# The effectiveness of the commercial video game Journey in preventing depression

No registrations found.

**Ethical review** Not applicable **Status** Recruiting

**Health condition type** 

**Study type** Interventional

## **Summary**

#### ID

NL-OMON26252

#### **Source**

Nationaal Trial Register

#### **Health condition**

Depression, Prevention, Adolescents Depressie, Preventie, Adolescenten

## **Sponsors and support**

Primary sponsor: Radboud University Nijmegen, Behavioural Science Institute

Source(s) of monetary or material Support: Radboud University Nijmegen, Behavioural

Science Institute; Sony

#### Intervention

#### Outcome measures

#### **Primary outcome**

Depressive symptoms: Children's Depression Inventory (CDI).

### **Secondary outcome**

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1. Core depressive symptoms (PHQ-2); 2. Rejection sensitivity (Rejection Sensitivity Questionnaire); 3. Narrative Identity (Adapted version of Life Story Interview); 4. Emotion regulation (Children's Response Styles Questionnaire); 5. Self esteem (Rosenberg's Self-Esteem Scale); 6. Dependency (Dependency subscale of the Personality Style Inventory); 7. Hope and Optimism (General Positive Expectancies); 8. Coping Competence (Coping Competence Questionnaire).

Also the following process measures (mediators and moderators) are measured: 1. Flow (Flow as designed by Novak, 2000); 2. Intrinsic motivation (Intrinsic Motivation Inventory); 3. Psychological need satisfaction (Player Experience of Need Satisfaction); 4. Humanization (adapted from Bastian and Haslam (2010); 5. Game experience & evaluation (self-developed questionnaire items).

## **Study description**

#### **Background summary**

In this randomized controlled trial (RCT with 3 conditions), the effectiveness of the video game Journey in preventing depression will be tested in a Dutch sample of adolescents with elevated depressive symptoms. Adolescents with elevated depressive symptoms are randomly assigned to one of two video games or a no intervention control group. The first video game (intervention game) is Journey (Thatgamecompany, 2012), the second game (control game) is Flower (Thatgamecompany, 2009). Both games are provided to adolescents for four weeks and can be played at home. Each game takes approximately 2 to 3 hours to complete. Participants are requested to complete their assigned game at least once, but are allowed to replay the game. Measurements of primary and secondary outcomes will be conducted in all groups at pre-test, post-test, six and twelve months after the intervention.

#### Study objective

The effectiveness of the commercial video game Journey in preventing depression will be tested in a Dutch sample of adolescents with elevated depressive symptoms. In an RCT design the effectiveness of Journey will be compared to the effectiveness to the control game Flower and a no intervention control group. It is expected that the adolescents who play Journey will show lower levels of depressive symptoms during post-treatment and follow-up, compared to the control game group and the no intervention control group.

#### Study design

Primary outcome:

Depressive symptoms: Children's Depression Inventory (CDI) measured at screening, pretest, post-test, 6 and 12 month follow-up.

Secondary outcomes:

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- 1. Core depressive symptoms (PHQ-2) measured at screening, pre-test, post-test, 6 and 12 month follow-up;
- 2. Rejection sensitivity (Rejection Sensitivity Questionnaire) measured at pre-test, post-test, 6 and 12 month follow-up;
- 3. Narrative Identity (Adapted version of Life Story Interview) measured at pre-test, post-test, 6 and 12 month follow-up;
- 4. Emotion regulation (Children's Response Styles Questionnaire) measured at pre-test and post-test, 6 and 12 month follow-up;
- 5. Self esteem (Rosenberg's Self-Esteem Scale) measured at pre-test, post-test, 6 and 12 month follow-up;
- 6. Dependency (Dependency subscale of the Personality Style Inventory) measured at pretest, post-test, 6 and 12 month follow-up;
- 7. Hope and Optimism (General Positive Expectancies) measured at pre-test, post-test, 6 and 12 month follow-up;
- 8. Coping Competence (Coping Competence Questionnaire) measured at pre-test, post-test, 6 and 12 month follow-up;

Process measures (mediators and moderators):

- 1. Flow (Flow as designed by Novak, 2000) measured at post-test;
- 2. Intrinsic motivation (Intrinsic Motivation Inventory) measured at post-test;
- 3. Psychological need satisfaction (Player Experience of Need Satisfaction) measured at posttest;
- 4. Humanization (adapted from Bastian and Haslam (2010) measured at post-test;
- 5. Game experience & evaluation (self-developed questionnaire items) measured at every game play session during the intervention phase and at post-test.

#### Intervention

Adolescents with elevated depressive symptoms are randomly assigned to one of two video game conditions or a no intervention control condition. Participants in the video game conditions are provided with their game for four weeks and are requested to complete the game at least once (2-3 hours) and are allowed to play as much as want.

- 1. Journey (Thatgamecompany, 2012) is a commercial video game that is expected to have depression prevention effects. Journey is minimalistic in its game controls and makes use of simple but powerful game mechanics, making it an accessible game for both frequent and
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non-frequent video game players. The story line of Journey is open to interpretation of the player, but in its bare essence chronicles the journey of the player's avatar from a desert wasteland through the remnants of a lost civilization to the top of a distant mountain. In addition, social interactions with anonymous strangers (limited to one at a time) are a unique part of this game, in which cooperation is encouraged through players being energized by each other's presence. Elements of Journey's gameplay may be linked to positive mental health outcomes and may in fact trigger action mechanisms in the prevention of depression.

2. Flower (Thatgamecompany, 2009) is a commercial video game that although similar to Journey in controls, length and attractiveness is not expected to have strong depression prevention effects, although limited effects may be expected through for example activation. In Flower players accumulate flower petals and cause flowers they pass to bloom. Players explore different environments. There is no co-play option in Flower.

## **Contacts**

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# **Eligibility criteria**

#### Inclusion criteria

1. Adolescents aged approximately 15-18 years; 2. Informed consent from adolescents and parents; 3. Elevated depressive symptoms. Participants are eligible if they score 13 or higher on the CDI score and 2 or higher on the PHQ-2 at screening.

#### **Exclusion criteria**

1. Children with severe depressive score and suicidal ideation (CDI score 30 or higher and/or score 3 on item 9 of the CDI); 2. Previous experience with the video games Flower and/or Journey.

## Study design

## **Design**

Study type: Interventional

Intervention model: Parallel

Allocation: Randomized controlled trial

Masking: Open (masking not used)

Control: Active

#### Recruitment

NL

Recruitment status: Recruiting
Start date (anticipated): 08-12-2014

Enrollment: 290

Type: Anticipated

## **Ethics review**

Not applicable

Application type: Not applicable

## **Study registrations**

## Followed up by the following (possibly more current) registration

No registrations found.

# Other (possibly less up-to-date) registrations in this register

No registrations found.

# In other registers

Register ID

NTR-new NL4873 NTR-old NTR5134

Other : ECSW2014-1003-201

# **Study results**