

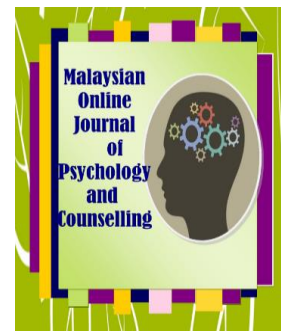
RATIONAL EMOTIVE BEHAVIOR THERAPY AS AN ALTERNATIVE TO DECREASE DURATION OF ONLINE GAME ADDICTION

Achmad Djunaidia*, Nurul Wardhanib, & Ratih Wijyantia

ABSTRACT

Online game addiction is seen as an escape route from real life situations which considers self threatening or giving uncomfortable feeling. Anonymity, social, and achievement elements that offers in online game used by players to cover their weaknesses, achieve recognition and social acceptance to deeply involved in continuously playing online game, even though their daily life is already disturbed and they realized that this activity should be controlled. An irrational perspective in real life situation, comes along with negative emotions, will be treated with REBT. REBT is a therapy approach that emphasize on the interaction between mind, feeling, and behavior. By giving REBT, players could comprehend their uncomfortable feeling, establish insight and self-acceptance, and doing activities that usually being avoided. So, it makes the online game addiction lessen, proved by the decrease of playing duration. This study involving 3 participants, age ranged from 23-25 years old, and having more than 1 year of addiction. Addiction level data was collected by interview, observation, and Internet Gaming Disorder-20 Test questionnaire. Treatment includes of pre-session, 6 REBT sessions, and follow-up session. The data of playing duration before and after treatment then compared. The result shows that REBT is effective to decrease playing duration for the research participants (significant at level 0.024), that is 82 hours, 88 hours and 43 hours per week, become 35 hours per week (suggested playing duration). Participants shows better life functioning and better psychological condition, and establishment of internal control for relapse prevention, so it can say that the participants is no longer be in addiction phase.

Keywords: *Online Game Addiction, Rational Emotive Behavior Therapy*



Volume 6 (1),
June 2019

Department of Clinical
Psychology,
Faculty of Psychology
Universitas Padjadjaran,
Bandung, Indonesia

Corresponding
Author:

a.djunaidi@unpad.ac.id

INTRODUCTION

The case of online game addiction has been widely reported across countries. This fact encourage *American Psychiatric Association* (APA) to include game online addiction into DSM-III and DSM IV as one category, 312.31, *Pathological Gambling on Impulse-Control Disorders Not Elsewhere Classified*, based on inability to control behavior repeatedly, to decrease or to stop the behavior". As goes by developing research, APA found that pathological gambling and game online addiction are not in the same clinical page, because of that, on DSM-V (APA, 2013) Game online addiction was seperated into Section III, that is a condition which needs further research – called Internet Gaming Disorder (IGD).

Online game addiction is not always caused addiction to occur, proved by plenty of online gamers who can feel the pleasure of online game as an entertainment and still shows their normal life functioning. It is contradicted with online gamers who already have addiction, they eong stablish st emotional attachment with avatar ("character" played on online game) and many life aspects that get disturbed.

Game online with genre Massively Multiplayer Online Role-Playing Games (MMORPG), players can choose and modified the avatar by choosing avatar with ideal features, personal outgoing, way of interaction with environment, style of team work and participation into group or community and doing activities together, planning profession flow, how to increase skill, earn money, ownership of valuable items, married, and competitive skills, seniority, reputation, and job position. It makes it clear, that this virtual world become so interesting to be an escape world by people whom feels inferior or have unresolved problems in their life as an effort to compensate their weekness of fulfilling their psychological needs which they can not get in real life (Young, 2009; Blinka, 2008; Davis, 2001). Gamers will play for very long duration of time as an effort to work hard building their stabil position in online game world. As it implication, gamers perception of real world become blurred. They also sees the relationship their having through online means more valuable than their relationship with other people in their real life (Wohlman, 2012).

Experiences in psychological service practice on several people who has online game addiction, both who came by themselves or bought by their parents, shows the belief and irrational thought that impact on emotional comprehension changes and behavioral changes. Academic achievement drastically decreasing and social relation activities goes down. This phenomena leads us to consider using Rational Emotive Behavior Therapy (REBT).

REBT was found by Albert Ellis, whom emphasize on the relationship between thought, emotion, and behavior. These three aspects interact with each other, changes on one aspect can make a change on the other aspects. So, if gamers changes the way they thought about a situation, there is a high possibility that they will develops different emotion, and changes how their reaction to that particular situation.

The application of REBT at online game addiction changes their belief towards real life sitation and negative emotions that occurs along with it, establish insight and self-acceptance, and try to face a real life situation which usually been avoided. REBT works directly in handling the main problem from online gamers, also decreasing possibility for gamers to directly assessing game when faced by unpleasant real life situation. It is manifest into the decrease of online game playing duration.

METHOD

Participants

This research involving 3 participants who has already shows game online addiction symptom for over a year, showed by online game duration (more than 35 hours per week), occurrence of real negative impact on academic, occupation, and social relation, also occurrence of guilty feeling and/or vacuous feeling when playing because of inability to control excessive playing behavior.

Participants ranged from 18-25 years old, which is the most age segment population having serious problem with online game addiction (Hussain, *et.al*, 2012). All of participants are male, because male gamers significantly plays by their impulse to achieve achievement on the game, so it will be easier to manipulate by a number of reward provided in online game (Yen, in Husaain, *et.al*, 2012). Participants voluntarily follows the entire research process. To make things easier, participants are from the same city as researcher, which is Bandung, Indonesia.

Design and Material

This research used mixed methods research design, emphasizing on qualitative methods as a primary data for discussion of research founding (concurrent embedded design). Qualitative and quantitative reseach methods both used hand by hand in collecting research data.

Reseach design used was quasi-experiment, because there is possibility of playing duration decreased influenced by each character of the participants, for example, belief, personality type, commitment toward therapy, game type, and other things that happened throughout therapy process.

Objective

General objectives from REBT is to fix irrational thought of the addicted online gamers, so that they can decrease the degree of online game addiction, showed by the decrease of game playing duration.

Specific objectives from REBT are for the addicted online gamers could :

- Realize that uncomfortable feeling in real life is a normal condition which can happens to everyone.
- Establish acceptance of reality, includes self-acceptance towards self-weaknesses.
- Realize that irrational belief towards game makes they perceive real life situation become more unpleasant and can damage themselves.
- Banish irrational belief that occurs, so that there is positive control toward game by no longer seeking immediate comfort.
- Doing activities on damaged life aspects as a result of excessive game playing pattern.

Instrument

Instrument that used in this research divided into two, that is screening instrument used for making sure whether or not online game gamers already been on addiction phase, to make them eligible on becoming research participant, also instrument that used in Rational Emotive Behavior Therapy (REBT) sessions.

a) Screening Instrument

Researcher used several instruments, such as:

1. Interview and observation

Information that wanted to be collected was demographic data, online game playing pattern, personal understanding when accessing online game.

Unstructured observation used throughout interview process, involving player appearance, level of gamers closure when being interviewed, and also facial expression and gestures.

2. Internet Gaming Disorder-20 Test (IGD-20 Test)

IGD-20 Test is an instrument developed by Halley M.Pontes, Orsoya Kiraly, Zsolt Demetrovics, and Mark Griffiths on 2014. This instrument including 20 items to identify online game addiction or popular with term Internet Gaming Disorder in accordance with diagnostic criteria on DSM-V. There are 6 variables measured in this instrument, such as salience, mood modification, tolerance, withdrawal symptoms, conflicts and relapse. This instrument using Likert scale 1-5. Total score needed for someone to categorized having online game addiction is 71 point out of 100 point on total.

From observation and interview, we found that gamers showed tendency toward addiction, but using IGD-20 test get score below 71 point, it means there is denial attitude of their situation, so need to be confirmed again on items that has low score.

b) Therapy Instrument

Researcher used several instruments, such as:

1. Informed Consent
2. Structured observation

Observation includes:

- Static praesens status / non-verbal status (no rapid changes from time to time), showed by body proportion, eye condition, body condition, dressing style, face appearance, and hair styling
- Dynamic non-verbal (having rapid changes from time to time in accordance to the context), showed by facial expression, visual direction, handshaking, body orientation, studiousness of following therapy process, ability to understanding conversation or instruction given, also other conditions (example: migraine, nausea, frequent peeing, smoking, sweating)
- Verbal, showed by sentence structures spoken, content of the conversation, way to answer questions, volume, intonation, and speaking tempo
- Other conditions, for example, specific behavior or talks, making confirmation to show up during therapy session or not, etc.

Structured observation guideline designed based on addiction symptoms, such as salience and conflicts (Griffiths, 2009; apa, 2013). This observation differs from screening observation because in

this observation, players already become participant, so that this observation conducted in clinical setting (therapy room) with more details.

This observation held twice, done by comparing participant condition before and after therapy (Session I and Session VI). The occurrence of participant condition changes showed attitude toward psychologist/therapist, attitude toward treatment process, and the effect of treatment process they felt within their life.

3. In-depth Interview

Information to be collected was participant's life background, history of online game addiction, by fulfilling guidelines of addiction symptoms according to APA (2013), including Saliency, Mood Modification, Tolerance, Conflict, Relapse, and Withdrawal Symptoms – Beside of that, researchers also want to gain information about how participants perceive their recent situation, and discrepancies that they felt between their condition inside virtual world and real world.

4. Activity Sheets

The research purpose is to see if REBT can effectively decrease online game playing duration on those whom has online game addiction. Activity Sheets used as an instrument to measure playing duration. Activity Sheets is sheets that contains information about activities that participants did for 24 hours, in 7 days time.

This instrument used as a measurement for pretest and post-test, which can show the success of therapy by decreasing of playing duration.

Notes : Decision to measure in 7 days time was because it is one of the indicator of someone whose having or having not online game addiction, was playing duration no longer than 35 hours per week. Other indicator is general health functioning (as eating pattern, sleeping pattern, self-care, physical activities, and vitality), life functionings (as educational/vocational, hobby, warm relationship with friends, spouse, and family), and also having good psychological life.

5. Activity Sheets A-B-C-D-E of REBT

These sheets used for participants to gain understanding of online game addiction by identifying A (activating event), B (beliefs), C (Consequences), D (Disputing), and E (effect), -- also obstacles and efforts to encourage themselves achieving therapy objectives.

6. Evaluation Sheet

This sheet used to evaluate several things that become session agenda. Participants giving their evaluation on how far they felt that they achieve their session agenda.

Procedure

This research consist of 1 pre-session, 6 REBT session that held for 1 month, and 1 – 3 follow-up sessions (tailored by participant's condition).

MALAYSIAN ONLINE JOURNAL OF PSYCHOLOGY & COUNSELING

Pra-session was a stage to filter participants who has similiar characteristics with research subject's characteristics, explains about research objectives and procedures , asking consent from participants by using informed consent, and building good rapport with participants. In the end of the session, participants were asked to fill Evaluation Sheet.

Session I was designed to establish condusive environment with participants, gain further informations about participants condition about online game addiction, also to enhance participants willingness to participate in therapy process by asking them thier personal hope by participating in the therapy. At the end of the session, participants asked to fill Evaluation Sheet, and after that given Activity Sheet to measure playing durationbefore REBT process being done.

Session II was begin by collecting pretest data, which is playing duration using Activity Sheet. Next agenda was to begin REBT process by giving understanding about A-B-C model of REBT. Participants were trained to recognize online game addiction conditions they having with A-B-C model. Beside of that, participants also given psychoeducation about how online game addiction cycle happens and why effort to control playing activities they have already done were failed. At the end of the session, participants were asked to fill Evaluation Sheet, and soon after, given A -B-C worksheet for pracie at home.

Session III consist of 3 plans. Plan A will be done if participants not showing resistance of self-acceptance, understands A-B-C models perfectly, and do their homework. If this happens, then Session III will contnue by giiving participants knowledge and Disputing Technique practice (A-B-C-D model) of REBT – Plan B will be done if participants shows resistance of self-acceptance, or not yet understand A-B-C model of REBT perfectly. If this happens, then session III will continue by personal approach and re-education of session II materials. Plan C will be done if participants not doing their hoemwork. If this thing happens, then researcher will used personal aproach , discussion about obstacles to do their homework, asked to explain their understanding about A-B-C model of REBT, writes A-B-C models of their online game addiction, and continued by giving knowledge and disputing technique exercise (A-B-C-D model of REBT). At the end of the session, participants were asked to fill Evaluation Sheet, after that participants were given Worksheet A-B-C/A-B—D to practice at home.

Session IV consist of 3 plans. Plan A will be done if participants not showing resistabce of self-acceptance, understands A-B-C-D model perfectly, and do disputing technique through homework they already done. Materials will further continues with discussion about disputing effort they have done and Effect (E) they felt (A-B-C-D-E model of REBT) – Plan B will be done if previously, participants did Session III Plan B, so in this session researcher still do personal approach, giving knowledge and Disputing technique exercise (A-B-C-D model of REBT) – Plan C will be done if participants not doing their homework. If this happens then will be done a personal approach, discussion about obstacles participants having in doing their homework, and re-education about A-B-C-D model of REBT. At the end of the session, participants were asked to fill Evaluation Sheet, after that participants were given Worksheet A-B-C-D/A-B-C-D-E to practice at home.

Session V was a session to learn, trains, and enhance A-B-C-D-E model of REBT for participants, and also to train participants preparing themselves from relapse prevention. At the end of this session, participants were asked to fill Evaluation Sheet, after that participants were given Activity Sheet to measure playing duration after REBT sessions done.

MALAYSIAN ONLINE JOURNAL OF PSYCHOLOGY & COUNSELING

Session VI was a termination session. Participants were asked to collect Activity Sheet as post-test data. Participants giving evaluation towards the entire therapy process that has been done, and together with psychologist/therapist see whether their personal hope at the beginning of the session was fulfilled or not. At the end of this session, participants were asked to fill Evaluation Sheet. Psychologist/therapist then terminate the therapeutic relationship and saying thank you for their commitment to follow the entire therapy process.

Follow-up sessions will be conducted in a week, two weeks, or a month interval, depend on necessities. The purpose of follow-up session is to check participant condition after therapy was done.

RESULT

Researcher get 3 participants who consent to do REBT procedural. In general, their characteristics described in Table 1 below:

Table 1
Research Participants

Aspects	Research Participants		
	Participant 1	Participant 2	Participant 3
Sex	Male	Male	Male
Age	24 years old	25 years old	23 years old
Location of living	Bandung	Bandung	Cimahi
Ethicity	Sundanese - Javanese	Sundanese	Sundanese
Religion	Islam	Islam	Islam
Educational Background	<ul style="list-style-type: none"> • Bachelor of Dentistry in one of the Government University at Bandung. (Graduate at 13th semester, GPA 3.01 out of 4.00) • Dentistry Profession Education in one of the Government University at Bandung (second semester) 	<ul style="list-style-type: none"> • Bachelor of Visual Communication Design in one of the private university at Bandung (not graduating) • Bachelor of Business Management in one of the private university at Bandung (not graduating) 	<ul style="list-style-type: none"> • Bachelor of Farming in one of the Government University at Bandung (not graduating) • Bachelor of Accountance in one of the private university at Bandung (semester 9, GPA 1.62 out of 4.00)
Occupation	Master Student	—	Bachelor Student
Marital Status	Not Married	Not married	Not married
Born Sequence	First born of 2 children	Forth born of 4 children	Second born of 2 children
Father.s occupation	Lecturer in one of the government university at Bandung	Convection Businessman	<i>Safety checker</i> of logistic company at Cilegon
Mother's occupation	Housewife, store manager at home	Housewife, Convection Businessman	Nurse
Place of Stay Status	Live with parents	Live with parents	Live with parents
Playing Place	Home	Internet Cafe	Internet Cafe
Playing History	<ul style="list-style-type: none"> • <i>Play station</i> (PS) when in Elementary School 	<ul style="list-style-type: none"> • <i>Online game</i> since Junior High School until now 	<ul style="list-style-type: none"> • <i>Online game</i> since junior high school until now

MALAYSIAN ONLINE JOURNAL OF PSYCHOLOGY & COUNSELING

	<ul style="list-style-type: none"> Play Station and online game when Junior High School <p><i>Online game</i> since in Senior High School until now</p>		
Online game been played	<ol style="list-style-type: none"> MMO – Rhythm (TOUCH) Position: <i>guild moderator</i> MMORPG (<i>Tree of Savior</i>) Player with maximum level 	<ol style="list-style-type: none"> MMORTS (DotA) MMR > 3000 Regularly participating in tournament MMORPG (Tree of Savior) Having several game accounts to play MMO-Rhythm (<i>Idol Street</i>) 	<ol style="list-style-type: none"> MMORTS (DotA) MMR > 3000 MMORPG (<i>Blade and Soul</i>) Player with maximum level
Playing Frequency	Everyday	Everyday	5 days in a week (not playing when holiday or day when there is no class)
Playing Duration	More than 10 hours per day	More than 10 hours per day	More than 6 hours per day
Spend per Month for Playing	Rp 100.000 – 500.000	Above Rp 1.000.000	Rp 500.000 – 1.000.000
Openness regarding Playing Behavior	Open with parents. Parents just focus to ask academic progress, not playing behavior	Open with parents. Parents tend to accept their children’s playing behavior because they think that P2 has already been told and already an adult	Lying to parents
Identification of the length of addiction	Over the last couple of years	Over the last couple of years	Over the last couple of years
Motive for Excessive Playing	<ul style="list-style-type: none"> <i>Achievement</i> <i>Socializing</i> <i>Escapism</i> 	<ul style="list-style-type: none"> <i>Escapism</i> 	<ul style="list-style-type: none"> <i>Achievement</i> <i>Socializing</i> <i>Escapism</i>
Playing Effect	Feels calm (relieve), comfortable, powerful, lonely, and guilty.	Feels calm (relieve), comfortable, but at the same time, feels empty and guilty.	Feels comfortable, challenged, and powerful, but at the same time feels inferior and lonely.
Impact of playing	<ul style="list-style-type: none"> Education Social life Physical condition : Becoming skinnier 	<ul style="list-style-type: none"> Education Vocation Physical condition : Becoming skinnier 	<ul style="list-style-type: none"> Education Social Life Family conflict
Motivation to Participate	<ul style="list-style-type: none"> Internal Dissatisfied with oneself, from the beginning point always has a good academic achievement, always accepted socially, and can control playing behavior 	<ul style="list-style-type: none"> Internal Feels guilty over all the things in life over years which did not work out well because of inability to control playing behavior. External Spouse’s pressure to get married immediately 	<ul style="list-style-type: none"> External Mother’s counsel and pressure to no longer playing online game, instead, going to the college

Specific Description regarding online game playing history from all participants will be explained below:

Participants 1

P1 had online game playing history ever since he still a young boy at home. At the beginning, P1 still able to divide his time well enough, even though he has an interest to play until midnight. P1 still become class top ranks regularly, and he get it not from his parents pressure or demand, but his own will to get an excellence academic achievement above anyone else. P1 was also a popular kid of his peers circle, not only because he had an excellence academic achievement, but also because of his good appearance, and his fun upbringing. The ability to plan life rhythm independently made his parents never try to limit or protest playing habit of P1.

P1 having online game addiction for the last 3 years because of feeling of incapability to achieve good academic achievement. He locked himself daily in his room to play. He no longer motivated for his academic activities. P1 only going out of his home for certain activity that makes him have to go. He lacks sleep. He also not eating much due to feeling not hungry, beside of that he also feels lazy to get out of his room to seek for food because his anxiety to meet his parents whom always asked him about his school progress. P1 also consistently denied his friend's invitation to meet because he no longer feel confident with his academic condition that already fall behind and not progressing, meanwhile in the past time his friends thought that he will graduate first and success soon.

In the online game world, P1 is a senior player, so it makes him widely known with his high level, great fighting ability, having sophisticated equipments, and having good reputation. There is a recognition from online game world, where he given trust to hold an important position as a vice chairman of one of the biggest guild in the online game world. Holding responsibility of guild making P1 feel he need to give great playing contribution as best as he could, handling problems within guild, and helping or guiding the other members whom struggling.

Online game life that he has, definitely contradict with P1 real life. P1 feels having a control in online game world. He become accepted, having achievement, being considered by others, reliable, and having influence. But he still realize that this thing is not right, so guilty feeling and disappointment occurs on him towards himself, whom incapable to control his playing behavior until his condition become worsen in many life aspects.

P1 tries to control his playing activity by managing his playing time or distracting himself into another things, such as watching movie from laptop, but this ways never works out because pleasure he gets from this alternative activities never compensate his needs like he always get in online game world. Inability to handle several situations, online game become a mood modification and escapism facilitation of his inability, loneliness, and guilty feeling. This things become an ever ending cycle, with no way out. So pleasure he gets from the first time he plays, more tend to relieve feeling when he can access the game, but at the same time, he feels empty of his playing activity that he did.

REBT that has already been done to P1 focused on how to change his belief for having more positive self-evaluation, more objective in judging situations, and challenging himself to evaluate if his anxiety of condition that always he avoided, such as reaction from friends and parents when interact with him is really happening.

Participant 2

P2 has already knows online game since junior high school and showed an addiction potention, with several times skipping class to playing online game at internet cafe and playing until midnight. But parents only angry at the beginning, next time parents tend to let him because they feel safe that their children not wandering around outside home, but can easily be found at internet cafe nearby home. As the last child, parents tend to spoiled him and never encourage him for having planning or certain achievement, so it makes P2 grows as an individual who lack on planning skill and lack of effort.

P2 has already dropped out from school twice, he only managed to survive in his first couple of months in college. It happened because he skipped class a lot just to play online game , meanwhile, academic regulation requires absence limit to only 3 times maximum for 1 subject. After that, P2 worked 3 times, which all of those job he can get was from recommendation. His first job was a formal job, that is bank employee. P2 was able to survive his first job for 1 year, but 2 other jobs only last for 3 months with boredom as his excuse.

After 2 years P2 having no job and being in his worst playing patterns, P2 spend almost all of his time at the internet cafe and just come back home to sleep at night, having breakfast/lunch, and take a bath. Pressure to live a normal life comes from his sister and his girlfriend whom insisted to get married with him soon. His parents is not doing anything regarding of P2's playing activity.

P2 himself actually already filled with a tremendous guilt when he plays. He argue a lot with himself why he is still can not stop to play even when he realize that most of his time is wasted for nothing. But at that point, he still does not know what to do. Starting change with commitment is really hard to do because because he is not used to try and online game already become his daily activity, so if there is a change in his pattern or playing duration, he will feel there is something missing in his life.

REBT that has done to P2 focused on how to make P2 more responsible to himself and strengthened his mentality to deal with situations that need more effort as a common things that happens to an adult.

Participant 3

P3 played online game secretly at internet cafe since junior high school, with managing his daily allowance to keep his needs for transportation to the school and playing at internet cafe fulfilled. He also trained to lie and manipulate prove to convince his lies. This pattern still he does until he is in college.

As the last child, P3 always considered as a child who need guidance and examples, differ from his sisters/brothers who seem more independent, dilligent, and has a good upbringing within their environment, so ever since P3 was a child, he went to same school as his sisters/brothers and asked to imitate his sisters/brothers. P3 never used to make his own plans for his life.

When graduating Senior High School, P3 succed to enter government university, eventhough his major is not a favorite one. This thing become a proud for him because he feels like he has already beats his sisters/brothers, whom only can accepted in private university. When his study begins, P3 skipped class a lot only for playing online game. At the end, his lies caught because for several semesters GPA that P3 achieve was so low. P3 then move to the same private university as his

MALAYSIAN ONLINE JOURNAL OF PSYCHOLOGY & COUNSELING

sisters/brothers through informal way to enter college. He also choose the most easiest faculty according to his perception.

At his new university, P3 only passionate in the first semester. He starts to coming back to his early pattern to play, as the semesters pass by, and he is pressured into dropping out of university. Eventhough he has guilty feeling and anxious for that matter, he still has huge emotional attachment toward online game.

Online game world is a world that accomodate his needs for recognition. Psychologically, P3 feels really unconfident with himself. He feels loose from his sisters/brothers because he have to follow same university of choice as them, especially when he was not entering university from formal ways, and he can not keep up with the college activities for the entire time. Beside of that, he feels inferior with his fat body and feels that his presence is not really recognize by his college friends. Moreover, it is not easy for P3 to initiate an interaction and buidling relation with other people.

REBT that conducted for P3 focussed on how to change his belief to be more positive self evaluation, to be more objective at perceiving situations regarding college and education, and also to evaluate whether his worriesabout activities that used to be avoided such as college situation and friends reaction when interact with him are real or not.

REBT Process that has been done to all 3 participants will be explained in more details at images below:

MALAYSIAN ONLINE JOURNAL OF PSYCHOLOGY & COUNSELING

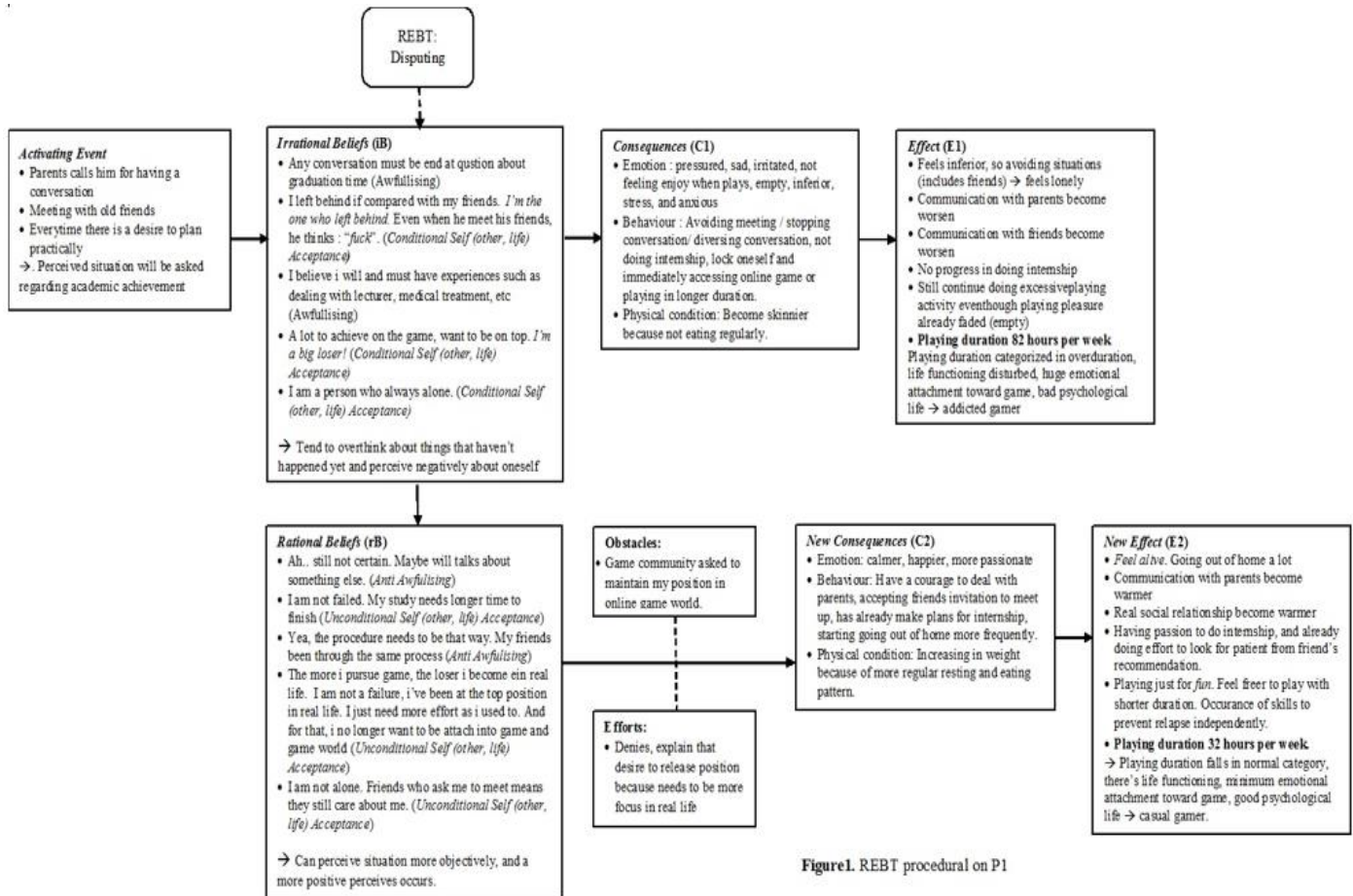


Figure 1. REBT procedural on P1

MALAYSIAN ONLINE JOURNAL OF PSYCHOLOGY & COUNSELING

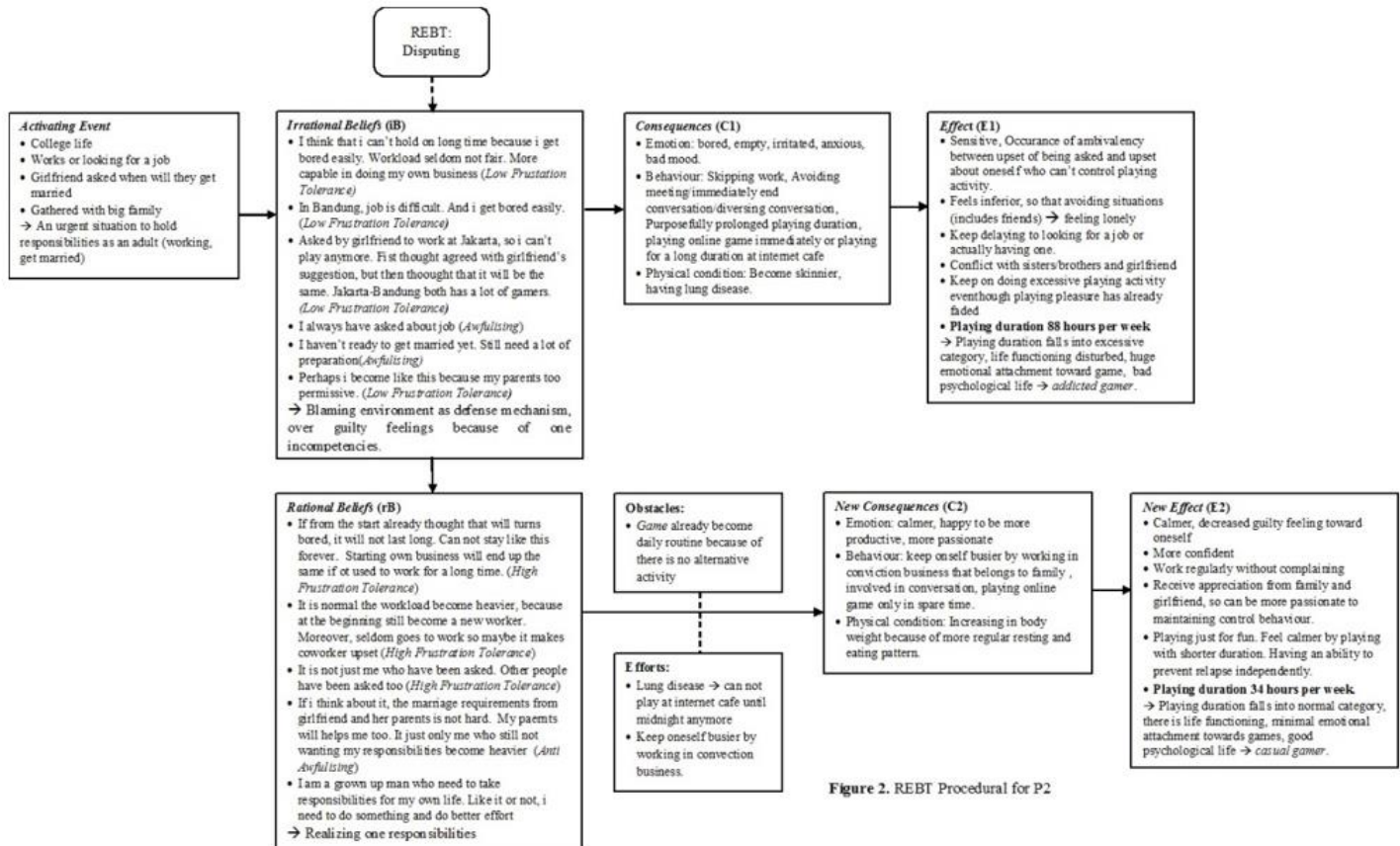


Figure 2. REBT Procedural for P2

MALAYSIAN ONLINE JOURNAL OF PSYCHOLOGY & COUNSELING

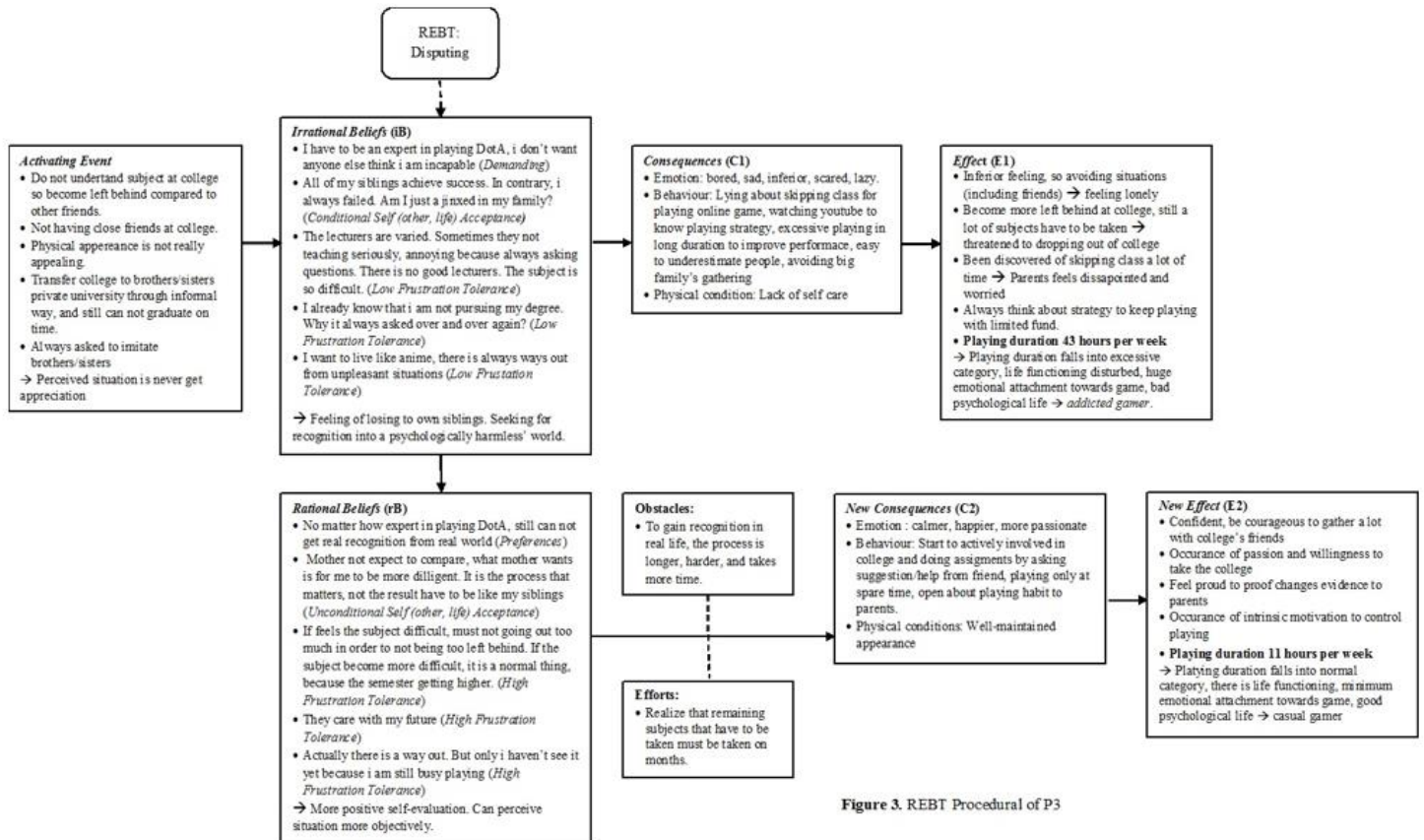


Figure 3. REBT Procedural of P3

Result

The result of playing duration found through number of playing activities written on Activity Sheets before and after REBT sessions be done. As illustrated in the picture below, there is significantly decreasing of playing duration before and after REBT sessions done. This result not only showed from interview and data of playing duration, but also observation from a number of other things, such as more cheerful and lively facial expression, well-managed appearance, steadier and faster footsteps (giving impression of confidence), increasing in body weight for P1 and P2.

The participants have good understanding of themselves regarding online game addiction, so they found their way out to fix their online game addiction and independently take charge of strategy to avoid relapse.

The result of playing duration found from IGD-20 Test can be seen in Figure 4 and 5.

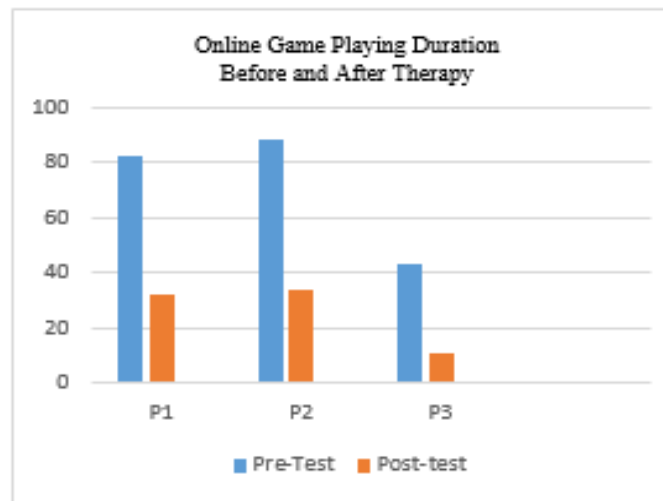


Figure 4. Result of Online Game Playing Duration

Table 2
Comparative Test of Online Game Playing Duration

Tests of Normality

	Kolmogorov-Smirnov ^a			Shapiro-Wilk		
	Statistic	df	Sig.	Statistic	df	Sig.
Pretest	,341	3	.	,846	3	,230
Posttest	,357	3	.	,815	3	,150

a. Lilliefors Significance Correction

Table 3

Test of Significancy of REBT to Playing Duration

Paired Samples Test

		Paired Differences					t	df	Sig. (2-tailed)
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference				
					Lower	Upper			
Pair 1	Pretest Posttest	-45,000	12,288	7,095	14,474	75,526	6,343	2	,024

There is a significantly difference on .024 level of confidence between pre and post test.

DISCUSSION

These are several interesting founding of this research, they are:

1. The participants having history of long time online game playing (since 14 years old – Junior High School), meanwhile online game addiction start to happen at age 20s. This fact strenghten the argument that online game is not making someone addicted from the beginning, but there are situations they can not deal well so online game become their escape haven.
2. All of participants showed similar addiction symptoms, even so, there is differences regarding personality, life background, and addiction dynamic of each participants. It makes REBT process can not be applied exactly the same for each participant. REBT process is so personal, there is different progress and unique qualities through interaction of each participant.
3. REBT is a therapy that consist of several sessions, dan each of it session will be given an assignment, so not only needed motivation to change, but also active participations of each participants when REBT process held and in their daily life. Commitment to participate for the entire therapy is so influential to therapy process. Moreover, willingness from participant to apply new adaptive behaviour after REBT sessions ends is crucial.
4. REBT is not requires warm and closure relationship between therapist, but along within therapy process, we found that adjustment is needed in order to apply REBT in Indonesia context and online game addiction context, where online game players tend to be sensitive because of their worries to get judgement, so their interaction become socratic, dialogue. Similiar with the relationship with researcher and participants that need to have a good and trusting relationship.
5. Participants were already socially isolated and having distant relationship with their friends in real life. Social support in form of sincere attention from real life’s friends is really helpful for participants to decrease their attachment toward community within game world, also to indirectly challenge participants to block their worriness into situations that used to be avoided.

CONCLUSION

The conclusions from this research are:

1. Overall, REBT is effective to decrease playing duration for people who has an online game addiction.

2. REBT is able to work on the cognitive, emotional, and behaviour level by :
 - Changing of point of view to become more rational and more healthy negative emotion when face with uncomfortable situations.
 - Building acceptance toward reality, including self-acceptance toward self-weaknesses.
 - Occuring insight that irrational belief toward game makes comprehension of real life become more unpleasant and harm their self.
 - Forming ability to block irrational belief that occurs, so there is indirect control to access online game or playing for long duration as soon after unpleasant event occurs.
 - Fixing of life functioning by facing the situations or doing the activities that used to be avoided.
3. Every person basically have difference in doing REBT process because of there are unavoided problems in each person, and every person is consider unique from one another.

REFERENCES

- American Psychiatric Association. 2013. *Diagnostic and statistical manual of mental disorder* (5th ed.). Washington, DC: Author.
- Beranuy, M., Carbonell, X. & Griffiths, M.D. 2013. A qualitative analysis of online gaming addicts in treatment. *International Journal of Mental Health Addiction*, 11;149-161, DOI 10.1007/s11469-012-9405-2.
- Blinka, L. 2008. The relationship of players to their avatars in MMORPGs: Different between Adolescents, Emerging Adults and Adults. *Cyberpsychology: Journal of Psychosocial Research on Cyberspace*, 2(1), article 1.
- Davis R. A. (2001). A cognitive-behavioral model of pathological Internet use. *Comput. Human Behav.* 17, 187–195.10.1016/S0747-5632(00)00041-8
- Dryden, W. & Branch, R. 2008. *The fundamentals of Rational Emotive Behavior Therapy: A training handbook 2nd edition*. West Sussex: John Wiley & Sons Inc.
- Dryden, W. & Neenan, M. 2012. *Working with resistance in Rational Emotive Behavior Therapy*. Routledge: New York.
- Ellis, A. & Dryden, W. 1997. *The practice of Rational Emotive Behavior Therapy*: Springer Publishing Company.
- Ellis, A. 2002. *Overcoming resistance: a Rational Emotive Behavior Therapy integrated approach*: Springer Publishing Company.
- Griffiths, M.D. & Meredith, A. 2009. Videogame addiction and treatment. *Journal of Contemporary Psychotherapy*, 39(4). 47-53.
- Griffiths, M.D. 2012. *An overview of online addictions*. Nottingham Trent University.
- Hussain, Z., Griffiths, M.D. & Baguley, T. 2012. Online gaming addiction: Classification, prediction and associated risk factors. *Addiction Research and Theory*, 20(05): 359-371.
- Jacobson, M. & Taylor, T.L. 2003. The sopranos meet EverQuest. Social networking in massively multiplayer online games. In *Melbourne DAC – the 5th International Digital Arts and Culture Conference*. School of Applied Communication, Melbourne, Australia.
- King, D.L., Delfabbro, P.H. & Griffiths, M.D. 2010. Cognitive behavioral therapy for problematic video game players: Conceptual considerations and practice issues. *Journal of Cyber Therapy & Rehabilitation*, Fall 2010, Volume 3, Issue 3.
- King, D.L. & Delfabbro, P.H. 2014. The cognitive psychology of internet gaming disorder. *Clinical Psychology Review*. Volume 34, Issue 4, pages 298-308.

MALAYSIAN ONLINE JOURNAL OF PSYCHOLOGY & COUNSELING

- Kuss, D.J. 2013. Internet gaming addiction: current perspective. *Psychology Research and Behavior Management*, 6, 125-137. DOI:10.2147/PRBM.S39476 PMID:24255603.
- Lee, I., Chen, Y., & Lin, H. 2007. Leaving a Never-Ending Game: Quitting MMORPGs and online game addiction. *Proceeding of DiGRA 2007 Conference*.
- Wohlman, R. 2012. *'Epic fail': How video games and internet overuse create problems with college students*. UMD Health Services.
- Woog, K.M. 2009. *Computer gaming addiction in Adolescents and Young Adults, solutions for moderating and motivating for success*. Computer Gaming Addiction Treatment Services, Pepperdine University.
- Yee, N. 2006. The demographics, motivations and derived experiences of users of Massively-Multiuser Online Graphical Environments. *PRESENCE: Teleoperators and Virtual Environments*, 15, 309-329.
- Young, K.S. (2009). *When gaming becomes an obsession: Help for parents and their children to treat online gaming addiction*.