Gaming Addiction in Youth

A Closer Look at What is Happening in Malta

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CASE STUDY

Meet John

- 14 yr old boy at presentation, eldest of 3 brothers
- Good relationship with his parents
- Previously attending school regularly and functioning well socially
- Increasing social withdrawal and deterioration in family relationships
- Reduced school attendance and loss of interest in offline activities - spending up to 20 hours/day gaming

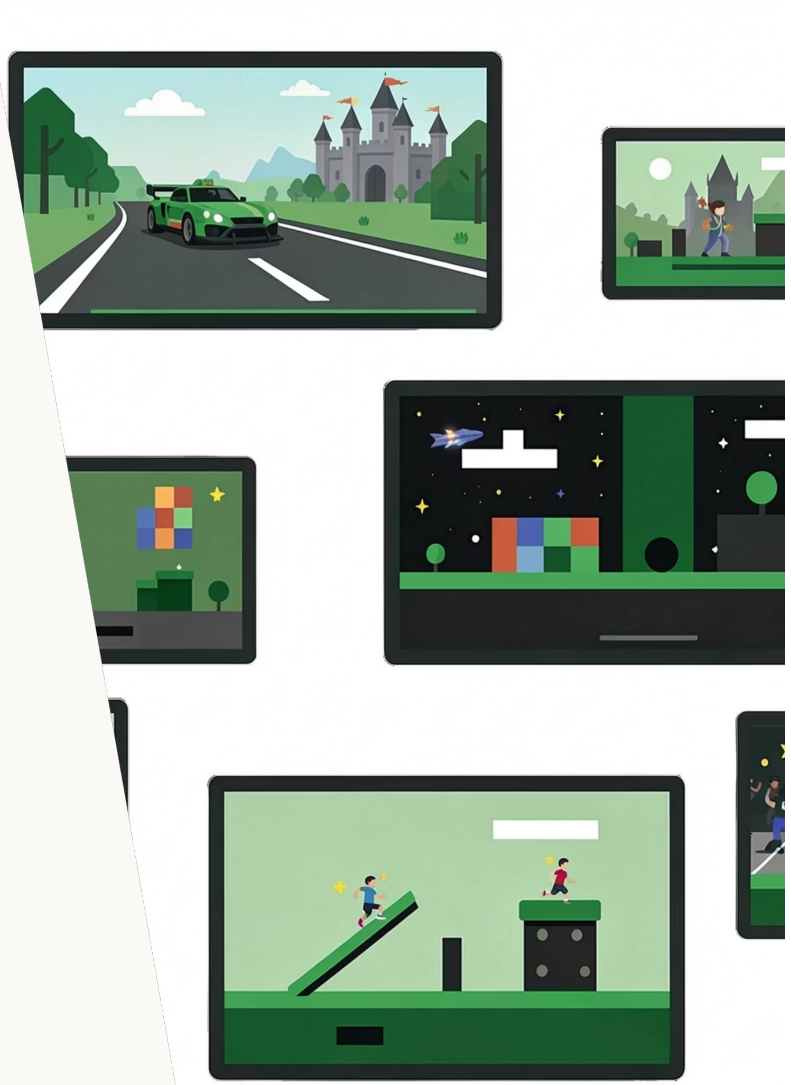
Functional Collapse

Games Played

- Formula Racing
- World of Warcraft
- Roblox & Minecraft
- Fortnite

Consequences

- Severe sleep disruption
- School absenteeism
- Social withdrawal & weight gain
- Urinary incontinence whilst gaming
- Deteriorating family relationships



The Breaking Point

> At 1 a.m., John's father unplugged the Wi-Fi. John responded by smashing a mug into his father's face, fracturing his maxilla. Those who knew him described it as *"very out of character."*

This incident illustrates how gaming disorder can escalate to serious harm when left unaddressed.

So What Happened?

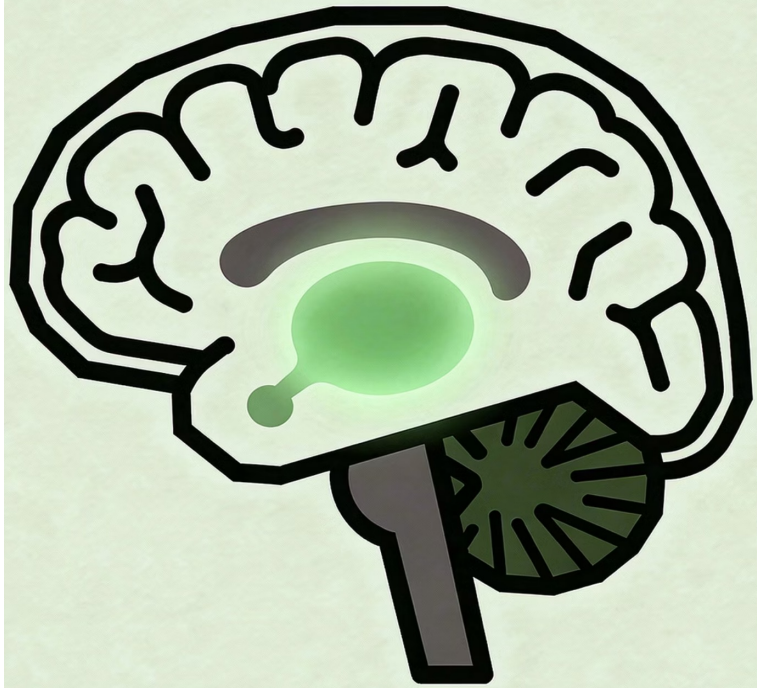
John's case raises a question that clinicians, educators and families increasingly face:

Simply Passionate?

A young person deeply engaged in a hobby — creative, social, and self-directed in his digital world?

Behavioural Addiction?

A clinical condition where loss of control, withdrawal, and functional impairment define the experience — regardless of the activity?



The Teenage Brain Is Different

Heightened Reward Sensitivity

Adolescent brains respond more intensely to reward cues, making pleasurable activities disproportionately compelling.

Immature Impulse Control

The prefrontal cortex, responsible for braking behaviour, is still under construction well into the mid-twenties.

Immediate Reward Preference

Poor delay discounting means that short-term gratification consistently wins over long-term consequences.

Increased Neuroplasticity

The adolescent brain is highly malleable, shaping itself around repeated experiences, for better or worse.

Ferrari Engine, Weak Brakes

A useful way to understand adolescent neurobiology: the engine is powerful, but the braking system has not yet caught up.

Reward System

Ventral Striatum

"Go faster" — craving novelty, reward, and stimulation with remarkable intensity.

Control System

Prefrontal Cortex

"Slow down" — regulating impulse, weighing consequences, and applying judgement. Still developing.

Why Adolescents Are More Vulnerable

Brain Still Developing

Reward-control imbalance makes compulsive patterns easier to form.

Identity Formation

Gaming worlds offer an alternative sense of self and belonging.

Peer Influence

Social norms around gaming can normalise excessive use.

Emotional Dysregulation

Games become a coping mechanism for anxiety, low mood, and stress.

Sleep Vulnerability

Screen use disrupts circadian rhythms, compounding impairment.

Variable Reward Systems

Games are engineered to exploit the brain's reward circuitry — using the same mechanisms seen in gambling disorder.

- **Unpredictability** — loot boxes, random drops
- **Anticipation** — loading screens, countdowns
- **Achievement** — ranks, badges, level-ups
- **Social validation** — likes, leaderboards
- **Near-miss effect** — almost winning drives re-engagement

Not All Gaming Is Harmful

Gaming can be a powerful force for good, offering connection, creativity, and cognitive growth.

- Build and sustain friendships
- Reduce social isolation
- Improve cognition and problem-solving
- Foster teamwork and communication
- Provide genuine belonging

Case in point: The Remarkable Life of Mats Steen — a young man whose richest relationships were formed in World of Warcraft.

Engagement vs Addiction

The distinction matters clinically - and it is not about hours played.

✅ Highly Engaged Gamer

- Enjoys gaming and thinks about it often
- May play for long hours
- Remains functional in daily life
- Can step away when needed

⚠️ Gaming Disorder

- Loss of control over gaming behaviour
- Withdrawal symptoms when unable to play
- Deception and hiding behaviour
- Aggression when interrupted
- Significant functional impairment

What Is Happening in Malta?

Data from **ESPAD** and **HBSC** surveys paint a concerning picture for Maltese youth:

Problematic Gaming
High rates identified among Maltese adolescents in school-based surveys.

Daily Screen Exposure
Significant hours of daily screen time reported across age groups.

Gambling Exposure
Adolescents reporting early exposure to gambling, sharing mechanisms with gaming.

Growing Concern
Behavioural addictions increasing as a presenting issue at youth services.

This Is Not Just Malta

South Korea & China

Among the first nations to establish national treatment infrastructure for gaming disorder.

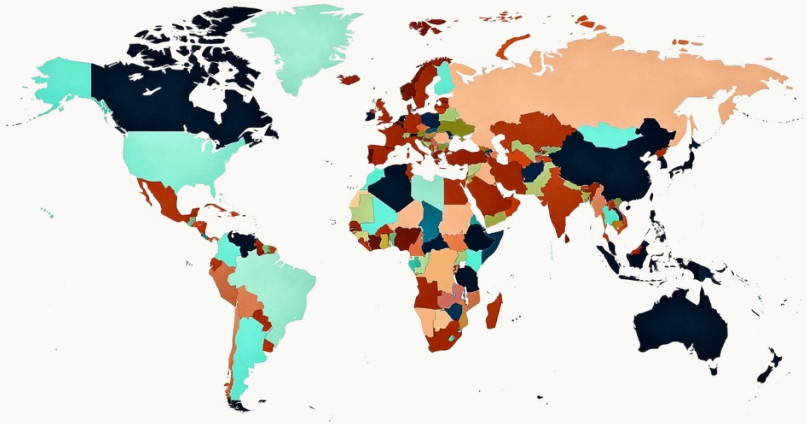
Europe & Scandinavia

Rising clinic referrals and dedicated research programmes across the continent.

USA

Growing debate over classification, with increasing clinical and academic attention.

WHO ICD-11: Gaming Disorder was formally recognised by the World Health Organisation in 2019 — validating clinical concern and enabling consistent diagnosis and research worldwide.



Current Treatment Approaches

Evidence-based treatment draws on approaches proven across addiction and behavioural health, tailored to the developmental needs of young people.

1. **CBT**
   Challenging cognitive distortions around gaming and building alternative coping skills.

2. **Relapse Prevention & Motivational Interviewing**
   Strengthening intrinsic motivation and equipping young people with sustainable recovery tools.

3. **Family Involvement**
   Rebuilding trust and establishing healthy household boundaries around screens.

4. **Co-morbidity Treatment**
   Addressing anxiety, depression, ADHD, and other conditions that frequently underlie gaming disorder.

CASE STUDY

John's Recovery Journey

John engaged with a structured, multi-component recovery pathway over several months:

1. **CBT & Group Sessions**
   Building insight and shared strategies with peers.
2. **Structured Activities & Voucher Work**
   Rebuilding routine and real-world engagement.
3. Supported employment and vocational reintegration.
4. 🎓 **Now Studying at MCAST**
   A meaningful milestone - back in education and building a future.

Our Youth Addiction Clinic

A genuinely multidisciplinary response

Medical

Doctor-led clinic with addiction medicine expertise.

Psychological

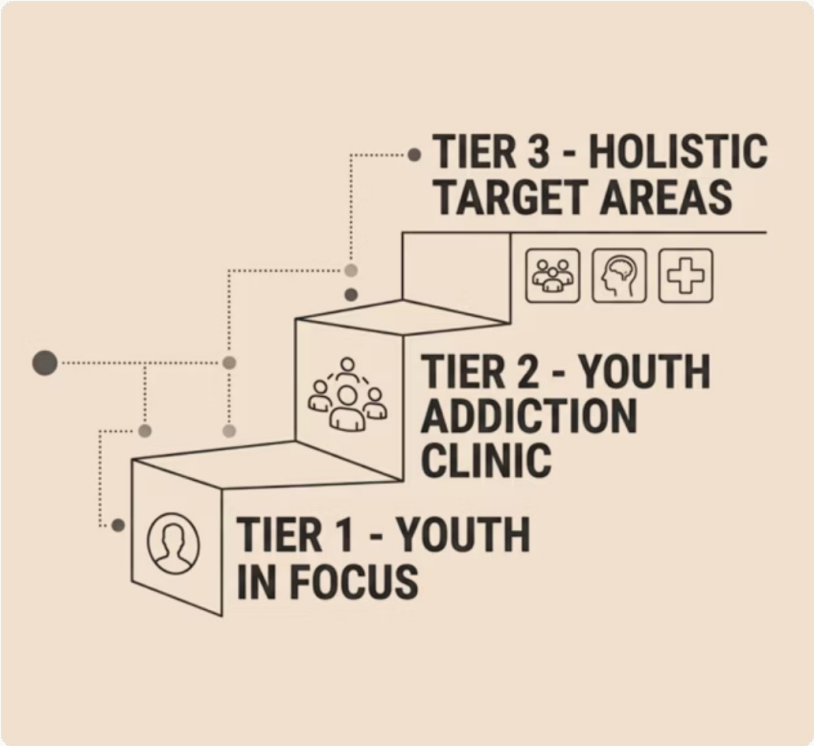
Psychologists delivering CBT, group therapy and motivational work.

Social

Social workers supporting families, school and community reintegration.

Vocational

Supported employment, voluntary activities and educational pathways.



How Our Clinic Functions

1

Youth in Focus
First point of referral. Social worker-led engagement and holistic assessment.

2

Youth Addiction Clinic
Full MDT review: addiction doctor, psychologist, lead social worker. Collaborative care planning.

3

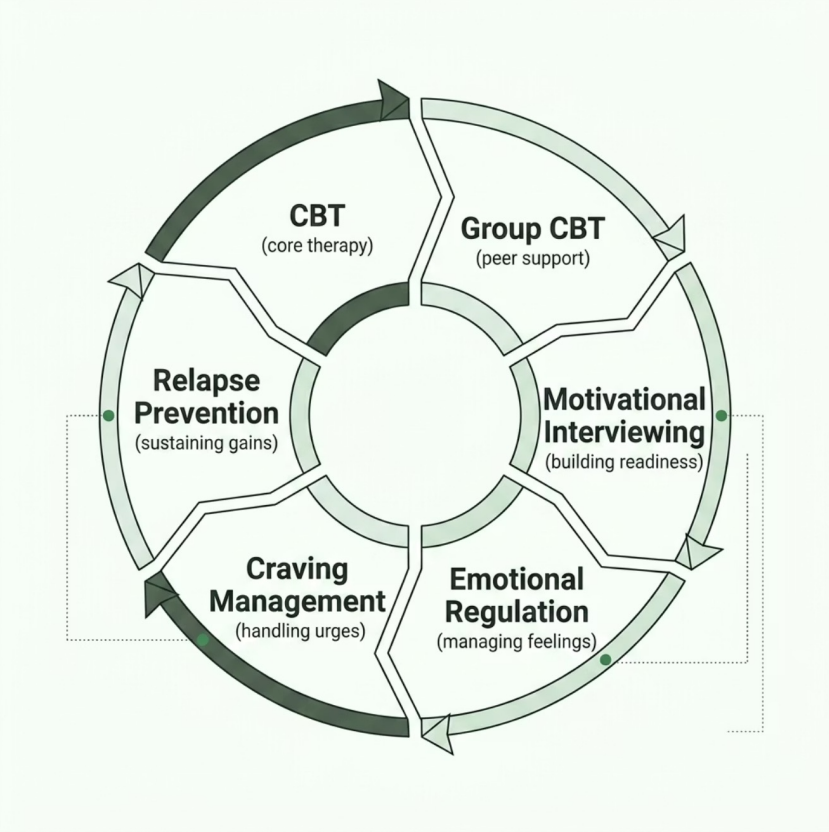
Holistic Targets
Social, psychological, and medical needs addressed in parallel — not in isolation.

Addressing Social Needs

Recovery is not purely internal — it requires rebuilding a life worth living in the real world.

- Rebuilding family relationships and communication
- School reintegration and academic support
- Restoring daily structure and healthy routine
- Increasing real-world social engagement
- Supported activities and vocational opportunities
- Community integration and belonging

Addressing Psychological Needs



Psychological intervention sits at the heart of treatment. Each approach targets a different dimension of the disorder:

- **Motivational Interviewing** — meeting ambivalence with curiosity
- **Emotional Regulation** — building capacity to tolerate distress
- **Craving Management & Relapse Prevention** — sustaining long-term change
- **CBT** — challenging unhelpful thoughts and building alternative behaviours
- **Group CBT** — reducing shame through shared experience

Addressing Medical Needs

Gaming disorder presents with a recognisable withdrawal and dysregulation profile that warrants clinical attention.

Presenting Symptoms

- Cravings & irritability
- Anxiety & depressed mood
- Sleep dysregulation
- Emotional emptiness
- Behavioural dysregulation

Medical Focus

Treatment prioritises **stabilisation**, **emotional support**, and the gradual rebuilding of healthy biological rhythms — sleep, nutrition, activity, and routine.

Comorbid conditions — including ADHD, anxiety disorders, and depression — are assessed and treated in parallel, as they frequently drive or sustain gaming disorder.

Where Do We Go From Here?

Earlier Identification

Screening tools and awareness in schools and primary care.

School & Parental Involvement

Educators and families as first-responders — trained and supported.

Digital Literacy

Teaching young people to navigate the digital world critically and safely.

Healthier Game Design

Advocating for regulation of manipulative design features targeting youth.

More Youth Services

Expanding specialist capacity and international collaboration in Malta.

Thank you!

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