

Addicted to game addiction: ten things that you should know about game addiction but probably don't.

Alternatively: Beyond game addiction.

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1. **13 years and counting.**

- For over a decade we've looked at a lot of the addiction and addiction-like symptoms of going online through the frame of *Internet Addiction Disorder*. In 1995 Dr. Ivan Goldberg created a hoax based on gambling addiction. Dr. Kim Young then took that hoax made a pretty across the board copy for IAD, which in turn was copied closely for Online Game Addiction.
 1. Following is an example of how IAD criteria were copied.
 1. **Goldberg's hoax sub-characteristic under question 2:** obsessive thinking about what is happening on the Internet
 2. **1/8 Young's "Online Game Addiction" (copied almost verbatim from her early versions of IAD):** Are you preoccupied with gaming (thinking about it when offline, anticipating your next online session)?
 2. Another example:
 1. **From Goldberg's hoax:** There is a persistent desire or unsuccessful efforts to cut down or control Internet use.
 2. **From Young's IAD-type gaming scale:** Have you made repeated unsuccessful efforts to control, cut back, or stop online gaming?
- The people who have tweaked it have only done so mildly, adding one or two questions and changing how the checklist is scored.
- Especially bad is that it makes too few separations between children and adults.

2. **Problems exist, but we're in an interim.**

- Being simple, IAD has clear quantitative benefits. At the same time, those benefits are questionable if we aren't sure whether IAD reflects the actual problems out there.
- Until there's reconciliation of sorts between the problems witnessed, some broader understanding, we're in an interim period. Medical professionals are seeing patients who may have gaming problems, interim policies could be effective in the meantime. More important (and for ALL PARTIES involved) is the interim mindset – recognizing that this discussion is going to be dynamic for some time to come.
- So these are the interim thoughts that I'm pulling from the book and putting to an academic article, looking at three interrelated pieces to the game: *immersion, how the game world works and pathologies*. When you make it easy for people to get more a bird's eye on how someone is playing, you give people an opportunity to see past simple things like IAD so that we can solve problems.

3. **Immersion is the first key to understanding excessive use**, to say nothing of other gaming problems.
 - Immersion is made up of all the things that make it easy for our minds to jump in and experience a game.
 - There are several factors in immersion: physical and mental, both automatic and trained.
 - One of the hallmark pieces is a physical immersion that comes from our eyes. Anne Marie Barry, Keith Kenney and Stephen Pinker are just a few visual communications scholars who say that our eyes can't differentiate between visual media and reality. Our emotional visual brain pulls us in, while a visual image's pathway to our thinking cortex is much more slow. We often don't think about something visual, especially something intense, until it's over.

4. **Key number two: How these game worlds work.** One of JRR Tolkien's lesser-known works, *'on faerie stories'* separated our primary (real) world from all of the different secondary (fabricated – in the metalworker's sense) worlds, which the human brain could step inside and experience. We're going to use his thought to split reality with game worlds, looking at the two major components in each: culture and structure.
 1. Culture pervades the whole of both worlds
 - Wang Tta in Korean culture (Chee)
 - Binge cultures within MMO worlds (anecdotal evidence from dozens of sources across the web). You see this culture most with raiding guilds in various entertainment games, Eve Online, Dark Age of Camelot, of course World of Warcraft, raid positions are considered to be “a job that doesn't pay,” by many participants.
 - Regression analysis for raid guilds out of my data on addiction.
 2. Structures fall inside of that culture
 - My thesis pulled 'structural characteristics' for MMO worlds from things like Bartle's motivations, Yee's motivations and their relationship to Bartle's player types, Wood et al's single player game structural characteristics, etc.
 - While the game's texture and design are important, what's perhaps more important is how we interact, and whether that's pathological or standard

VISUAL – locate and explain immersion, structure and culture

5. **The third key: is gaming pathological or everyday interaction?**
 - It's important to look at how a player *interacts* with culture and structures. It's all in how a gamer interacts.
 - Sometimes this interaction with a game's structure is, as James said of Whyville, all about relationships and learning and other things that we wouldn't call addiction.
 - Sometimes it's all about a visceral entertainment experience, or in-game rewards, or mastery, or agency, or other things.
 - But sometimes the relationship between the primary and the secondary becomes strained.
 - Sometimes our body or mind is strained in a way which carries over.
 - Korea's 86% co-occurring disorders (Ahn, 2007). Does that mean that gaming addiction is a huge enabler, or rather that many different affect both primary and secondary world lives? Both, probably.

VISUAL – perhaps depression, insomnia, bipolar, or other problems could be influencing different

problems. Game effects aren't restricted to only addiction... or are they?

6. **What IAD defines as addiction isn't necessarily pathological excess**

- One of the big problems with IAD is that with this checklist, you don't have to understand why a player goes into a game – just that they do. In the hands of therapists, many who are aging, overworked, intensely stressed and paid 30-grand-a-year, this tool is perfect because they can box a problem and go.
- But IAD conflates harmful with harmless, even therapeutic game effects. (Block).
- Sometimes that can have consequences that reach past the individual, as Block also suggests may have been the case with the Columbine shooting.

Conflate question items

VISUAL – functional impairment has always been a key element to diagnosing addiction, this method gives us more of a clear idea as to how gaming provides functional problems.

VISUAL – in a functional shrink we've actually tossed other structures in reality, so as to make more room for the ones that we find in a game. At this point the relationship created between primary and secondary could start to cause serious mental and physical problems, beyond the scope of what we have here.

7. **Physical and physiological game addiction takes time.** And it's a process of interaction.

- All of this isn't to say that the structures of a game will never physiologically/psychologically addict somebody. Without a doubt they can and functional problems only serve to expedite that process.
- But it's just that, a long and drawn out *process*. Some skill at immersion is necessary, at which point it's possible to addict yourself to specific structures. Maybe you'll get into a functional squeeze. After awhile, it becomes easier to build dependence on gaming more broadly.
- Existing co-morbidity expedites that further, including any co-morbidity build within the game. And while excess might be the flagship of game effects, excess tends to be a perfect storm composed of many different structures and interactions.

8. **Game devs can provide gamers with functional tools right now.** The immediate solution is to provide parents and individuals with tools that help them to better monitor and control play themselves. Ideally the ESRB would expand in its scope and let gamers/parents know the types of self-control tools each game offers, so that people who have problems today could choose games that would help them to help themselves.

9. **The long term solution is a critical design discussion,** and devs could start that up right now. Some development houses have been talking for years, in a serious and professional manner, about gamer health. Not the least of these is Warcraft's creator Blizzard Ent. To these people, it's not about whether games or violence trainers or heroin cookers; in-house discussions are about designing for maximum fun. As research and discussion yield ways of bypassing elements which promote addiction, these tested methods should come out of the woodwork.

- A serious design discussion would ideally provide all levels of designers (not just big houses) with the tools used to keep gaming healthy, helping all those involved in gaming.

- It would also keep them honest. If it's common knowledge that certain types of gameplay are risky, then other houses could legitimately call foul on houses that seek to use such design to pull a larger share of the market.

10. **Researchers need to connect.** Too few clinical researchers explore liberal arts approaches to understanding the structures in videogames. Too few liberal arts researchers have a working knowledge of medicine, therapy or pathologies. This naturally inclines both groups to using IAD-style criteria, because it doesn't ask them to mine an area that isn't their specialty. The workaround to this, the first step is for researchers to *work together*, moving our understanding forward. But it's not always easy. Trust me, I've been there.