	0.7	0.9	1.0
N°. of children		1.4	0.7	0.7	0.9	0.1	0.7	0.7	0.7	0.8	1.1	0.1	0.9
	Own house, flat, apartment	95.3	84.6	95.1	97.5	96.6	97.4	95.7	100.0	94.7	99.4	97.7	89.9
	Prison, reform or internment center for minors	1.4	15.4	2.0	0.0	.8	2.6	1.4	0.0	3.0	0.6	0.5	7.1
Housing status	Other institutions	1.5	0.0	0.0	1.9	1.8	0.0	1.6	0.0	2.3	0.0	1.4	2.0
	Guesthouse, hostel, hotel	0.4	0.0	0.0	0.6	0.0	0.0	0.3	0.0	0.0	0.0	0.0	1.0
	Unstable/precarious accommodation	1.2	0.0	1.0	0.0	0.5	0.0	1.0	0.0	0.0	0.0	0.5	0.0
	Other	0.3	0.0	2.0	0.0	0.3	0.0	0.1	0.0	0.0	0.0	0.0	0.0
	Problems at work	8.6	14.3	10.2	5.2	24.6	11.7	8.9	20.0	11.1	5.3	29.0	7.0
	Family issues	27.5	28.6	24.0	27.6	34.9	28.7	26.5	20.0	24.4	30.0	27.2	27.0
	Losing a job	2.1	0.0	3.6	1.4	0.9	1.1	2.3	20.0	2.1	2.0	1.3	3.5
	Loss of family relationships (divorce, separation, loss of custody)	7.1	0.0	6.6	5.6	4.9	7.4	6.3	0.0	9.4	4.3	5.5	7.8
Consequences	Health problems (headaches, high blood pressure, discomfort, nervousness, anxiety, insomnia, etc.).	16.0	42.9	23.4	19.6	13.0	26.6	16.8	20.0	26.1	20.0	12.0	27.8
	Financial hardship	28.7	0.0	11.4	32.5	3.3	6.4	28.1	0.0	11.5	29.0	2.9	10.4
	Legal problems	2.6	0.0	4.2	1.4	2.0	1.1	3.0	0.0	2.6	1.3	2.6	5.2
	Lack of self-care	3.6	14.3	10.2	2.4	9.9	6.4	3.9	20.0	3.8	5.7	8.0	5.2
	Loss of significant relationships (outside the family)	3.9	0.0	6.6	4.2	6.6	10.6	4.3	0.0	9.0	2.3	11.6	6.1
Dual pathology		21.2	-	27.6	40.2	28.4	-	20.2	-	24.2	47.8	26.5	-

^{*}Revised 2021 data.

SOURCE: OEDA. Indicator Admissions to treatment for behavioral addictions.

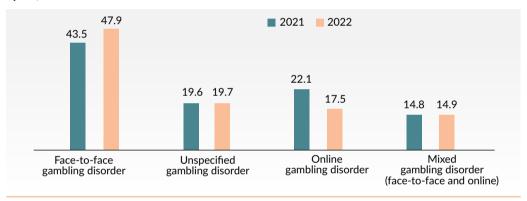
Admissions for gambling addiction

In 2022, 3,228 admissions for gambling were reported, 72.7% of which were first-time admissions for this addiction. The patient profile is similar to that obtained in 2021, i.e. male (90.2%), aged 38.5 years, with higher education (36.7%), who is employed (62.3%), is acting on his own initiative (40.6%) or on advice from family or friends (29.2%), lives with his parental family or with his own family (partner and/or children) (79.7%) and in his own home (95.7%) (Table 53).

The age of onset of behavioral addiction is 26.2 years. Of those admitted, 20.2% have a dual pathology with the following main consequences associated with this addiction: financial hardship (28.1%), family issues (26.5%), and health problems such as headaches, high blood pressure, discomfort, nervousness, anxiety, insomnia... (16.8%) (Table 53).

With regard to the type of access to gambling addiction, 47.9% refer to face-to-face gambling, 17.5% to online gambling and 14.9% to mixed gambling; 19.7% of those admitted for their gambling addiction do not specify the type of access. No differences are detected in the mode of access by sex. Compared to 2021, there is greater weight in face-to-face gambling, mainly at the expense of online gambling (Chart 46).

Chart 46. Percentage of those admitted to treatment for gambling addiction by modality (%). Spain, 2021-2022.



SOURCE: OEDA, Behavioral Addiction Treatment Admissions indicator.

With regard to type of gambling according to the form of access, among those admitted for face-to-face gambling, the most common types of gambling are slot machines, both in food & drink establishments (50.5%) and in arcades (28.9%). Among those admitted to treatment for online gambling, the most common types of games are sports betting, both live and deferred (55.2%), and roulette, Black Jack and other casino games (26.8%).

In the case of those admitted to treatment for mixed gambling (players who gamble both online and face-to-face), 44.8% play roulette, Black Jack and other casino games, 26.7% make sports bets (deferred or live), and 24.2% play slot machines in arcades (Table 54).

Table 54. Prevalence of type of gambling by mode of access (%). Spain, 2022.

	Conventional lottery	Active lottery (primitiva, bonoloto, Eurojackpot)	Instant lotteries (scratch cards)	Pools	Sports betting*	Slot machines in food & drink establishments, slot machines, gambling machines, slots	Slot machines in arcades, slots	Poker	Other card games, with bets	Roulette, Black Jack and other casino games	Bingo	Stock exchange	Competition with money (media)	E-sports or electronic sports betting	Other gambling (with money) or bets
Presencial	5.8	6.0	4.6	2.5	39.1	50.5	28.9	3.5	0.8	21.5	5.4	0.5	0.0	0.9	2.1
Online	1.4	2.7	0.9	1.3	55.2	11.9	18.1	9.3	0.8	26.8	4.1	3.2	0.0	3.5	7.4
Mixto	2.2	3.7	2.4	1.6	26.7	20.2	24.2	9.6	0.6	44.8	3.7	1.0	0.0	2.2	2.9

^{*}Live or deferred.

SOURCE: OEDA, Behavioral Addiction Treatment Admissions indicator.

A total of 42.9% of those admitted for gambling are registered in the general register of gambling prohibitions, and 31.1% are now gambling again. By type of access, there are fewer registrations at the general register of prohibitions among those admitted to treatment for face-to-face gambling (38.2%) than among those admitted for online gambling (52.3%).

Depending on the type of access, there are changes in the maximum bet placed in a day, which is higher among those who gamble online (\in 2,606.5) than among those who gamble face-to-face (\in 1,269.8); those who gamble in both formats (\in 2,317) fall within the mid-range. With reference to estimated debt at the start of treatment, those with an addiction to online gambling have the highest debt (\in 26,546.7), followed by those with a face-to-face gambling addiction (\in 15,598.1); the lowest debt is held by those with a mixed gambling addiction (\in 12,031.7). Women in general have lower maximum bets, but higher debts.

Chart 47. Maximum daily bet and estimated debt in those admitted to treatment for gambling addiction according to modality (average in euros). Spain, 2022.

SOURCE: OEDA, Behavioral Addiction Treatment Admissions indicator.

Admissions for compulsive use of the Internet, mobile or electronic devices, social networks or video games

This category includes admissions to treatment for compulsive gaming, social networking, Internet, cell phones or other devices. In 2022, 436 admissions were reported in this category. The majority of these were first-time treatment admissions (89.4%). Of these, 22.9% were women, including the youngest patients, 20.5 years old on average. Most of them have primary or secondary education and are not employed, either because they are receiving unemployment benefits or are in other situations, e.g. studying. They seek treatment encouraged by family or friends (54.5%) and live with their parents or parental family (85.6%) in the family home (97.7%). The age of onset of this behavioral addiction is also the youngest, 16.5 years of age. Dual pathology is present in 26.5% and the main consequences reported are problems at work/studies (29.0%), family issues (27.2%), health problems (12.0%) and loss of significant relationships (11.6%) (Table 53).

Admissions for compulsive shopping

In 2022, 158 admissions to treatment for a shopping addiction were reported. Due to the number of cases, some socio-demographic variables are unstable compared to 2021; a longer evolutionary period would be necessary for adequate profile assessment. In 2022, 84.4% were first-time admissions to treatment. This addiction has a higher percentage of women than men (66.5% women). The average age at which treatment is sought is the highest of all addictions, 46.8 years, with behavioral addiction starting at 35.8 years of age.

Most of them have higher education (44.4%) and are employed (48.4%). A total of 5.1% of those admitted are foreigners. They seek help voluntarily (39.2%), are living with their parental family of have a family of their own (75.2%), at the family home (99.4%) (Table 53).

Of these, 32.3% reported shopping in person, 34.2% shopped both online and in person, indistinctly, 12.0% only shopped online and 21.5% did not specify. A total of 47.8% have a dual pathology (mental health problems). In addition, they reported family issues (30.0%), financial hardship (29.0%), and health problems (20.0%) such as anxiety, insomnia, headaches, etc...

Admissions for sex addiction

In 2022, 135 admissions to treatment for sex addiction were reported, most of whom were male (93.3%), 40.0 years old on average, whose problem began when they were 26.4 years old. These patients have completed higher education, are employed and live with their parental family or have a family of their own.

A total of 24.2% had a dual pathology and the main consequences associated with their addiction were health problems: headaches, high blood pressure, discomfort, nervousness, anxiety, insomnia... (26.1%) and family issues (24.4%) (Table 53).

Behavioral addiction and associated psychoactive substance use

In 2022, 1,370 people admitted to treatment for behavioral addictions used a psychoactive substance in the 30 days prior to admission. Of these, 1,248 (91.1%) reported use of a substance associated with their main behavioral addiction (multiple consumption), which represents 26.7% of all those admitted to treatment (n=4,670). This pattern of addictive behaviors is analogous to the pattern of multiple consumption in the case of those admitted to treatment for psychoactive substances, and is more often associated with men (28.4%) than women (15.9%).

Table 55. Number and percentage of those admitted to treatment for a behavioral addiction, presenting multiple consumption or drug use. Spain, 2021-2022.

		2021	2022
Use of a psychoactive substance in the last 30 days	N	1086	1370
Ose of a psychoactive substance in the last 50 days	(%)	26.8	29.3
Multiple consumption (substance not associated	N	346	302
with the main behavioral addiction)	(%)	31.8	22.0
Multiple drug use (substance associated with the main	N	841	1248
behavioral addiction)	(%)	77.4	91.1

SOURCE: OEDA. Behavioral Addiction Treatment Admissions indicator.

The profile of multiple consumers admitted³¹ indicates certain differences compared to those who are not multiple consumers. Multiple consumers tend to be older, start treatment at a later age, report receiving prior treatment (either for the same addiction or for others) in a higher proportion and have a higher incidence of dual pathology.

³¹ In order to facilitate the drafting of this section, multiple consumers refer to patients admitted to treatment for a behavioral addiction and who report the associated use of one or more substances.

Behavioral addictions most associated with multiple consumption were gambling and sex addiction, especially when face-to-face.

The secondary substances that most frequently appear amongst multiple consumers are alcohol (39.9%), cocaine (16.2%) and cannabis (12.0%). In general, online use is associated with a higher use of cannabis while face-to-face use is associated with a higher consumption of alcohol and cocaine.

Table 56. Percentage of psychoactive substances associated with different behavioral addictions (%). Spain 2022.

		Opioids	Cocaine	Cocaine-free stimulants	Hypnosedatives	Hallucinogens	Volatile inhalables	Cannabis	Alcohol
Gambling (n: 1159)		0.9	21.0	1.0	8.0	0.0	0.0	14.8	52.6
	Online (n: 141)	1.4	20.6	2.1	1.4	0.0	0.0	22.0	31.9
	Face-to-face (n: 659)	0.9	22.2	0.6	1.1	0.0	0.0	11.7	62.7
	Mixed (n: 181)	0.6	26.0	1.7	0.0	0.0	0.0	21.0	51.4
Sex (n: 32)		3.1	25.0	21.9	3.1	0.0	9.4	25.0	34.4
	Online (n: 8)	12.5	0.0	12.5	12.5	0.0	0.0	37.5	37.5
	Face-to-face (n: 45)	0.0	46.7	20.0	0.0	0.0	20.0	20.0	33.3
	Mixed (n: 9)	0.0	11.1	33.3	0.0	0.0	0.0	22.2	33.3
Shopping (n: 17)		0.0	5.9	0.0	0.0	0.0	0.0	5.9	29.4
Internet* (n: 28)		0.0	17.9	7.1	0.0	0.0	0.0	32.1	32.1
	Video games (n: 18)	0.0	16.7	5.6	0.0	0.0	0.0	44.4	27.8

^{*}Internet includes addiction to electronic devices, video games, social networks and other.

Gambling addiction is associated with the use of alcohol, cannabis and cocaine, following the modality pattern previously described. A similar pattern is observed in addiction to sex, with a greater number of substances involved, especially face-to-face (cocaine, alcohol, stimulants, volatile substances and cannabis). For other behavioral addictions, the number of cases is insufficient to draw conclusions on multiple consumption patterns.

SOURCE: OEDA. Behavioral Addiction Treatment Admissions indicator.

					DADE year-o	EDADES Survey year-old popu	EDADES Survey 15-64-year-old population					ES 14-18	ESTUDES Survey 14-18-year-old student population	FUDES Surv- -year-old st population		
		Ö	Online gambling	bling			Face-to	-face g	Face-to-face gambling	b 0	Ö	Online gambling	pling	Ē,	Face-to-face gambling	e ge
	2015	2018	2020	2022	2024	2015	2018	2020	2022	2024	2019	2021	2023	2019	2021	2023
Prevalence last 12 months	2.7	3.5	6.7	5.3	5.5	37.4	59.5	63.6	57.4	52.9	10.3	9.4	10.7	22.7	17.2	17.7
Prevalence men (%)	4.6	5.8	9.1	8.0	8.2	40.5	62.4	62.9	59.2	54.8	17.4	15.0	17.1	30.7	22.7	23.4
Prevalence women (%)	0.8	1.2	4.2	2.5	2.7	34.3	56.6	61.2	52.5	51.1	3.6	3.8	4.3	15.3	11.6	11.8
Prevalence 15-24 years (%)	4.0	5.1	8.3	6.5	7.4	19.8	27.5	31.4	24.0	26.6						
Prevalence 25-34 years (%)	4.8	5.8	9.3	8.4	8.8	34.6	54.5	57.5	50.6	47.3						
Prevalence 35-44 years (%)	2.6	3.8	6.9	5.8	9.0	41.5	63.5	67.1	61.0	55.2						
Prevalence 44-54 years (%)	1.5	2.0	5.3	4.2	4.2	40.1	68.1	72.7	67.2	6.09	-	-		-		
Prevalence 55-64 years (%)	1.1	1.4	4.5	2.5	2.5	45.4	73.6	77.1	71.8	64.7						
Prevalence 14 years (%)	-	-	-		•	-	-	-	-	-	8.0	7.6	0.6	18.6	12.5	13.0
Prevalence 15 years (%)	1	ı				1	ı	1	,		9.0	7.4	9.5	19.8	14.1	15.4
Prevalence 16 years (%)	-		-			-	-	-		-	10.9	9.5	10.5	22.4	16.8	18.0
Prevalence 17 years (%)		•	•		•						11.6	10.8	11.4	25.6	20.9	19.5
Prevalence 18 years (%)	-	-	-		•	-	-	-		-	14.6	15.3	18.8	37.2	28.1	30.9
Frequency of daily gambling in the gambler population*	4.3	3.9	4.2	3.0	2.1	1.3	1.1	1.0	1.2	2.1	10.2	7.9	9.9	4.9	3.5	3.6
Spending >300 euros in a single day amongst the gambler population		5.8	3.1	6.8	6.0	,	1.6	1.1	1.0	1.8	6.9	3.9	6.9	2.5	2.3	2.4

*Includes 5 days a week. In 2014, 2015 and 2018 daily means 6 or more days a week. SOURCE: OEDA. DGPNSD.

5. Conclusions

An analysis of EDADES and ESTUDES survey results starting in 2014 confirms that gambling, Internet use and video games are widespread activities in current society. In 2024, 53.8% of the population aged 15-64 has gambled in the last year (face-to-face, online or both), while 97.9% have used the Internet for recreational purposes. In 2023, 21.5% of students aged 14-18 have gambled in the last year (face-to-face, online or both) and 83.1% have played video games.

As for online gambling, according to the EDADES survey, in 2024, 5.5% of the 15 to 64 population age group have gambled in the last year (5.3% in 2022). As in previous editions, the percentage of online gamblers is higher in men (8.2%) than in women (2.7%), and is more frequent among younger people, with prevalence decreasing the greater the age. In the online gambler population, the predominant game among men is still sports betting (40.2%), despite a continued drop in followers, while among women lottery-type games predominate, including *primitiva* or *bonoloto* (51.8%). The maximum amount played in a single day among most players is between 6 and 30 euros.

According to the ESTUDES survey, in the 14-18 student population, the prevalence of online gambling in the last year has reached an all-time high (9.4% in 2021 compared to 10.7% in 2023), and is much higher for men (17.1%) than for women (4.3%). The prevalence of online gambling increases the older the gambler, with 18 years old students registering the largest increase (15.3% in 2021 to 18.8% in 2023). The most popular online games continue to be video games, followed by sports betting, but in third place this differs by sex, with men playing cryptocurrencies and women playing bingo. Online gambling expenditure has registered the highest figures, with 28.8% of students spending more than 30 euros in a single day over the past year.

Face-to-face gambling is much more widespread; according to the EDADES survey, more than half the population aged 15-64 (52.9% in 2024) have gambled in the last year, mostly through conventional and instant lottery games. As with online gambling, the largest amount of money spent in a single day falls within a range of 6 to 30 euros. In face-to-face gambling, differences by sex are much smaller and, in contrast to online gambling, prevalence is notably higher the greater the age.

According to the ESTUDES survey, among the 14 to 18 student population, face-to-face gambling is also more prevalent than online gambling: 17.7%. In this type of gambling, men once again register a higher prevalence (23.4%), which also increases with age. As for the most widespread types of gambling, there are differences by sex, as men play more lotteries, *primitiva*, *bonoloto*, while women play bingo. With regard to money expenditure in face-to-face gambling, the largest amount

of money spent in a single day falls within a range of less than 6 euros (61.2%), which is more frequent among women (68.9%).

As noted, gambling and Internet use are highly prevalent in the Spanish population. However, not all types of use can be classified as problematic. In the EDADES 2018 survey, a specific scale was introduced to obtain an approximation of this phenomenon in population terms.

Thus, applying DSM-5 criteria, it is estimated that in 2024 1.4% of the population aged 15-64 years would engage in **possible problematic gambling (DSM-5≥1)**, with this proportion increasing to 2.2% among men and dropping to half among women (0.7%). By gambling modality, the prevalence of possible problematic gambling (DSM-5≥1) among the population who have gambled in the last 12 months is higher amongst online gamblers than those who have gambled face-to-face (18.4% vs. 4.3%). Depending on the type of gambling, in the online mode, the highest prevalence of possible problematic gambling is observed among slot machine players (31.1%). Face-to-face, however, a disorder is more common among card game players (22.6%) and, again, among those slot machine players (22.3%). As might be expected, in both gambling modalities, the higher the maximum amount of money spent in a single day, the higher the prevalence of possible problematic gambling. There is a higher prevalence of risk behaviors, such as drunkenness, binge drinking, risky alcohol consumption and daily smoking, among those with possible problematic gambling (DSM-5).

In 2023, the ESTUDES survey indicated that 4.0% of students aged 14-18 could be at risk of problematic gambling according to the Lie/Bet scale, with a higher prevalence among boys (6.0%) than among girls (2.0%). This risk increases with age, rising to 8.3% among 18 years old students. The type of game with the highest risk of problematic gambling is still online gambling (23.5%), but face-to-face gambling shows a greater proportional increase (18.2% in 2021 and 20.5% in 2023). These students gamble larger amounts of money, both online and face-to-face, and have higher prevalence of heavy drinking, daily smoking and cannabis use in the last 30 days (cannabis use has increased the most, from 35.2% in 2021 to 40.7% in 2023). However, in terms of the most common games used by students to spend money, who evidence possible problematic gambling, there are differences between both modalities; sports betting and video games are prevalent in online gambling whilst slots and slot machines come first in face-to-face gambling.

With regard to Internet use, data from the EDADES survey indicate that in 2024, 3.7% of the 15 to 64 years old population evidenced **possible problematic use of the Internet**. This figure hardly differs by sex, but it does differ by age, peaking among 15-24 years old (11.7%) and becoming residual among those aged 55 and over (0.9%). There is a slight increase when compared to 2022.

The ESTUDES 2023 survey shows that the prevalence of **possible problematic Internet use** among the 14-18 student population (20.5%) has decreased compared to 2021 (23.5%), and is higher among women (25.9%). Prevalence increases the greater the age. Prevalence in alcohol, tobacco and cannabis use is still higher among possible problematic Internet users.

With respect to **gaming** according to the ESTUDES 2023 survey, 83.1% of students report having played video games: this figure reaches 96.2% among boys, and there is a negative gaming trend as age increases. Approximately half of these video game players have played at least once a week in

the last year; it is most common to play less than two hours a day (48.6%) and to not spend money on improving one's position, avatar, accessories or appearance (72.0%).

When analyzing a possible **gaming disorder** according to the DSM-5 scale, the number of students aged 14 to 18 who could have this disorder drops to 5.1% (7.1% in 2021), due to a lower indicator in the case of boys (from 11.3% to 7.7%), which is still much higher than for girls (2.5%). These students gamble more often, in terms of days and hours, than other students. They also play larger amounts of money to improve their position in video games, with greater expenditure in the more than 100 euros bracket when compared to 2021 (from 15.8% to 19.1%).

In response to the widespread interest in the social impact of financial technologies, we analyzed the prevalence of **gambling on cryptocurrencies** and the **stock exchange** among the general population in Spain aged 15-64. The prevalence of gambling in the last year has respectively registered 0.4% and 0.3%, indicating a residual scope in general terms. In both cases, these activities are somewhat more popular among men, and in the case of cryptocurrencies also among younger people.

In addition, in this latest edition of the EDADES survey, a series of questions have been included to discover the level of **pornography** use among the Spanish population aged 15 to 64. A total of 63.8% admit to having used pornography at some time in their lives, 29.0% in the last 12 months and 18.2% in the last month. There is greater use among men regardless of the time period analyzed. The most prevalent practice is use alone, as opposed to sharing pornography with a partner or friends.

The results of the ESTUDES survey, in turn, show that 66.8% of students aged 14 to 18 have watched pornography at some point in their lives, 86.3% among boys and 46.7% among girls. The most common pornography use is alone (85.0%), although girls are more likely to use it in company, either with a partner (13.9%) or with friends (37.0%), usually with their cell phone (92.4%).

Finally, incorporation of the admissions to treatment for behavioral/non-substance addictions indicator completes this survey data, making it easier to assess the socio-healthcare impact of various addictive behaviors. Thus, this indicator shows that admissions to treatment for behavioral addictions, as a whole, are more numerous in men than in women (3,520 vs. 528). The behavioral addiction that generates by far the most admissions to treatment is a gambling disorder 82%), followed way apart by disorders related to compulsive use of the Internet, cell phones or electronic devices (9.3%).

Addictions related to shopping (16.4%) as well as those related to use of the Internet, cell phones, electronic devices or social networks as a whole (15.6%) and eating disorders have a greater weight in women; the weight of addictions related to gambling, sex and those specific to gaming is greater amongst men.

With regard to social or health issues, 21.8% of those polled present a dual pathology (a mental health diagnosis) other than the addiction for which they are seeking treatment. In addition, different consequences associated with behavioral addiction are reported, which are mainly family issues (26.6%), financial hardship (25.1%) and health problems (16.9%). These consequences also vary according to the behavioral addiction behind each admission, but do not vary according to sex.

Spanish Observatory on Drugs and Addictions
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