

Gaming Addiction

When gaming takes more than just time

Gaming can be creative, social, absorbing and enjoyable. Spending a lot of time gaming does not automatically mean somebody has an addiction. The concern is when control over gaming becomes impaired, gaming increasingly takes priority over other parts of life, and the pattern continues despite significant negative consequences. The World Health Organization uses the clinical term **gaming disorder** for this pattern.

Healthy enthusiasm or a harmful pattern?

Time alone is not enough to decide. A person may play for long periods while still sleeping, eating, studying or working, maintaining relationships and being able to stop when necessary. A more concerning pattern involves loss of control and significant impairment. WHO notes that gaming disorder affects only a small proportion of people who game, so ordinary enthusiasm should not be pathologised.

Gaming that remains balanced	Gaming that may need support
Gaming is enjoyable but can be paused for responsibilities, sleep, relationships and self-care.	Repeated difficulty stopping or reducing, even when the person intends to.
Other interests and relationships remain meaningful and accessible.	Gaming increasingly takes priority over education, work, family, friendships or previous interests.
The person can tolerate interruptions and limits without major disruption.	Strong irritability, distress or conflict repeatedly develops around attempts to interrupt the pattern.
Gaming adds to life.	The pattern continues or escalates despite clear negative consequences.

What may sit underneath excessive gaming

For some people gaming offers achievement, predictability, belonging, stimulation or relief from anxiety, loneliness, bullying, low mood, rejection or real-world pressure. It can also provide a space where social rules feel clearer or where somebody feels more competent. ADHD, autism, depression, anxiety, trauma and social difficulties may be relevant for some people, but none should be assumed. The useful question is: **what need is gaming meeting?**

Sleep, body and everyday functioning

Late-night gaming can displace sleep and make waking, concentration and emotional regulation harder the next day. Long uninterrupted sessions can also reduce movement, regular meals, hydration and time outdoors. The goal is not to claim gaming itself causes every difficulty, but to notice when the pattern is crowding out the foundations the body and brain need.

Signs worth noticing

Repeatedly missing school, college, work or appointments; gaming through most of the night; abandoning previous interests; neglecting hygiene or meals; persistent conflict about gaming; hiding how long somebody has played; spending beyond agreed limits; or repeatedly returning to the same pattern despite wanting to change are reasons to explore what is happening.

Clinical context

In ICD-11, gaming disorder is characterised by impaired control over gaming, increasing priority given to gaming over other activities, and continuation or escalation despite negative consequences. The pattern must cause significant impairment in important areas of functioning and would normally be evident for at least 12 months. Diagnosis belongs with an appropriately trained professional, not a time-limit checklist.

Finding Balance Without Removing What Gaming Gives You

Understanding the cycle helps create change that is realistic rather than punitive

Map the gaming cycle

1. Trigger	Stress, boredom, loneliness, social uncertainty, conflict, feeling unsuccessful, sensory overload or simply a familiar time of day.
2. Pull	The game offers reward, progress, connection, escape, control or a clear goal.
3. Extended play	Natural stopping points are missed: one more match, task, level or conversation becomes another.
4. Cost	Sleep, meals, responsibilities, relationships or mood are affected; guilt or conflict may follow.
5. Re-entry	The discomfort created by those consequences can make the predictable gaming world feel even more attractive.

Create stopping points before you start

Decisions made before gaming are often easier than decisions made in the middle of an absorbing session. Choose a finish time or event in advance, use alarms outside the gaming device, decide what needs to happen first, and create a short transition activity afterwards. For online multiplayer games, plan around matches or team commitments rather than expecting somebody to stop instantly in the middle of a live game.

Replace the function, not just the screen

If gaming provides friendship, challenge, stimulation or relief, simply removing it can leave a large gap. Recovery works better when those functions are replaced. Someone who games for social connection needs another accessible form of connection; somebody seeking achievement needs meaningful goals; somebody using games to decompress needs another way to regulate after an intense day.

A balance audit

Look at one ordinary week and mark time spent on **sleep, food and self-care, work or education, movement, relationships, gaming, other interests and quiet recovery**. The purpose is not to create a perfect timetable. Ask instead: What has disappeared? What is repeatedly sacrificed? What one area needs protecting first? Often sleep or morning functioning is the most useful starting point.

For neurodivergent gamers

Gaming can be especially regulating because it offers clear rules, controllable sensory input, repetition, deep interest and social contact with less face-to-face demand. Support should respect those benefits. Sudden blanket bans may increase distress without teaching regulation. Collaborative boundaries, predictable transitions and alternative sources of stimulation or recovery are often more useful.

Parents and carers

Avoid making every conversation about gaming. Ask what the game provides and what makes stopping difficult. Agree expectations when everybody is calm, make limits predictable and consider the developmental needs of the young person. If education, sleep, eating, aggression, mental health or family functioning is seriously affected, seek professional assessment rather than escalating punishment.

Reflection

Finish these sentences: **Gaming helps me... I lose track of time when... The part of life gaming is pushing out is... The hardest feeling when I stop is... One boundary I could test this week is... One thing I want more room for is...**

Support, Recovery & Moving Forward

The aim is choice and functioning - not treating every gamer as though gaming itself is the problem

What treatment may involve

Support may include CBT-informed work, motivational approaches, family work, routines around sleep and daily functioning, emotion regulation, and treatment for co-occurring anxiety, depression, ADHD or other difficulties. A useful formulation looks at both the behaviour and the needs it is meeting. Goals may involve reducing gaming, changing when and how it happens, or taking a period away from gaming while other areas stabilise.

Practical foundations for change

Protect sleep	Choose a realistic stopping point that allows time to wind down before bed; keep morning commitments visible.
Restore basics	Re-establish meals, hydration, washing, movement and essential responsibilities before aiming for a perfect routine.
Change cues	Reduce automatic launching, notifications or gaming immediately after waking if those cues repeatedly extend sessions.
Plan connection	Keep social needs in the plan. Removing online friendships without alternatives can increase isolation.
Review, don't shame	If a plan fails, identify what happened and adjust the environment or support rather than treating it as proof of failure.

Where to seek help in the UK

A GP is a useful first point of contact when gaming is seriously affecting mental health, sleep, education, work, eating or family functioning. They can assess related difficulties and discuss local mental-health options. Children and young people may also be supported through school or college wellbeing services and local NHS children and young people's mental-health services. Specialist gaming-disorder provision is more limited than general mental-health care, so local pathways vary.

Supporting a partner or loved one

Focus on observable impact rather than calling somebody lazy or addicted: missed work, reversed sleep, isolation, neglected responsibilities or repeated conflict. Ask what gaming is providing. Agree boundaries around shared responsibilities and finances where relevant. Do not make yourself responsible for monitoring every minute. A loved one can encourage change while still protecting their own wellbeing.

One book to explore

***How to Raise a Healthy Gamer* - Alok Kanojia.** Written particularly with parents in mind, it explores why games can become so compelling and how communication, motivation and boundaries can be approached without making gaming the enemy. It is a general self-help resource rather than a diagnostic manual and should sit alongside professional support where functioning is significantly impaired.

A message from Maggie

Gaming may be one of the places where you feel capable, connected, calm or fully absorbed. That matters. The aim is not to take away something you love simply because other people do not understand it. The question is whether gaming still fits inside your life, or whether your life is increasingly having to fit around gaming. If the balance has shifted, change can start by protecting one part of life that has been squeezed out and understanding what makes the game so difficult to leave.

Clinical note & source framework

This resource is educational and does not diagnose gaming disorder. WHO ICD-11 places gaming disorder within disorders due to addictive behaviours and distinguishes it from regular or healthy gaming. Diagnostic assessment considers impaired control, priority, continuation despite consequences and significant functional impairment, normally over at least 12 months. Before publication, clinical wording should be checked against current WHO ICD-11 guidance and relevant NHS/local mental-health pathways.