

# spectra

# 130



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# When a behaviour becomes an addiction

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## Definition

What is a behavioural addiction? It's not at all easy to define. Is someone addicted if they play for money at a casino every week, or spend six hours a day on the PlayStation, or love nothing more than buying clothes online? A common feature of behavioural addictions is that things which used to be everyday activities suddenly have absolute priority. The sufferer's life increasingly revolves around the addiction: they neglect their friends, family and job. Their behaviour becomes obsessive and they need more and more of the same. Sufferers can't stop, even if their bank account was emptied long ago.

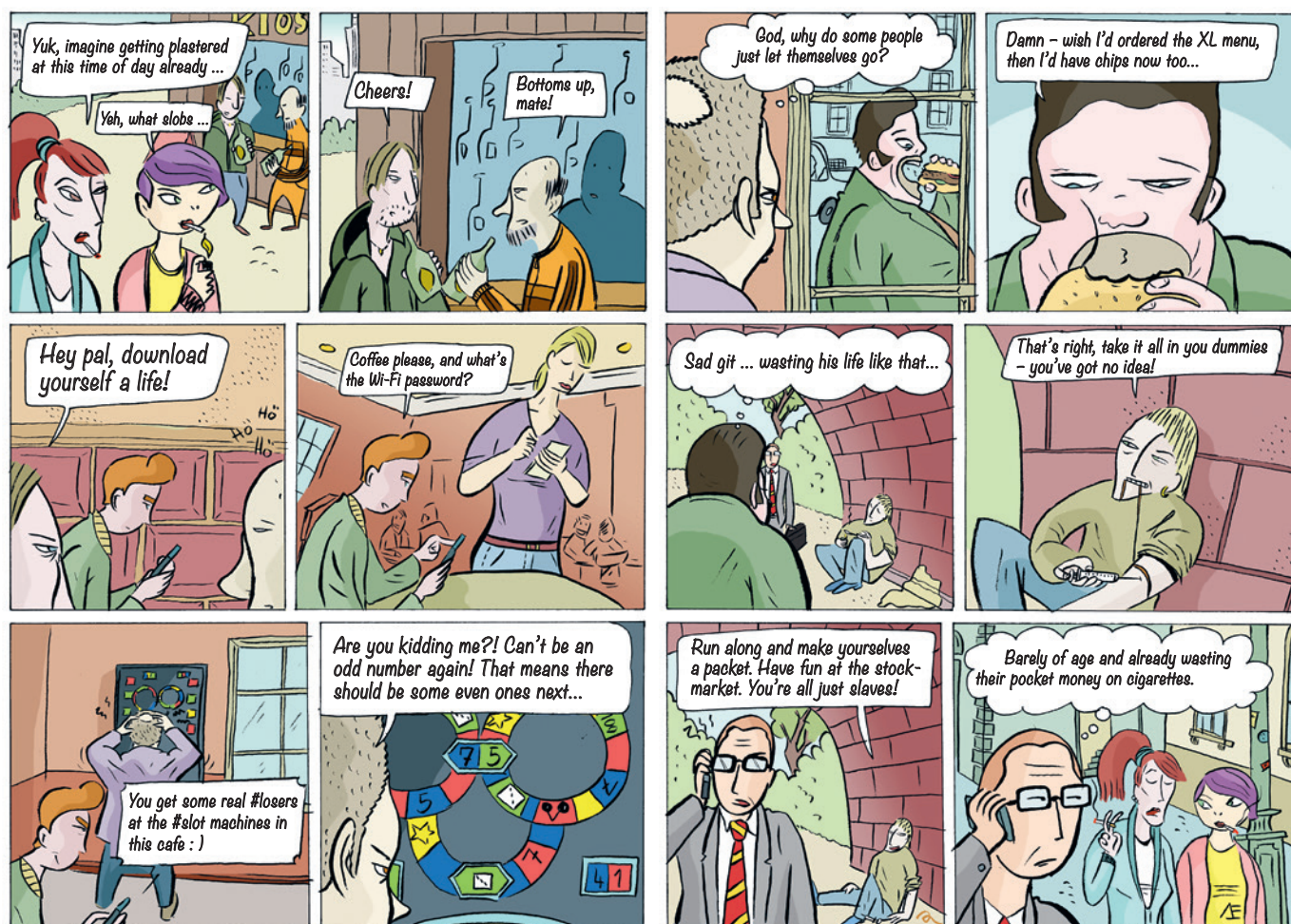
Behavioural addictions are not substance-related – in other words, unlike addiction to alcohol or tobacco, they are not associated with a psychoactive substance but with an activity. Another difference between substance-related and behavioural addictions is that some behavioural addictions are stigmatised less. Work can be addictive, for example, but is often not viewed by society as a behavioural addiction.

On the other hand, there are many common features. The behavioural patterns of sufferers are similar, and comparable biochemical processes take place in their brains. The reasons why an addiction develops are also often comparable. Behavioural addictions help some people to suppress unpleasant feelings – fear or stress, for example. And only a minority of those affected seek help.

Behavioural addictions are becoming an increasingly important component of the addiction problem in Switzerland. The Federal Office of Public Health is currently focussing on the problematic use of gambling, video games, cybersex and social media. These addictions are very prevalent and they are thought to have considerable addictive potential. Yet the particular challenge of careful differentiation when diagnosing an addiction remains. It is also necessary to avoid reaching an incorrect diagnosis too fast in situations in which people passionately pursue an activity or live a certain behaviour.

## Not an isolated phenomenon

Behavioural addictions are not an isolated phenomenon. Many people with behavioural addictions have accompanying psychiatric



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**Where does behavioural addiction begin? And how do we define a behavioural addiction? The answers are not always clear or obvious.**

problems such as impaired sleep, depression or personality disorders. But other correlations have also been observed. People addicted to online gaming often get too little physical exercise and have a poor diet. Some gambling addicts have problems with alcohol, cannabis or smoking. The relationship between the phenomena is unclear – whether an alcohol problem causes a gambling addiction or vice versa.

The figures state the following about equity of opportunity: People with a lower level of education are at greater risk for behavioural addictions. Almost twice as many people in the high-risk online gamer's category have a lower level of education.

Gender also plays a role. It is assumed that, on the whole, men and women are equally likely to be affected by behavioural addictions. Yet women tend more to spend an excessive amount of time with social media, while men are more likely to spend an excessive amount of time gaming online. However, men are more likely than women to

seek therapy. A young woman's excessive use of social media, for example, often remains hidden and is perceived by her parents as being less serious.

The FOPH believes it has a role to play in three main areas relating to behavioural addictions: **research, monitoring and coordination of preventive measures.**

## Research

The purpose of basic research is to expand knowledge about behavioural addictions. To this end, the FOPH has launched a study designed to provide an overview and orientation. For example, the question of the point at which a person's behaviour becomes an addiction is the subject of discussion. The study is intended to identify measurement scales that can be used to classify behaviour as problematic or pathological. It will also seek to organise and define the large number of terms used to describe behavioural addictions. Is there such a thing as an online addiction or problematic Internet use,

or is the Internet simply another medium in which to pursue behavioural addictions?

The globally recognised WHO classification system for medical diagnoses International Statistical Classification of Diseases and Related Health Problems (ICD) provides initial guidance on terms and concepts and on the severity of behavioural addictions. From 2022, this publication will use the terms "gambling disorder" (involving money) and, for the first time, "gaming disorder" (video games) to describe separate clinical pictures. Most other behavioural addictions have not been identified by ICD diagnoses to date. That is why it is so important to establish clear concepts and measurement scales.

## Monitoring

The aim of monitoring is to observe the prevalence and development of behavioural addictions over an extended period of time. Are behavioural addictions increasing? How many people are demonstrating problematic gambling behaviour? The addiction and NCD monitoring



system operated by the FOPH (Mon-AM) provides facts and figures for some behavioural addictions and facilitates observation over time.

### Coordination of measures

The FOPH coordinates activities in conjunction with partners working in the field of addiction, among them the addiction associations, the new “Federal Commission for Issues relating to Addiction and the Prevention of Non-communicable Diseases” and the cantonal addiction officers. Coordination with partners plays an important role in the addiction strategy. An exchange with these partners enables the FOPH to quickly integrate new findings into further research activities. Furthermore, the Parliament has mandated the FOPH to observe the development of prob-

lematic Internet use in Switzerland. The FOPH is being supported in this task by the Expert Group on Online Addiction. The German-speaking professional association “Fachverband Sucht” and the French-speaking “Groupement romand d’études des addictions” (GREA) coordinate the exchange between the group’s members on behalf of the FOPH. The experts agree in their recently published summary report on online addiction that people don’t have an “online addiction” but rather are addicted in the Internet. The Internet is a means of satisfying their addiction. This is an important finding that, for example, will affect the way we record behavioural addictions in the statistics.

And it shows that more knowledge about behavioural addictions

is important to be able to distinguish even more clearly between passion and addiction in the future and to offer counselling and therapy to people with an addiction.

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### Link:

FOPH Behavioural addictions  
<https://tinyurl.com/y3j7l9q3>

Screen use by adolescents  
<https://tinyurl.com/y8u9a2ef>

## At first hand



**Anne Lévy**  
Director of the  
Federal Office  
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(FOPH)

## We must tackle this challenge

In Switzerland, it is much less common to encounter people who suffer from a behavioural addiction than those who are addicted to nicotine or alcohol. In statistical terms, gambling or shopping addiction or the problematic use of social media are barely significant, and yet these addictions are certainly relevant to public health: they have far-reaching consequences for sufferers’ health and their interpersonal relations. Someone who suffers from a shopping or gambling addiction may get deeply into debt and jeopardise their entire future. It is not for nothing that the WHO has recognised problematic gambling behaviour as a disorder. The main reason why behavioural addictions have featured more prominently as a public health issue over the past decade, however, is the change brought about by the Internet and smartphones. Digitalisation has greatly exacerbated the problematic use of the Internet, especially among children and adolescents.

An addiction such as problematic gambling behaviour impacts on whole families and communities. In many cases, the people affected struggle constantly to avoid a relapse. The earlier we identify a behavioural addiction the better – especially where young people are involved. Early identification needs to be accompanied by prevention, and structural prevention measures such as strict protection of gamblers in casinos are particularly effective in this respect.

Thus the FOPH is committed not only to preventing addictive behaviours but also to countering situations in which such behaviours may arise. It is engaged in a dialogue with the responsible federal offices and with cantonal authorities and professional associations in the field of addiction to generate new scientific findings in this area. Of particular interest here is knowledge about the efficacy of preventive measures, such as age restrictions, advertising bans and societal measures for gambling. So that behaviours don’t turn into addictions, we must tackle this challenge – it’s worth it.

## A testimonial

### “Looking back, I’m glad I was found out”

Shopping is a popular pastime for many people. It’s fun to discover new things and try them out. But what if shopping becomes an addiction and shopping sprees blow the shopper’s budget? Read a report by a shopping addict who has asked to remain anonymous.

“I only found out this year that I have a shopping addiction. In fact I started spending more than I could afford over twenty years ago. At the time I was in a relationship with a drug addict. I was naive enough to let myself be persuaded to finance his drug habit. And when my own money wasn’t enough, I found other ways to get more. The relationship later broke up, but it taught me that it’s easy to spend more money than you actually have. And I went on to apply this lesson by buying clothes. If I saw something I liked, I had to have it.

I got into a number of unpleasant situations because of my addiction to consumerism. I had to appear before a court and spend several years paying off my debts. But I always gave those around me the impression of having everything under control. Somehow I always found a way, though it got harder and harder. At the end, the feeling of happiness that the new clothes gave me didn’t even last as long as it took to get out of the shop. My guilty conscience popped up before I’d even left the building.

A year ago, when my significant other found out that I had misused our joint credit card, my house of lies fell apart once and for all. It wasn’t until then that I

was willing to take a serious look at my excessive shopping behaviour. My eyes were really opened during therapy. The penny dropped when I learned that addiction resides in the brain stem, a part of the brain that acts faster than light. And that the cortex, the rational part of the brain, needs to be given love and attention so that it can keep a lid on the addiction.

Looking back, I’m glad I was found out. I feel a great sense of relief at no longer having to hide behind secrets and lies. I now recognise my shopping addiction as a disease for which I can get help. I’m very grateful to my part-

ner for holding me accountable and sticking with me.

I still get the urge to shop, but it’s by no means as strong. I’ve also learned to listen to myself more. I’m now able to sense my feelings more accurately and am more likely to recognise the times when I can risk walking past clothes shops and coming face to face with the objects of my desire. I think that this disease will be with me until the end of my days, but I’m now in the process of learning to deal with it. If all goes well, this will ensure that my shopping addiction will no longer be my downfall.”



# Gambling: help online

The “Win Back Control” project is developing a web-based self-help programme that gamblers can use to get their gambling habit under control. The online programme, which can be used anonymously, is a further counselling option that rounds out the services offered by the cantonal counselling centres.

Anyone wishing to play for money in this country is spoilt for choice. Switzerland has 21 casinos and 9,000 sales outlets for lottery tickets. “This makes Switzerland a country with one of the highest densities of gambling opportunities in the world,” says Michael Schaub, scientific head of the Swiss Institute for Addiction and Health Research. There are about 180,000 people in Switzerland with high-risk gambling behaviour; almost 15,000 people are classified as addicted to gambling. Yet many of those affected hesitate to seek advice. “We estimate that ten per cent of gambling addicts, at most, are receiving therapy,” Schaub says. “Many don’t go to a counselling centre until they have suffered a major crisis.” Moreover, surveys of gamblers have shown that most of them want to resolve their problem on their own.

## Less money and less time

This is the starting point for Schaub’s “Win Back Control” project. It is being financed by organisations including the Prevention in Healthcare (PiH) project funding, which is part of the National Addiction Strategy. “We’ve developed a web-based self-help platform and are now running a controlled, randomised study to test whether it can help gamblers to spend less money and less time on gambling,” Schaub explains.

The researchers working with Schaub plan to enrol in the study a total of 352 regular gamblers who want to reduce their gambling activity or give it up altogether. “Recruitment is now going well,” Schaub says. So far more than 300 people have shown an interest in taking part voluntarily in the study. A randomisation system will determine whether they are given a self-help manual for reducing gambling that was developed in Canada and has been shown to work, or are assigned to the “Win Back Control” programme.

If they join the programme, they will be welcomed to the online platform by Deborah. This imaginary character is an e-coach who motivates participants to keep a gambling diary and complete between five and nine different modules during the eight-week programme. The content of the modules is derived from similar web-based tools that Schaub and his team developed several years ago for cannabis and alcohol users. These modules teach gamblers



## Not many gambling addicts seek help. Can the online tool “Win Back Control” offer relief?

strategies and techniques for resisting temptation, for example, or for getting back on track if they fall by the wayside.

## Effective in the longer term too?

Five basic modules are designed for all participants, and four supplementary modules cover additional topics that are often associated with gambling, such as anxiety disorders, depression or excessive alcohol consumption or smoking. Depending on the answers that participants give at the start of the study, e-coach Deborah suggests to them that they should complete the supplementary modules that are appropriate for them in addition to the basic modules.

The researchers will carry out a concluding survey after the participants have completed the programme to see whether the eight-week programme is still modifying their behaviour six months after it ended. Several studies in other countries such as Finland and Canada have shown that online interventions can also be effective in the longer term. “But our study is the first of its kind in Switzerland,” Schaub says.

Schaub describes the online self-help programme as an “additional module in the healthcare system” that doesn’t compete with but rather complements the services offered by the cantonal counselling centres for gambling addicts. The programme is available anywhere and at any time and can also be used anonymously. According to Schaub, that makes it more likely to appeal to gamblers who so far have been at risk of falling through the net.

He hopes that “Win Back Control” will pass the test. If it does, the programme – currently available in German and French – will be translated into Italian as well. And the professionals working at the cantonal counselling centres will be trained to use the self-help offering in their work. “For a long time psychotherapists and psychiatrists were very much against my ideas for web-based offerings,” Schaub says, “but that changed as a result of the COVID-19 pandemic.” The future belongs to something known as blended counselling, which adds online elements to face-to-face counselling.

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[www.winbackcontrol.ch](http://www.winbackcontrol.ch)

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