

Internet Addiction (Compulsive Internet Use)

The term “Internet addiction” was first used in 1995 as a diagnostic joke by the psychiatrist Ivan Goldberg. He published a satirical diagnostic schema with the “symptoms” of Internet addiction in the style of the DSM-IV. To his own surprise, his colleagues did not take the essay as a joke. Reactions came in the form of many serious comments from clinicians and scientists who had also observed the phenomenon with concern. Since then, many researchers are concentrated on investigating this mental disorder.

It is difficult to collect data on the prevalence and epidemiology of Internet addiction because there is not yet an established way to examine such patients. The existing studies are mostly random tests and there are no standardized test used. The results of research in the USA show that 6-9% of the population are compulsive Internet users. World wide, it is estimated that about 7% of all Internet users display pathological use. In Austria, an estimated 1 million people used the Internet daily in 2001 (according to the Gallup Institute). According to the Austrian Internet Monitor (AIM), this number had doubled by the end of 2005.

Motivations for Internet use show gender specific trends. Men tend to use the Internet as a distraction and spend more time daily in the World Wide Web. Women are use the Internet primarily for communication and use email more heavily. The following data shows the rise in Internet use broken down by gender:

Question: Have you used the Internet – for work or pleasure – in the last 12 months?

	1998	1999	2000	2001
Men	26%	33%	46%	51%
Women	13%	17%	29%	36%

The main reason the Internet is so attractive to people is the anonymity that it offers. Individual identity must not be revealed and people can keep qualities they don't like about themselves, their appearance and other characteristics secret. Social class is meaningless and contact can be made between people who would not be able to communicate easily or at all

with each other under other circumstances because of social barriers. The Internet can be used to make social contact especially for people with few real relationships. People whose Internet use is pathological tend to rate online relationships as more meaningful than personal contacts. Problems with interpersonal relationships, depression and loneliness can be amplified through a retreat into the virtual world. Fleeing from reality seems to strengthen the development of Internet addiction as low self esteem, problems with integration, loneliness, and social problems fade into the background when the Internet and its protective anonymity are sought. Identity experimentation is also possible with out consequences. Changing work environments, new gender rolls, and ever changing technology require a flexibility that is very difficult for some people to cope with. For these people, the Internet provides an ideal platform where ideas can be played out that they could only attempt in the real world with much effort and consequences.

Internet addiction is counted among the non-substance based addictions which also include shopping, sex, work, gambling and eating addictions. Internet addiction is not yet included in the International Classification of Diseases (ICD-10) or the (DSM-IV). However, the diagnostic criteria in the DSM-IV for impulse control disorders (which includes pathological gambling) can be applied to pathological Internet use. The diagnosis “Internet addiction” is controversial but the efforts are increasing to scientifically explore this phenomenon and develop criteria for a diagnosis.

Advice and help are presently most widely available in the medium where Internet addiction is established namely the Internet itself. Perhaps as a result of the anonymity of these treatment options, more and more affected individuals are taking advantage of them. The high level of competence of Internet addicts in using the Internet also works positively on their readiness for treatment. Several different therapy regimes are presently used to treat Internet addiction. These include behavioral therapy and cognitive-behavioral methods in combination with psychopharmacotherapy (e.g. when depression is also present). Presently, there is no standardized therapy available and an urgent need for the development and evaluation of therapeutic guidelines.