

# Gaming addiction as a mental disorder—it's premature to pathologize players

14 February 2018, by Andy Przybylski And Amy Orben



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Gaming addiction is expected to be [classified as a mental disorder](#) by the World Health Organisation (WHO) but – while concerns over the addictive properties of video games are reasonable – there is a lack of rigorous research to back it up.

Video games played on smartphones, tablets, computers and consoles have been a popular form of leisure for some time now. In Europe, [recent figures indicate](#) that games are played by more than two thirds of children and adolescents, and a substantial number of adults now play games – 38% in the UK, 64% in France, 56% in Germany and 44% in Spain.

The WHO will publish the next revision of its manual – the International Classification of Diseases (ICD-11) – by mid-2018 and gaming disorder has been included in the draft for the first time.

The ubiquity of mobile devices means electronic games can be played at any time and their [sales eclipse](#) both music and video sales in the UK. Given the growing popularity and motivational pull of video games, concern over their addictive potential is inevitable.

As psychology experts who have studied video games through an empirical lens for years, we share many of these concerns and fully endorse continued scientific research on the topic. But the WHO's tentative move to pathologise digital play is premature.

Last year, nearly 30 academics [wrote a paper](#) in which they opposed the gaming disorder classification, arguing there was a lack of consensus among researchers who study games and that the quality of the evidence base was low.

We have collected responses from researchers who disagree with our position that the WHO's move is premature and have addressed their points in [a new paper](#). It highlights a key question that is still to be answered: how should gaming disorder be defined?

## Gaming vs gambling

Criteria for gaming disorder in the [WHO draft](#) are very similar to those used to define gambling disorder. It's an interesting approach, but it risks pathologising behaviours that are normal for hundreds of millions of regular gamers. In technical terms, this means the criteria have low specificity: the thoughts or feelings of many normal gamers will be flagged as pathological. This could stigmatise many highly engaged people for whom gaming is one of their main hobbies.

It's been argued that – like debates surrounding gaming and aggression – concerns about gaming addiction might reflect a [moral panic](#) instead of solid science.

Because nearly half of gamers are under 18, there is a strong desire to "save the children" over concerns about the possible harmful effects of games. This anxiety incentivises scholars seeking grants, high impact journal articles, and prestige to [mobilise against a possible social harm](#).

Though often well meant, the publish or perish culture in academia means that statistical noise can become part of the scientific record. Because null findings seldom get published, garner press attention or attract career advancing research funding, the false facts arising from a panic can take on a [life of their own](#).

It's aggravated by the fact there is no consensus on the definition of [video game](#) addiction, the essential symptoms or indicators, or the core features of the mental health condition. Evidence from clinical studies [show](#) that problematic gaming is best viewed as a coping mechanism associated with underlying problems such as anxiety or depression.

### Low quality research

Studies show that research on the effects of technology on human behaviour is riddled [with methodological errors](#). They tend to lack scientific transparency, have low statistical power and show an alarmingly high level of statistical reporting errors. In our study of this literature we found nearly one paper in six has an error that changes the conclusions of the study. In our response to those pushing to pathologise play, we argue [addiction research](#) is no exception.

Estimates of gaming addiction vary wildly as a function of questionnaires used and samples recruited. Population representative studies using the draft official guidance [suggest](#) possible addiction rates are less than 0.5%, whereas other studies, carried out with a range of conveniently available samples (such as Reddit or online self-help forums), report rates that are ten to 100 times higher.

Although some portray the academic field at consensus on this issue based in solid research, it is important to understand this evidence is largely exploratory, where data analysis plans and hypotheses are settled on after data collection. What is currently missing is a body of studies where scientists preregister their methods and hypotheses [prior to collecting data samples online](#).

We have conducted studies using this more

stringent approach and our findings [indicate](#) gaming addiction may not be directly related to mental or physical health on its own. The results suggest that the diagnosis of [video game addiction](#) is not stable over time, because scholars pushing for gaming disorder to be recognised do not distinguish between the different types of research. We argue the evidence supporting gaming disorder is based on an unsound scientific basis.

We are concerned that a small subset of gamers might be struggling, but we do not believe critical standards of evidence have been met to merit a new diagnostic category for gaming disorder by the WHO.

Instead, we believe rigorous scientific research into gaming [addiction](#) is essential. Now is not the time to pathologise one of the most popular leisure activities of the digital age.

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