

Contemporary Media Forum

COMPUTER AND CYBERSPACE “ADDICTION”

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With the sky-rocketing popularity of the internet, a heated debate has surfaced among mental health professionals. Are some people becoming pathologically preoccupied with their activities in cyberspace? Is this yet another type of addiction that has invaded the human psyche? Clinical and empirical research on this issue is growing (Suler, 1999; Beard and Wolf, 2001; Morahan-Martin, 2001; Davis et al., 2002; Shapria et al., 2003). Books for the public about how to recognize and remedy internet addiction also have become quite popular (Young, 1998; Greenfield, 1999).

Researchers and clinicians are divided on what to call this phenomenon. In what he originally intended as a joke sent to the *Psychology of the Internet* listserv in July of 1996, Ivan Goldberg proposed a set of symptoms for what he called “Pathological Computer Use.” However, that term and variations of it persist and are taken seriously by many professionals. Others prefer labels such as “Virtual Addiction” or “Internet Addiction Disorder” (IAD) and claim it is a new type of psychopathology.

The lack of consensus about terms points to some complexities about the nature of this hypothetical disorder. There are many types of compulsive online activities – and some people who are pathologically attached to their computers never become preoccupied with the internet at all. Also, let us not forget the quite powerful but now seemingly mundane and almost accepted obsession that some people develop for video games, which, technically speaking, are specialized computers.

Perhaps, on a broad level, it makes sense to talk about a computer, virtual, or cyberspace “addiction,” that is, a dysfunctional preoccupation with some type of computer-mediated activity. Within this broad category there may be distinct subtypes, each involving somewhat different underlying psychodynamic processes. Some cyberspace addictions involve gaming and competition, some fulfill more social needs, some may be an extension of work compulsions.

The media has focused rather doggedly on internet addiction, which may

simply reflect the fact that this is new and controversial topic that sells. But it may also indicate some anxiety about technology within our culture, specifically among people who really don't understand cyberspace. Ignorance tends to breed fear and the urge to pathologize that which seems unfamiliar and threatening.

Nevertheless, some people are definitely hurting themselves in their obsession with computers and cyberspace. When people lose their jobs, drop out of school, or are divorced by their spouses because they cannot resist devoting all of their time to virtual activities, they are pathologically addicted. These extreme cases are clear-cut. But, as in all addictions, the problem is where to draw the line between normal enthusiasm and abnormal preoccupation. Similar to defining any mental disorder, the degree to which computer and internet activities are abnormally excessive parallels the degree to which they disrupt the person's ability to function in the "real" world.

As yet, there is no official psychological or psychiatric diagnosis of an internet or computer addiction. It remains to be seen whether this type of addiction will someday be included in any new versions of the *Diagnostic and Statistical Manual of Mental Disorders*. As is true of any official diagnosis, an "Internet Addiction Disorder" or any similarly proposed diagnosis must withstand the weight of systematic research. Two basic questions must be addressed: "Is there a consistent, reliably diagnosed set of symptoms that constitutes this disorder?" and "Does the diagnostic category possess external validity in that it significantly correlates with similar histories, personality factors, and prognoses of people who are so diagnosed?"

So far researchers have mostly focused on that first issue – trying to define the constellation of symptoms that constitutes a computer or internet addiction. Some of the criteria proposed include the following.

- An inability to control the amount of time spent online.
- Neglecting one's work and personal obligations.
- A decrease in offline socializing, resulting in loss of friends or problems with family members.
- Making drastic lifestyle changes or avoiding important life activities in order to spend more time online.
- Lying to family members or friends to conceal online activity.
- Spending excessive money on online fees.
- Going online in order to escape life problems or to relieve feelings of helplessness, guilt, anxiety, or depression.
- A general decrease in physical activity and a disregard for one's health, including sleep, eating, and personal hygiene.
- Feeling restless, irritable, depressed, or anxious when attempting to cut down or stop online activity.
- A craving for more time at the computer and obsessive thinking about it.

Anyone who is familiar with addictive behaviors will recognize these symptoms. Clearly, attempts to define computer and internet addiction draw on the patterns that are common to addictions of all types: patterns that perhaps point to deeper, universal causes of compulsive behavior. It is here that psychoanalytic researchers and clinicians can make an important contribution. What are the psychodynamic factors, including object and selfobject psychopathology, that contribute to all types of problematic computer use, and what are the intrapsychic processes unique to specific types of computer compulsions?

As a result of my research on the psychology of cyberspace, I have developed some premisses about what constitutes health versus unhealthy online living. One is what I call the "integration principle." It draws on an idea well-known to psychology and psychoanalysis – the idea that mental health is marked by an evolving integration of the intrapsychic and social aspects of one's life:

Dissociating online and in-person living is associated with psychological problems.
Integrating online and in-person living is associated with psychological health.

People tend to become addicted to the internet, or act out pathologically in cyberspace, when they have dissociated it from their in-person life. Their cyberspace activity becomes a world unto itself. They do not talk about it with the people in their face-to-face life. It becomes a walled-off substitute or escape from their life. Cyberspace almost becomes a dissociated part of the person's own mind – a sealed-off intrapsychic zone where fantasies and conflicts are acted out. Reality testing is lost. Alleviating this dissociation is an implicit or explicit component of many of the techniques for helping people addicted to the internet.

On the other hand, healthy internet use means integrating the face-to-face and cyberspace worlds. You talk about your online activities with your real-world family and friends. You bring your offline identity, interests, and skills into your online community. You call on the phone or meet in person the people you know online. "Bringing in the real world" is an important principle for helping people who are addictively stuck in cyberspace. It also is a powerful tool for intervening with people who are addicted to deviant behavior in cyberspace.

The health-promoting aspect of the integration principle also works in the opposite direction. You explore communicating online with some of the people whom you primarily know in the face-to-face world. People tend to express themselves differently online. Relationships tend to be slightly different in cyberspace. By extending a relationship into the online realm, people can deepen and enrich their understanding of each other.

The integration principle also applies to those people who criticize the internet and shun online activities. That also might indicate dissociation: a failure to experience and integrate new ways of being.

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