

## **Video games: from addiction to motivation**

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The introduction of a proposal for ‘Internet Gaming Disorder’ in the DSM-5 has accelerated growth of the research into this proposed new ‘disorder’. The criteria for game addiction generally strongly resemble better-known issues such as pathological gambling or substance use disorder, with little theoretical frameworks being produced. The existing literature, including my own research, has strongly focused on exploring the psychiatric and psychological characteristics of the proposed game addicts using this medical model, using an essentially confirmatory approach <sup>1</sup>. Moreover, there is very little work being done on actual patients, which is strange since a disordered state is implied <sup>2</sup>. In some cases, the patients are hard or even impossible to find (social media addiction).

From my perspective the way forward included a clear split between the clinical patients, which require more substantial attention, and a focus on understanding the mechanics of heavy game use in essentially healthy samples. To provide more substantial theoretical thinking on this last issue of heavy use, I think it might be fruitful to incorporate and expand non-clinical perspectives from communication theory that deal with the initiation and cessation of playing behavior. Therefore, this talk will briefly summarize the state of the literature on game addiction. In the second half of the talk, I will summarize some main approaches to motivation and media use from communication science and will explain how they may be relevant to the study of heavy/intense media use.

### **References**

1. Billieux J, Schimmenti A, Khazaal Y, Maurage P, Heeren A. Are We Overpathologizing Everyday Life? A Tenable Blueprint for Behavioral Addiction Research. *J Behav Addict.* 2015;32(0). doi:10.1556/2006.4.2015.009.
2. Van Rooij AJ, Prause N. A critical review of “ Internet addiction ” criteria with suggestions for the future. *J Behav Addict.* 2014;3(4):203–213. doi:10.1556/JBA.3.2014.4.1.