



“Gaming Addiction” and the Politics of Pathologies

Mark R. Johnson

This non-peer reviewed entry is published as part of the Critical Gambling Studies Blog. Visit an interactive version of this blog at: <https://criticalgamblingstudies.blogspot.com/2021/10/gaming-addiction-and-politics-of.html>

The ever-looming spectre of “addiction” has been associated with gambling practices since long before “gambling studies”, or indeed any scholarly consideration of real-money game activities, came into being. Interested parties ranging from literary authors to state legislators, and from religious inquisitors to urban planners, have long considered the experience, risk or ramifications of gambling addiction to be inseparable from the practice itself. We presently stand at a moment where a different and relatively new activity – digital *gaming* - is beginning to be transformed into a vector for addiction. By examining how this is happening, what might we learn about the political processes by which a leisure activity can be transformed into a pathology?

As Graham Scambler (2018, p. 773) puts it, “stigma and deviance have always been deployed – ‘weaponised’ - for social and political ends”. This has now also become the case in the context of digital gaming. Several years ago the [World Health Organization \(WHO\) announced](#) the creation of what they called “gaming disorder” which was to be added to their International Classification of Diseases (WHO, 2018). This decision to start classifying digital games as a site of possible “addiction” understandably left gamers bemused, and the decision was heavily ridiculed across online gaming spaces. What might it mean to play games now that such a seemingly harmless and purely recreational leisure activity becomes reframed as a medical condition? At least a billion people in the world today play digital games, and depending on how one defines it and draws the boundaries of a definition, this number may indeed be far higher. This means that at least a full seventh of the world’s population apparently became, quite suddenly, at risk of medical judgments or interventions which did not exist previously. Dramatic public health pronouncements like this are unusual and we have to look to the prohibition of alcohol, restrictions on tobacco and other drugs, or the licensing of gambling activities, to find comparisons on this scale. Scholars, journalists, critics, and indeed game players, have all rightly drawn attention to the weak research underpinning the WHO’s definition. However, few have considered the new wave of *stigmatization* taking place that in the coming years will likely grow to affect anyone who has ever picked up a game: which is to say our friends, our children, our family, and ourselves.

The WHO’s definition was broken up into several parts, but it is its second phrase which seems especially problematic. The language used to define the central diagnostic category of “gaming addiction” was unwieldy: it criticized any “increasing priority given to gaming over other activities to the extent that gaming takes precedence over other interests and daily activities”. This vastly simplifies video game consumption into two moral categories - good play and bad play - both of which seem further set against notions of work and “productive” citizenry. We are all aware of the traditional clichés associated



with the medium: gamers are fat, lazy, basement-dwellers, whose educational achievements, social skills and personal hygiene all leave much to be desired. The WHO's announcement bluntly transforms these clichés from a source of social anxiety into an apparent public health crisis. This condemnation is reinforced by the language of many psychologists who now incredibly talk of gamers as akin to (potential) gambling addicts, who exhibit no self-control, and thus require clinical and legal/regulatory oversight. When combined these elements transform shame into blame: gamers cease to be hapless subjects who merit our pity, and become carriers of "mental health issues" who merit our concern.

Stigma related to addiction is a social construction (Keane, 2002). It is established when an institutional power classifies behaviour as existing outside of what is considered ordinary or acceptable. In this case, the WHO's label of gaming as an "addiction" reinforces the idea that the individual is to "blame" for spending time playing games. But why? There is something troubling about how the WHO medicalises *time* on a normative understanding of "productive" or "non-productive" labour. If we were to replace "gaming" with "working", then under the WHO's definition almost all of us would immediately exhibit the supposed pathology of "prioritising an activity" at the expense of another. Research shows that long working hours typically result in mental health issues, with workers prioritising their labour over personal, social and physical wellbeing - and yet it is unlikely that the WHO will target stockbrokers, teachers, or service sector workers, as at risk of an "addiction". Doing *something* too much, then, is not the issue here: it is about how we value play and understand apparently non-productive labour. In looking to understand the motivation behind such claims, history is an excellent guide. In Athenian times, the *stigma* was originally a mark branded into the flesh of slaves, as many as one-third of the state's population (Scambler, 2018). In this way those who were considered at risk - in this case at risk of *escape* - were those who had to be most explicitly and visibly controlled. The nature of the risk has naturally changed from escaping a system of slavery towards failing to produce sufficiently as a cogwheel of global capital (though perhaps this is not *that* much of a shift?), but the basic motive - to both shame and draw attention to those who threaten the social order - remains unchanged. Gaming challenges the dominant sociocultural order that prioritises labour and work above all else. In choosing to instead commit substantial time to play, game players consequently pose a threat that must be managed with all the ideological and medical-psychological tools available.

We need to ask also what this means for those making their *livings* through gaming. Around the globe tens of thousands of mostly young people earn (full or partial) incomes on platforms such as *YouTube* or *Twitch*, which certainly entail gaming for more than twenty hours per week. Many more tens of thousands work to create games, an activity that inevitably involves a high portion of "play" as components of their "work". There are also players seeking to find a gaming career on crowdfunding platforms such as *KickStarter*, *IndieGoGo* and *Patreon*, whose expertise is founded on their gaming knowledge and experience. There is consequently a very real danger of alienating an entire population of "game-workers" whose careers have been built through challenging clichés the WHO seems apparently eager to bolster. Its proclamation showed beyond a doubt that the WHO is out of touch when it comes to digital gaming, and simply does not understand the nature of contemporary gaming communities, which are drawn together by creative self-expression to generate a major global economic market. Unless rejected, over the longer term - once the obvious current and presumably rather more pressing concerns of the WHO begin to fade into the touted "new normal" - such a definition risks inculcating a culture of fear that will paralyse entire avenues of artistic originality and innovation that the games industry is built upon. It will do so by shackling the enthusiasm and aspiration



of gaming youth, who might find themselves increasingly instructed to monitor and regard their in-game activities as creating the possibilities for disorder and addiction.

In offering these critiques one cannot dispute that gaming has caused harm, up to and including extreme cases of individuals starving themselves to death during their play. But obsession is a problem in every walk of life from games to gambling, from soap operas to sport, from politics to religion. Yet this implementation of “gaming addiction” represents a global, systemic approach, almost infinitely greater in scope than ameliorative approaches in other areas of life. It is one which extends far beyond the smallest fraction of players with true “gaming problems” to encompass everyone who might exhibit the temerity to actually invest a large chunk of their time in *play*. The establishment of such a definition by a powerful global institution such as the WHO ultimately presents us with two primary issues. Firstly, such a definition obscures rather than enhances our understanding of mental health, and the place of leisure and play within it. Secondly, and perhaps more importantly, it represents - because of a fundamental and profound misunderstanding of games consumption - a dangerous constraint on creative expression in a novel and evolving work and play ecosystem. In other words: it now seems that if you are not a neoliberal worker, you are no longer within the WHO’s framework of good health.

Yet, notwithstanding all the above, we must acknowledge that many kinds of digital games – often blockbuster “triple-A” games, and mobile games – are becoming increasingly *gamblified*. While this does not justify blanket political and medical interventions into the world of digital game play, it would seem naïve to suggest that there might not be new categories and dynamics of potential harms now finding their way into gaming when, previously, they were confined to the traditional limits of “gambling”. If we accept my above critiques of the dominant approach at present, we nevertheless also clearly need to understand these new phenomena and their effects on players. So what is the alternative approach? I propose the alternative is to focus on *production*, as well as consumption. Such an approach will highlight and interrogate the dominant industrial and economic actors (re)shaping much of gaming in this new way, and move “blame” from the powerless onto the powerful. In 2020 I co-edited [a special issue of the Journal of Consumer Culture](#) about [what my co-editor and I described as the ongoing blurring between digital games and gambling](#) (Brock & Johnson, 2020). As one of the leading outlets for the sociological study of consumption and culture more broadly, the journal was an ideal location to begin this conversation about alternative approaches to the present issues.

For those open to this more holistic view of obsessive behaviours than that which addiction discourses like to offer, I would therefore point you to work in this issue, such as [Jennifer Whitson and Martin French’s examination](#) of how game experiences are becoming increasingly entangled with gambling-like design choices and questions of what is and is not “productive”; [Andrei Zanescu, Marc Lajeunesse and Martin French’s study](#) of the role of platforms and platform controllers in the new and somewhat gamblified gaming ecosystem; [Anne Mette Thorhauge & Rune Nielsen’s study](#) of skin betting and the complex and highly profitable platform economies they circulate within as both “commodities and currencies”; [Daniel Joseph’s interrogation](#) of the “battle pass” phenomenon and the jeopardy into which they put the “sustainability of cultural production” in games in the future; [Alexander Ross and David Nieborg’s study](#) of social casino apps and the framings of risk, contingency, and quotidian normality built into their design; and [Josh Jarrett’s research](#) on the “free to play” model of many contemporary games and the problematic political and economic implications of “games as a service”. What we see when we look at these critical examinations of the space is that so many studies of addiction exhibit a model of pathology that would not have seemed out of place with media effects theories in the first



half of the twentieth century, which framed mass media creators as powerful and dominating actors whose content the hapless public has no choice but to consume. We hope to pose a challenge to this reductive approach to defining games which takes no account of the vast possibilities they actually hold for play, leisure, community, creativity, and even careers – possibilities that are no less real even though, for an unfortunate few, they may instead be a contributor to pathology and obsession.

To conclude: my point here is of course not that we should ignore addictive behaviours, nor that we should leave those in need without help, and nor that we should resist taking pre-emptive measures against practices or behaviours with demonstrated high risk of harms. The point, rather, is that *what* becomes studied as a site of addiction, and what does *not*, and how that site of potential addiction is *framed*, are all political matters. Digital gaming is at present a relatively new site for potential “addiction” narratives and it is important, at this early stage, to pay close attention to how these discussions and interventions are being framed, because the groundwork that is being laid here and now will influence thinking and developments for the years, and the decades, to come.

References

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Dr. Mark R. Johnson is a Lecturer in Digital Cultures in the Department of Media and Communications at the University of Sydney. His research focuses on live streaming and Twitch.tv, esports, game consumption and production, and gamification and gamblification. He has published in journals including “Information Communication and Society”, “New Media and Society”, “Games and Culture”, and “International Gambling Studies”. Outside academia he is also an independent game designer best known for the roguelike “Ultima Ratio Regum”, and a regular games blogger, podcaster, and commentator.