Understanding and Responding to Pornography Use Among Adolescents\(^1\) Who Have Engaged in Sexually Abusive Behavior: Facts and Considerations for Practice

More and more treatment providers are documenting that adolescents are seeking treatment for exposure to pornography. This fact sheet was created to assist in providing some information regarding pornography and adolescents.

- **How is pornography defined?**
  People often think of pornography as printed or visual material containing the explicit description or display of sexual organs or activity, intended to stimulate sexual excitement.

  This is a ‘pre-internet’ definition and, as such, may not provide a sophisticated enough definition to describe the current pornography with which adolescents engage. In an opinion piece written for *The Conversation*, Ashton & Kirkman (2019) first suggest that, in their review of the literature, they could not identify a consistently used definition. They propose the following definition for pornography: “*material deemed sexual, given the context, that has the primary intention of sexually arousing the consumer and is produced and distributed with the consent of all persons involved.*” This definition differentiates between illegal behaviors that may include ‘sexting,’ ‘revenge pornography,’ ‘child pornography,’ and ‘general violent sexual material,’ which may be illegal.

  Within this definition, it is clear that pornography has varied content. A web search for pornography reveals up to 3 billion results. Some pornography is more explicit than others, some pornography depicts more aggression (both sexual and physical) than others. An adolescent’s stage of development, cognitive/emotional maturity, and life experiences can influence how viewing sexually explicit material can impact the individual. For some adolescents, viewing pornography may impact problematic sexual behavior while for most others it does not.

- **Exposure to pornography in adolescence is now a common experience.** Research suggests that the majority of adolescents have viewed or been exposed to pornography by age 15 (Lim et al.,

\(^1\) While this paper focuses on adolescents, we are aware that pre-adolescents also can be exposed to pornography.
In particular, internet-based, explicit, hard-core pornography is viewed by young people (Mitchell et al., 2014).

- **Most adolescents who view pornography do not experience negative sexual aggressive behavior problems.** Research shows teens who view pornography, on the whole, are no more likely to demonstrate delinquency than those who do not view pornography. Just because a teen views pornography does not mean they are at risk for delinquency. With research suggesting that most young people have viewed pornography by age 15, it is difficult to characterize which adolescents are more likely to view pornography compared to those who are not. It appears that most young people who view pornography are doing so to learn about sexual behaviors or to achieve sexual arousal (Pratt & Fernandes, 2015).

- **Exposure to pornography may be both a viewing and production issue.** Several researchers have hypothesized that sending and receiving sexually explicit messages and naked pictures by adolescents may be in part driven by the normalization of sexual imagery as seen in pornography (Fisher et al., 2019; Lim et al., 2017; Mitchell et al., 2014; Smith, Mitchell, Barrett, & Pitts, 2009). In a study of 2,136 adolescents aged 15-17, over 50% reported having received a sexually explicit text message and over 25% reported sending a sexually explicit photo. Among sexually active adolescent students, 84% reported receiving sexually explicit text messages, 72% reported sending sexually explicit text messages, and approximately 50% reported sending a sexually explicit nude or nearly nude photo or video of themselves (Mitchell et al., 2014). Given the numbers involved (above), when consent exists, this behavior of participating may be seen as a normative, non-deviant behavior in adolescence. It is when consent is not given for distribution or distribution is used as a means of revenge, that the behavior becomes problematic and harmful.

- **Pornography may influence sexual practices, behaviors, attitudes, and perceptions.** An emerging body of research suggests that the consumption of pornography may in some cases influence sexual practices, behaviors, and perceptions of both adults and adolescents when it comes to their view of “what sex looks like” (Pratt & Fernandes, 2015). There is broad consensus within the research literature indicating earlier-onset sexual intercourse, higher rates of casual sex by early adulthood, and sexual aggression by adults, in terms of both perpetration and victimization, associated with adolescent pornography use (Bridges et al., 2010; Wright, Tokunaga, & Kraus, 2015).

- **The role of pornography in the development and maintenance of adolescent sexually abusive behavior is unclear.** It has been hypothesized that repeated exposure to pornography may lead to desensitization and contribute to distorted views of normative, acceptable, or desired sexual behaviors and relationships. For some adolescents, exposure to pornography provides a skewed template for the “how to” and “what” of sexual behavior, and, importantly, provides information and images that are inappropriate for their developmental stage (Pratt & Fernandes, 2015). Young people who engage in sexually abusive behavior often present with deficits in important psychosocial skills (Peter & Valkenburg, 2016), and may lack the developmental maturity to
understand the explicit sexual content of pornography. They may have difficulty recognizing that pornography doesn’t represent “real-life” sexual relationships and behaviors and what people seek in sexual relationships. This also may be partly due to sexual inexperience. Young people who experience, or have a diagnosis of, learning disorders, intellectual disabilities, and autism spectrum disorders may be even less able to critique and comprehend that what they see in pornography does not represent “real-world” sexual practices and relationships.

- **Viewing pornography in conjunction with other risk factors may contribute to the risk of sexually abusive behavior.** Pornography consumption is generally not a ‘stand-alone’ risk factor for either adolescent or adult sexually abusive behavior. Instead, the consumption of pornography may interact with general risk factors in contributing to sexually abusive behavior, as well as sexually specific risk factors such as sexual preoccupation and aggressive sexual ideation, given the frequent depictions of aggressive sexual behavior seen in much pornography (Bridges et al., 2010). We should bear in mind that a significant cohort of young people viewing pornography likely will be sexually inexperienced and may believe that what is depicted in pornography is a reflection of real sexual practices. Results of several studies suggest that this may lead to them pressuring or expecting their sexual partners to engage in sexual acts and scenarios that replicate pornographic scenes and situations (Lim et al., 2017; Pratt & Fernandes, 2015).

- **Assessors must consider the function and role of pornography on an individual basis.** When evaluating sexually abusive behaviors or the risk of sexual recidivism for adolescents, it is important to assess pornography use. If the individual assessment is consistent with the possibility that pornography contributed to offending (e.g., he/she was spending several hours a day watching pornography prior to the offence), then the assessor should explore further to try to get a sense of the extent and nature of pornography’s influence for that individual.

Pornography use may be a driver of sexually abusive behavior. However, this will not be the case for every young person being assessed for having committed a sexual offense. Individual assessments should determine whether a young person’s sexually abusive behavior was driven, motivated, or influenced by pornography at all, and if so, to what extent and how.

- **When pornography is assessed as an active risk factor, healthy skills training is important to develop prosocial skills/habits/lifestyles.** Managing problematic pornography use should be addressed in treatment. Adolescents in treatment for sexually abusive behavior should develop the skills to:
  o Explore the influence of pornography on their sexual beliefs, expectations, desires, and behaviors;
  o Negotiate and develop sexual relationships that are safe, respectful, consenting, and mutually desired;
  o Understand and negotiate what the other person in the sexual relationship wants, and how that fits with their wants (consent and so much more); and
• Understand pornography’s often tenuous link to real-life sexual behaviors, practices, and relationships, with the understanding that those who appear in pornographic movies are actors playing a part that they might not be enjoying.

• **Responses to pornography use must be realistic.** Although abstinence from viewing pornography may be a risk-reduction strategy for adolescents in treatment for sexually abusive behavior that was driven, partially at least, by pornography, this may not always be a realistic goal. Therapeutic responses to pornography use among adolescent clients must recognize this and follow a model that aims to educate, challenge, and correct inaccurate assumptions/beliefs shaped by pornography, and also build healthy sexual self-regulation. Similarly, responses should be developmentally sensitive with regard to the age and developmental level of each young person.

• **Treatment and psychoeducation should include a balanced, rational, and individualized approach to pornography use.** When it is assessed that an adolescent’s sexually abusive behavior was influenced in some manner by pornography, treatment should include a balanced, rational, and individualized approach to address pornography use, in the same manner that other risk factors would be addressed. Treatment should help youth assess whether images and practices shown in pornography are realistic reflections of sexual relationships, consensual, or behaviors desirable to, and respectful of, sexual partners, and characteristic of physically and psychologically healthy social or sexual relationships (Bridges et al., 2010).

Psychoeducation and treatment can help adolescents think critically about pornography. Points to consider in treatment include:

- Pornography portrays sexual performances and behaviors that are generally scripted and unreal, depicted by actors, and not representative of real-life sexual behavior or healthy, safe, enjoyable sexual experiences for all involved parties;
- In many scripted pornography scenarios, sexual practices that are depicted are unhygienic, aggressive or violent, and if used in actual sexual practice, may result in physical or emotional injuries;
- Pornography depicts aggression, in particular aggressive sexual behaviors, as desirable to all involved parties, when this is not the case in most real-life sexual relationships; and
- Pornography may negatively impact body image due to the use of actors who do not represent ‘average’ physical norms.

(The above points reflect the works of Bridges et al., 2010; Lim et al., 2017; Pratt & Fernandes, 2015; Prescott & Schuler, 2011; and Wright et al., 2015.)

• **Educating adolescents about healthy sexuality is a key component of treatment.** For adolescents who have engaged in sexually abusive behavior, the development of healthy sexual practices is key. Sex education should include a focus on understanding potential unhealthy aspects of their pornography use, healthy aspects of future pornography use, positive and healthy sexual practices, relational aspects and boundaries of sexual behaviors, and ensuring that sexual health
and the qualities of healthy, safe, and desired sexual practices are in focus during treatment including:

- Respect;
- Enjoyment of activities;
- Mutual consent;
- Equality and partnership;
- The freedom to say no; and
- The freedom to negotiate equally about healthy, respectful sexual pleasure and activity.
References


