

Pornography Addiction in Teens: Real or Not Real?



Ashely Galsky, PhD

Acknowledgements: Susan Schmidt, PhD

1



Careful with words –
they are so meaningful.

--Josh Rouse

2

Pornography?

- Former Supreme Court Justice Potter Stewart– in defining obscenity/pornography: I don't know what it is, but "I know it as soon as I see it."
- Long and complex history
- Disagreement in the field – presenting challenges to study (sometimes it isn't defined...)
- General elements of definition:
 - Explicit (Wright & Randall, 2012)
 - Includes images of exposed genitals and/or depictions of sexual behaviors (Morgan, 2011) that are "unconcealed" (Peter & Valkenburg, 2011)
 - Is intended to cause sexual arousal (Morgan, 2011)

3

Addiction (SUDs)?

- BROADLY – a pattern of excessive or compulsive behavior, that feels "out of control" (i.e., a person doesn't feel capable of stopping) despite functional impairment.
 - Most experts would also say there is this underlying physiological dependence/cycle of withdrawal as well
 - Alteration of neurochemistry from a chemical introduced from outside of the system

4

Addiction (BAs)?

- Most liberal definition (e.g., Griffiths, 2005), activities such as eating, exercise, smartphone use, etc. can all become addictions (Grubbs et al., 2025)
- BAs vs. SUDs – variability in the field – Grubbs (2022) asserts that they are FUNDEMENTALLY different, yet FUNCTIONALLY the same
 - Distinction between substance you've developed a dependence on versus a behavior that has risen to the level of more of a compulsive behavior
- Not every problem related to self control or with emotional regulation is "an addiction," and frequency of use isn't sufficient
 - E.g., the snooze button (Grubbs)
- Term "addiction" carries with it a strong stigma, sadly
- Overly loose definitions tend to over-pathologize daily life (Billieaux et al., 2015; Hughes et al., 2024) – and may trivialize actual addiction (Grubbs et al., 2025)

5

Porn Addiction?

- "Porn Addiction" is not a diagnosis in any widely regarded manual (e.g., DSM/ICD-11)
- Related research has really accelerated in recent years
 - Most of this research pointing to nuanced understanding of this constellation of behaviors
- "Pornography addiction" is a term propelled by sociological/cultural factors, as opposed to having originated in the scientific literature
- **Consideration of addiction highly influenced by factors such as degree of religiousness (Grubbs et al., 2019, 2022) co-occurs with STRONG shame and distress)

6

Who calls themselves "Porn Addicted?"

FULL-LENGTH REPORT

Journal of Behavioral Addictions 8(1), pp. 88–93 (2019)

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Self-reported addiction to pornography in a nationally representative sample: The roles of use habits, religiousness, and moral incongruence

JOSHUA B. GRUBBS¹*, SHANE W. KRAUS² and SAMUEL L. PERRY³

¹Department of Psychology, Bowling Green State University, Bowling Green, OH, USA

²VISN 1 New England MIRECC, Edith Nourse Rogers Memorial Veterans Hospital, University of Massachusetts Medical School, Worcester, MA, USA

³Department of Sociology, University of Oklahoma, Norman, OK, USA

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Background and aims: Despite controversies regarding its existence as a legitimate mental health condition, self-reports of pornography addiction seem to occur regularly. In the United States, prior works using various sampling techniques, such as undergraduate samples and online convenience samples, have consistently demonstrated that some pornography users report feeling dysregulated or out of control in their use. Even so, there has been very little work in US nationally representative samples to examine self-reported pornography addiction. **Methods:** This study sought to examine self-reported pornography addiction in a US nationally representative sample of adult Internet users ($N = 2,075$). **Results:** The results indicated that most participants had viewed pornography within their lifetimes ($n = 1,461$), with just over half reporting some use in the past year ($n = 1,056$). Moreover, roughly 11% of men and 3% of women reported some agreement with the statement "I am addicted to pornography." Across all participants, such feelings were most strongly associated with male gender, younger age, greater religiousness, greater moral incongruence regarding pornography use, and greater use of pornography. **Discussion and conclusion:** Collectively, these findings are consistent with prior works that have noted that self-reported pornography addiction is a complex phenomenon that is predicted by both objective behavior and subjective moral evaluations of that behavior.

7

Who uses the term "Porn Addiction?"

1334 | Social Forces 99(3)

Constructing Pornography Addiction's Harms

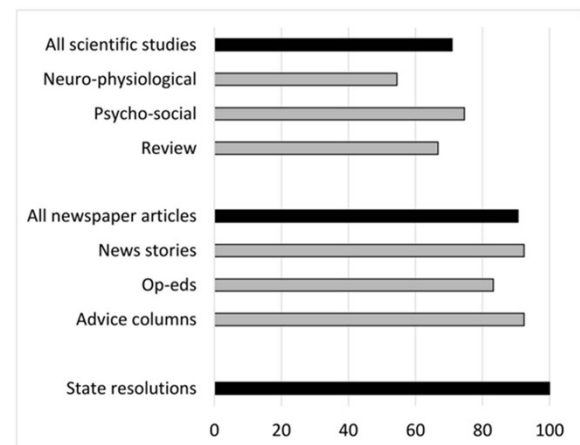
Constructing Pornography Addiction's Harms in Science, News Media, and Politics

Kelsy Burke, University of Nebraska-Lincoln

Alice MillerMacPhee, University of Nebraska-Lincoln

In order to describe pornography's harms in the twenty-first century, an age of unprecedented access to Internet technology, some advocates—including activists, religious leaders, politicians, and scientists—use a medical/scientific framework to claim that pornography is biologically addictive. This article examines public discourse on "pornography addiction" to extend theories of sociology of science and sociology of sexualities about scientific knowledge and the biomedicalization of sex and sexuality. Using content analysis of over 600 documents, including scientific studies, newspaper articles, and state government resolutions, we show how references to pornography as addictive emerged in the twenty-first century and grew most substantially in the last decade. We find that scientific studies largely offer inconclusive results, yet media and political discourses use biomedical scientific language to describe how pornography directly harms the physical and mental health of individual consumers, presumed to be men, and indirectly harms broader society. These include harms to heterosexual marriages and relationships, lawful society, and normal sexual desires. Thus, we find that pornography addiction serves as an illustration of how political actors and journalists are interpreters and claims-makers of scientific knowledge about sexuality in the public sphere. Scientific language, rooted in neurobiology, allows claims-makers to construct pornography addiction as a seemingly objective public threat that legitimizes stereotypes about binary gender and normative (hetero)sexuality.

Figure 2. Percentage of scientific studies, newspaper articles, and state resolutions that support a pornography addiction framework.



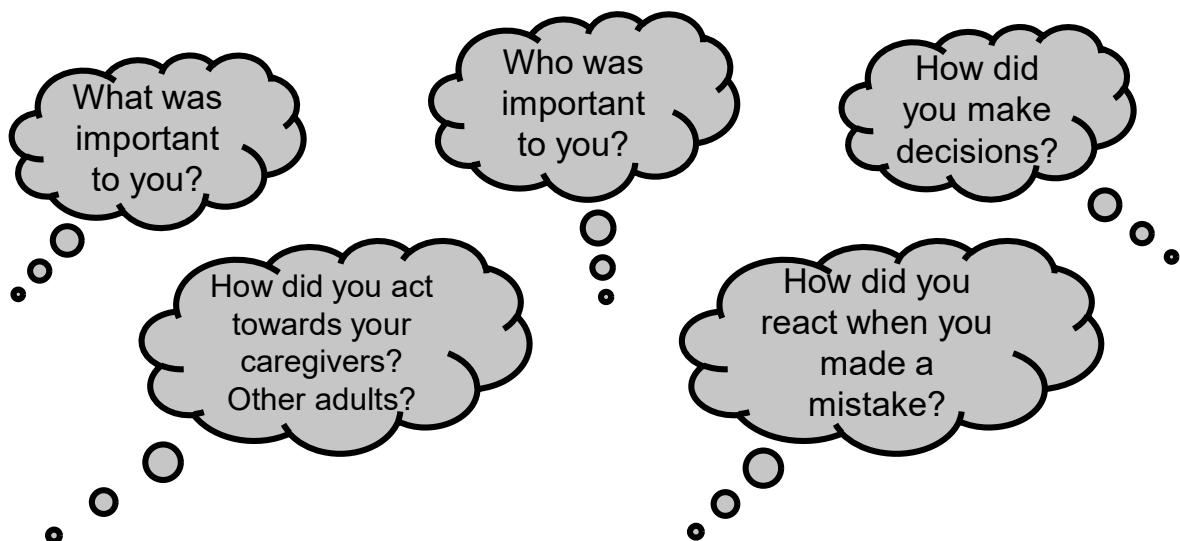
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Risks?

- Detrimental to take on a stigmatized identity for several reasons, but particularly one that isn't even fitting
- SUD methodology has been indiscriminately applied to research and treatment of Bas (Grubbs et al., 2025)
- "Addiction" label unlikely to push people towards treatments that would be most effective for recovery
 - If you try to treat an "addiction" that isn't actually an addiction, you risk making the behavior worse (you end up exacerbating the distress around the behavior)
 - If we focus on structuring someone's entire

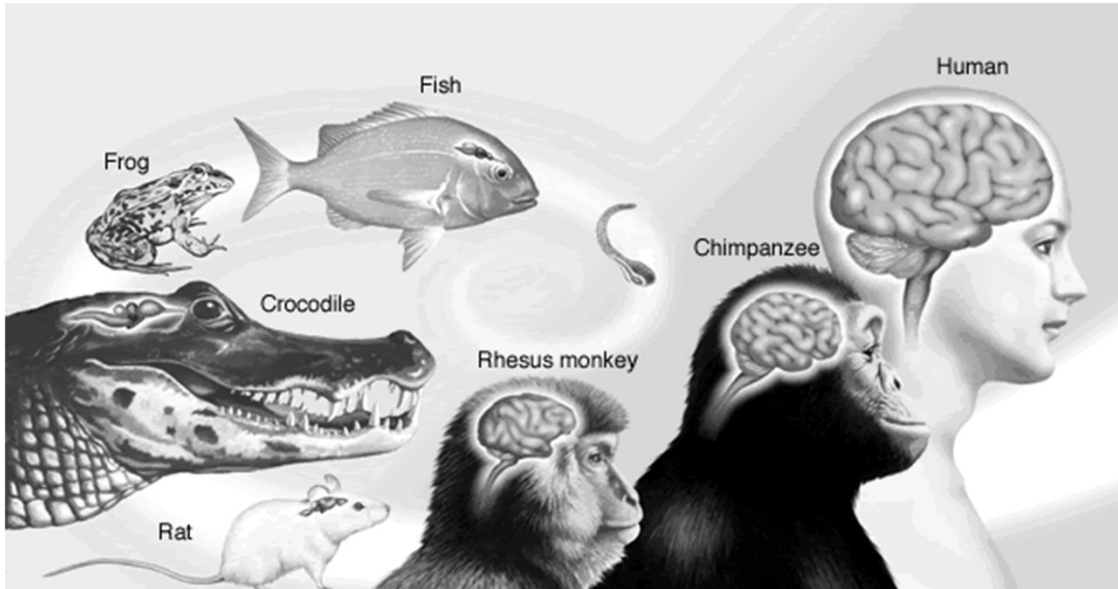
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Taking Perspective: Adolescence



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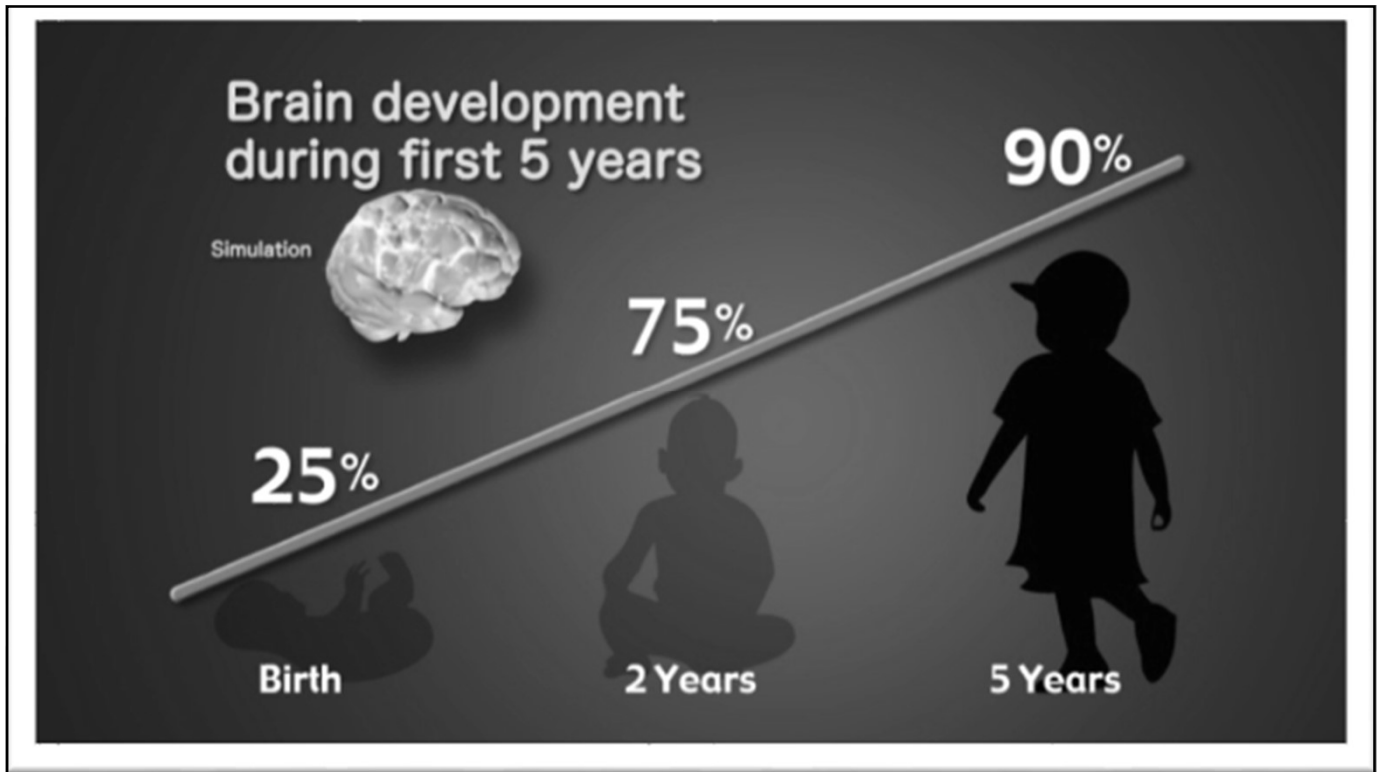
Brain Development



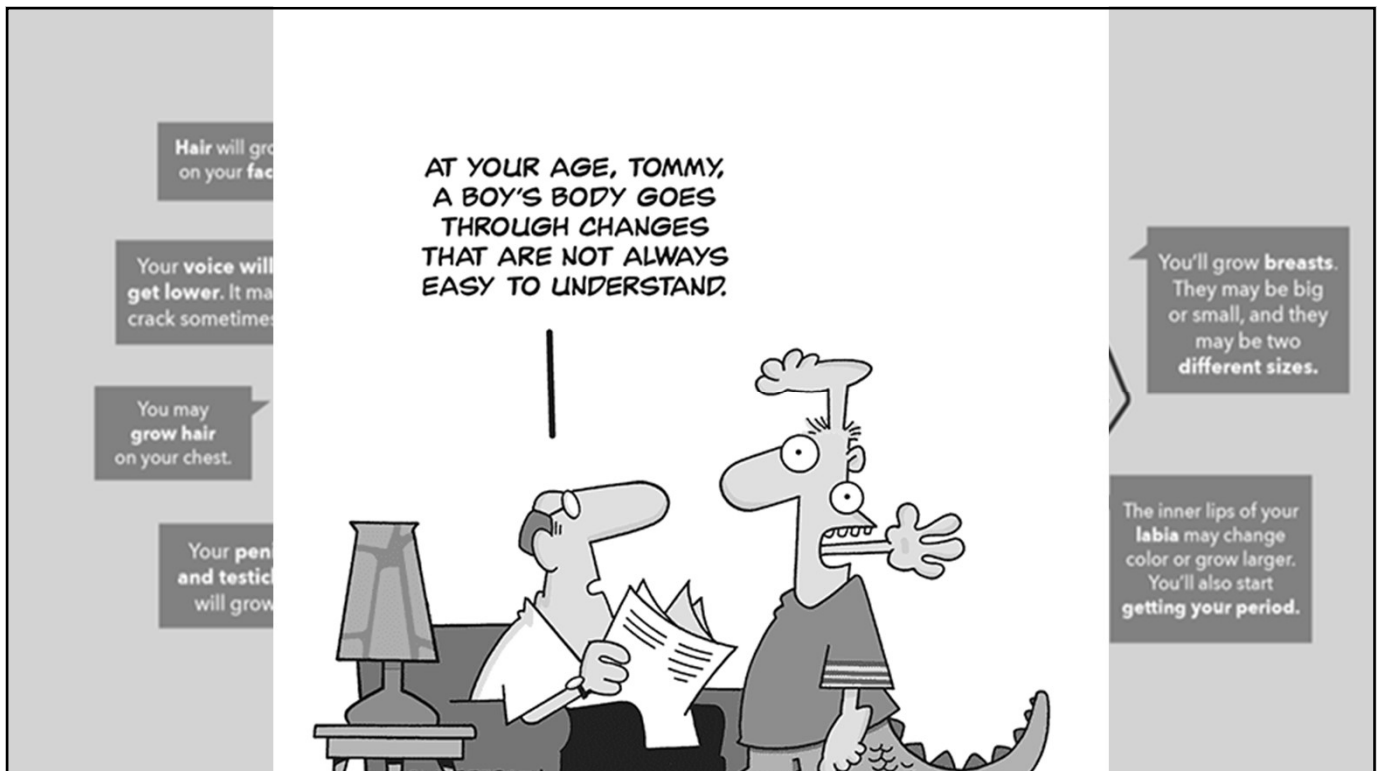
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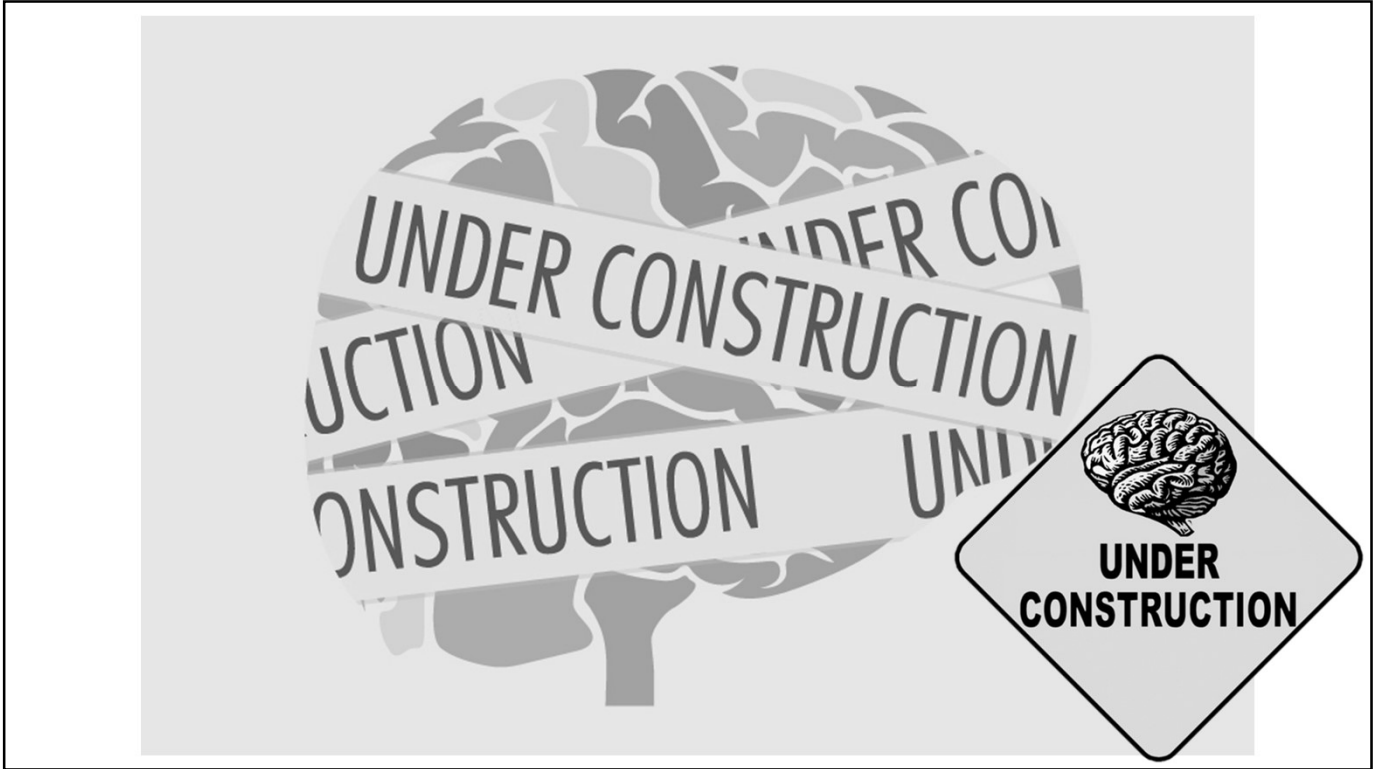
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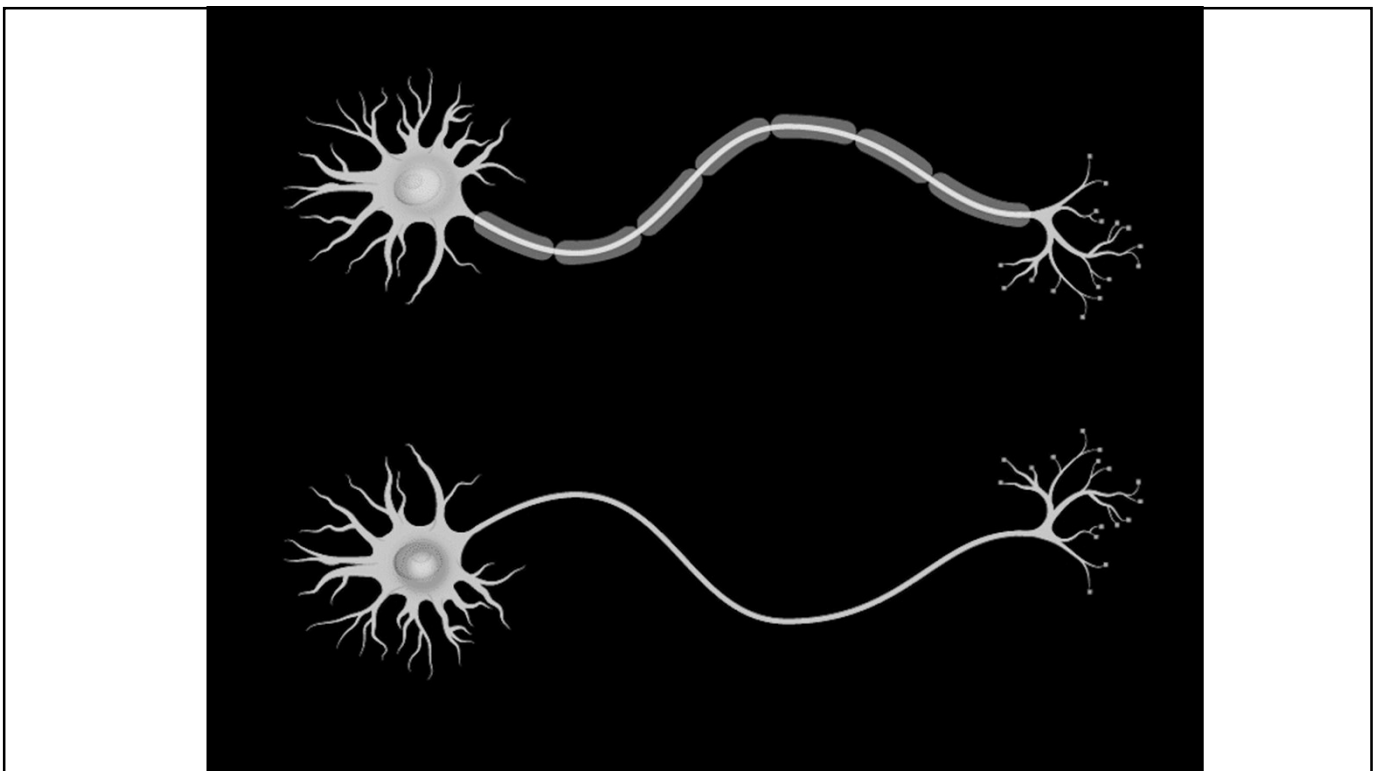
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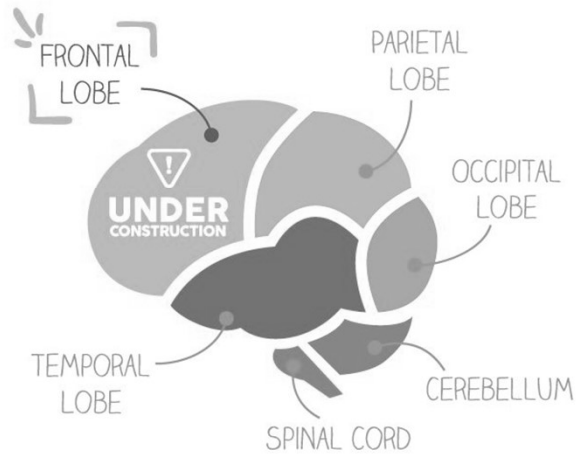
16

Frontal

Executive Functioning - DA

- Planning
- Problem Solving
- Motivation
- Judgement
- Decision Making
- Impulse Control
- Social Behavior
- Personality
- Memory
- Learning
- Reward
- Attention

The Teen Brain



17

For example

When
trash is



18

For example..

Open a few
kitchen
cabinets



ve.

¹@teenagerprotips

19

For example

The proper
way to hang
a towel



show offs

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For example

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21

Terminology

Compulsive Sexual Behavior Disorder (CSBD)

- Included in the ICD-11 (World Health Organization, 2019)
- Cannot be conclusively determined whether considered an impulse control, compulsivity-related, or addictive disorder
 - Concerns with each: e.g., although "compulsive" used in name, WHO acknowledged not a true compulsion (aimed at reducing discomfort)

Problematic Pornography Use (PPU)

- Often considered a manifestation or subcategory of CSBD
- Research has shown that may be associated with *moral incongruence*. Moral incongruence and religiosity are independently associated with self-perceived addiction to pornography (Grubbs et al., 2022).

22

Both PPU and CSBD...

- Typically characterized by repetitive and intense preoccupations with sexual fantasies, urges, and behaviors, leading to clinically significant distress or impairment in social and occupational functioning and other adverse consequences.
 - *Experience of distress insufficient

****IMPORTANT****

- Initial attempts to define these among adolescents have been based on adult criteria
- Remains vastly underexamined for adolescent population

23

Pornography Use and Adolescents

24

Some Stats (Robb & Mann, 2023)

73%

Most teens reported that they have consumed pornography

- 41% of these reported having seen it during the school day
- Nearly half, 44% with school-owned devices

44%

Just under half of teens reported ever viewing pornography intentionally

- 58% reported ever encountering pornography accidentally

43%

Although most teens reported discussing sex with a trusted adult...

- Less than half of teens (43%) reported ever discussing pornography with adults

25

Archives of Sexual Behavior
<https://doi.org/10.1007/s10508-023-02699-z>

ORIGINAL PAPER



Treatment Approaches for Problematic Pornography Use: A Systematic Review

Thiago Henrique Roza^{1,2,3} · Lucas Tavares Noronha² · Augusto Ossamu Shintani^{2,3} · Raffael Massuda¹ · Maria Inês Rodrigues Lobato³ · Felix Henrique Paim Kessler³ · Ives Cavalcante Passos^{2,3}

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Abstract

Problematic pornography use (PPU) is an emerging condition associated with several negative psychological and sexual outcomes. This study aimed to systematically review treatment approaches for PPU. Potentially eligible studies were searched for in PubMed/MEDLINE, Embase, PsycINFO, and Web of Science up to April 1, 2023. The quality of the evidence was assessed with the use of the Joanna Briggs Institute's checklists, the Cochrane risk-of-bias tools, and the GRADE approach. A total of 8936 references were retrieved, and 28 studies were included in the systematic review ($n = 500$ participants). Included studies were case reports ($k = 16$), case series ($k = 1$), quasi-experimental investigations ($k = 7$), and randomized clinical trials ($k = 4$). The majority of included studies presented overall low quality and significant risk of bias, with all interventions receiving a low or very low rating according to the GRADE approach. Most studies investigated psychological interventions, with the predominance of second and third wave cognitive behavioral therapy interventions. Pharmacological treatments included opioid antagonists (naltrexone in most cases) and antidepressants, while one study investigated a protocol that included rTMS.

26

The Association Between Exposure to Violent Pornography and Teen Dating Violence in Grade 10 High School Students

Whitney L. Rostad¹ · Daniel Gittins-Stone² · Charlie Huntington^{3,4} · Christie J. Rizzo² · Deborah Pearlman⁵ · Lindsay Orchowski^{3,6}

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Online pornography is a regular part of many teens' everyday lives. With increased access to pornographic material through the internet, concerns about the effects of pornography are more relevant than ever. Existing research on the influences of pornography on young people show several negative outcomes, including:

- Increased sexual aggression (Wright, Paul & Herbenick, 2021).
- Anxiety, depression, and reduced well-being (Kohut & Štulhofer, 2018).
- Interpersonal relationship problems (Wright et al., 2021).
- Dangerous sexual behaviors (e.g., choking, name-calling, etc.), particularly among boys (Wright et al., 2021).

Research shows some positive effects as well (though mostly with adults), including body acceptance and increased knowledge about sex and anatomy (Hesse & Pederson, 2017). For LGBTQ+ youth in particular, who may use pornography more frequently and who are more likely to say that they use pornography to discover more about their sexuality, pornography could be an important part of self-acceptance (Kubicek et al., 2010).

Pornography Use and Psychological Science: A Call for Consideration

Joshua B. Grubbs¹ and Shane W. Kraus²
¹Department of Psychology, Bowling Green State University, and ²Department of Psychology, University of Nevada, Las Vegas

Abstract
Pornography use is both ubiquitous and controversial in developed nations. Although research related to pornography use has flourished in topical and special-interest journals for several decades, much of this work has remained in the periphery of mainstream interests. The current article reviews how pornography use is likely relevant to various domains within psychological science, particularly emphasizing its significance in relationship research, adolescent-development research, and clinical science. Specifically, pornography use is likely salient to research examining both sexual and romantic satisfaction. Additionally, it is also likely relevant to understanding adolescent sexual development, particularly among sexual-minority populations. Finally, a large body of research suggests that pornography use may become problematic, either because of excessive use or moral incongruence about such use, illustrating its salience in clinical psychological science. Collectively, the current research related to pornography use suggests that it is of interest to multiple domains in psychological science and that its effects can range from positive to neutral to negative.

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https://doi.org/10.1177/0898010122111111
jgrubbs@bgsu.edu
skraus@unlv.edu

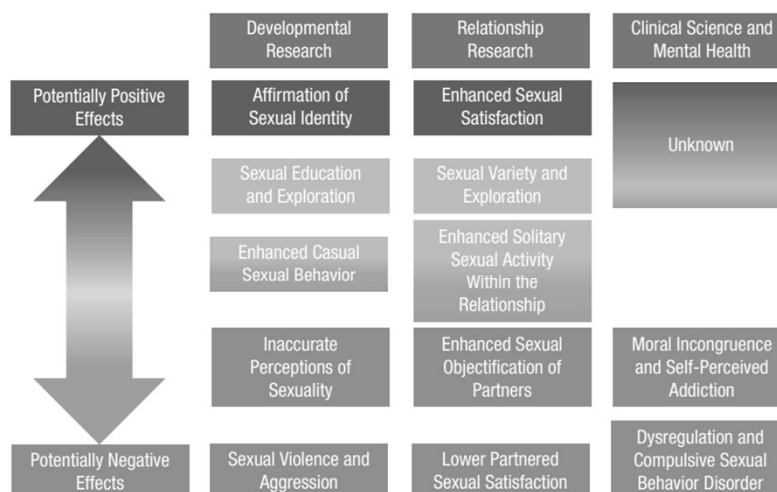


Fig. 1. A conceptual model of the range of effects of pornography use across different domains of psychological research.

TABLE 6. Teens who say they have learned the following from online pornography
(among teens who have ever viewed pornography)

By demographic	TOTAL	Age 13 to 14	Age 15 to 17	Cis Boy	Cis Girl	Transgender/ Nonbinary*	LGBTQ+	Non- LGBTQ+
How to have sex	79%	78%	79%	85%	72%	81%	86%	77%
How to talk with partners	48%	48%	48%	51%	43%	51%	54%	46%
What types of partners I find attractive	72%	71%	72%	80%	61%	76%	80%	69%
What sexual behaviors I am interested in trying	72%	69%	75%	82%	61%	77%	81%	69%
About human bodies and anatomy	79%	78%	81%	83%	74%	87%	85%	78%
What types of sexual behaviors are likely to feel pleasurable to me	73%	70%	75%	82%	61%	78%	81%	70%
What types of sexual behaviors are likely to NOT feel pleasurable to me	64%	64%	64%	71%	55%	76%	75%	60%
What types of sexual behaviors are likely to feel pleasurable to a sexual partner	73%	70%	76%	82%	64%	78%	82%	71%
What types of sexual behaviors are likely to NOT feel pleasurable to a sexual partner	60%	60%	62%	68%	51%	72%	67%	60%

* Small base size; interpret with caution.

29

TABLE 9. Teens indicating that the following groups have taught them about sex (among all teens)

By demographic	TOTAL	Age 13 to 14	Age 15 to 17	Cis Boy	Cis Girl	Transgender/ Nonbinary*	LGBTQ+	Non- LGBTQ+
A parent, caregiver, or other trusted adult	47%	42%	50%	46%	49%	37%	41%	48%
Friends	41%	39%	43%	40%	41%	49%	48%	39%
Sex education in school	32%	30%	32%	30%	34%	30%	32%	31%
Online pornography	27%	28%	26%	30%	22%	35%	36%	25%
TV or movies (non-pornographic)	25%	26%	24%	27%	23%	21%	25%	25%
Sex education videos on sites like YouTube, TikTok, or other apps or websites	21%	20%	22%	22%	20%	20%	25%	20%
Books or other things I've read	20%	20%	20%	17%	22%	33%	30%	18%
School or teachers at school	16%	19%	14%	15%	17%	15%	13%	17%
Sibling or cousin	15%	15%	16%	16%	15%	8%	15%	16%
A doctor	13%	14%	12%	14%	13%	10%	11%	13%
My pastor or religious leader	9%	11%	7%	10%	8%	5%	6%	9%

* Small base size; interpret with caution.

30

PREVENTION

- Current state of evidence shows only limited number of prevention studies addressing pornography education.
- Proposed first level of intervention may involve prevention-oriented approaches such as programs for ***pornography education***, also termed ***pornography literacy***
 - In contrast to abstinence models, proposed that a better way to prevent possible consequences of pornography exposure involves empowering youth with appropriate resources regarding how to consider pornographic material
 - Proposed that this could be offered by schools or other non-school institutions as part of age-appropriate curricula
 - Sex education in schools does not currently include pornography literacy, although some proposed programs exist

31

Pornography Literacy

- Derives from *critical media literacy*, which is an educational approach to helping youth develop critical thinking and skepticism toward media messages
- Have been shown to promote healthier choices among adolescents, and when adopted in sexual-health-education programs, shown to reduce sexually risky behaviors (e.g., unprotected sex) and increase sexual-health-related knowledge

32

Pornography Literacy and Research

- Results of research have highlighted some important topics to address within prevention programs (below), although evidence for the efficacy of these programs is still limited.

Shame reduction

Associated with pornography use

Comparisons

Comparisons between pornography and real-life sexual experiences

Body Image

Exploring concerns about body-image comparisons

Sexual consent

Often not depicted in pornography

Discussing safety

Sexual health and preventative measures of physical safety

Gateway exploration

Discussion of pornography as a gateway to other risk behaviors

33

PROMISING PRELIMINARY FINDINGS

Vandenbosch & Oosten (2017):

- Large sample of adolescents and young adults, longitudinal evaluation of their exposure to sexually explicit internet material (SEIM), sexual objectification of women, and self-perceived learning about SEIM in their sexual-education programs at school.
- **Results:** The more youth learned about SEIM at school, the less strong relationship existed between the frequency of exposure to SEIM and sexist attitudes.

34

ASSESSMENT

- CSBD-19 is becoming most popular screening tool within research for measurements of CSBD
- To date, over 20 scales developed to examine PPU among adults
- Based on findings from recent literature reviews, the most commonly used measures include:
 - Problematic Pornography Consumption Scale (PPCS and PPCS-6; Bothe et al., 202)
 - Problematic Pornography Use Scale (PPUS; Kor et al., 2014)
 - Brief Pornography Screen (BPS, Krause et al., 2020)

35

PPCS-6 can be considered a short, reliable, and valid scale to assess PPU in adolescents and may distinguish between low-risk and at-risk problematic users.

Validity and reliability of the short version of the Problematic Pornography Consumption Scale (PPCS-6-A) in adolescents.

Bóthe, Beáta; Vaillancourt-Morel, Marie-Pier; Dion, Jacinthe; Stulhofer, Aleksandar; Bergeron, Sophie

Source / Izvorik: *Psychology of Addictive Behaviors*, 2021, 35, 486 - 500

Short Version of the Problematic Pornography Consumption Scale in Adolescents (PPCS-6-A)

English Version – Short Problematic Pornography Consumption Scale in Adolescents (PPCS-6-A)

For the following questions, the term 'pornography' is used to refer to: intentionally looking at or listening to: (1) pictures or videos of nude individuals, (2) pictures or videos in which people are having sexual activities

Please think back to the past six months and indicate on the following 7-point scale how often or to what extent the statements apply to you. There is no right or wrong answer. Please indicate the answer that most applies to you.

1 – <i>Never</i>	2 – <i>Rarely</i>	3 – <i>Occasionally</i>	4 – <i>Sometimes</i>	5 – <i>Often</i>	6 – <i>Very often</i>	7 – <i>All the time</i>						
						1	2	3	4	5	6	7
1. I feel that porn is a big part of my life.						0	0	0	0	0	0	0
2. I relax by watching porn.						0	0	0	0	0	0	0
3. I participate less than I used to in other fun activities because of the time I spend watching porn.						0	0	0	0	0	0	0
4. I feel that I had to watch more and more porn for satisfaction.						0	0	0	0	0	0	0
5. When I promise myself not to watch porn anymore, I can only stop for a short time.						0	0	0	0	0	0	0
6. I become stressed when something prevents me from watching porn.						0	0	0	0	0	0	0

Scoring: Add the scores of the items.

36

TREATMENT

Pharmacological Treatments

- Naltrexone and antidepressants
 - SSRIs and SNRIs
- Unsure of the mechanism of action, and one of the current benefits is thought to be associated with treatment of co-morbid conditions

Psychological Treatments

- Second- and third-wave CBT therapies, e.g., ACT
- Mindfulness and mindfulness-based interventions
- Combined interventions

Other Interventions

- Self-help, online tools
- Abstinence
 - Many who self-identify as having PPU encourage abstinence from pornography as the only way to reverse adverse consequences

37



Available online at www.sciencedirect.com

ScienceDirect

Behavior Therapy 47 (2016) 355–366

Behavior Therapy

www.elsevier.com/locate/bsbt

Acceptance and Commitment Therapy for Problematic Internet Pornography Use: A Randomized Trial

Jesse M. Crosby
McLean Hospital/Harvard Medical School, Utah State University

Michael P. Twohig
Utah State University

Keywords: acceptance and commitment therapy; pornography use; treatment

Problematic Internet pornography use is the inability to control the use of pornography, the experience of negative cognitions or emotions regarding pornography use, and the resulting negative effects on quality of life or general functioning. This study compared a 12-session individual protocol of acceptance and commitment therapy (ACT) for problematic Internet pornography use to a waitlist control condition with 28 adult males, all but 1 of whom were members of the Church of Jesus Christ of Latter-day Saints. Measures of self-reported pornography viewing, standardized measures of compulsive sexual behavior and related cognitions, and quality of life occurred at pretreatment, posttreatment, and 3-month follow-up. Results demonstrate significant between-condition reductions in pornography viewing compared to the waitlist condition (93% reduction ACT vs. 21% waitlist). When combining all participants ($N = 26$), a 92% reduction was seen at posttreatment and an 86% reduction at 3-month follow-up. Complete cessation was seen in 54% of participants at posttreatment and at least a 70% reduction was seen in 93% of participants. At the 3-month follow-up assessment, 35% of participants showed complete cessation, with 74% of participants showing at least 70% reduction in viewing. Treatment suggestions and future directions are discussed.

RESEARCH ON PROBLEMATIC INTERNET pornography use is often referred to in the literature as problematic or compulsive sexual behavior, and much of the focus of this research has been on how best to conceptualize and diagnose the behavior. Conceptualizations have included sexual or pornography addiction (Hilton Jr. & Watts, 2011; Orzack & Ross, 2000), sexual impulsivity (Mick & Hollander, 2006), compulsive sexual behavior (Coleman, 1991), sexual compulsivity (Cooper, Putnam, Planchon, & Boies, 1999), out-of-control sexual behavior (Salisbury, 2008), and hypersexual behavior or hypersexuality (Rinehart & McCabe, 1998) which was proposed, but ultimately not included in, the *Diagnostic and Statistical Manual of Mental Disorders-5* (Reid et al., 2012). Three formal classes of disorders have been used to provide criteria and terminology to conceptualize problematic sexual behavior: (a) substance use disorders (Schneider, 1994), (b) impulse control disorders (Grant & Potenza, 2010), and (c) obsessive-compulsive spectrum disorders (Black, 1998).

Table 1
ACT for Problematic Internet Pornography Use Treatment Components

Session	Treatment components	Exercises and content
1	Informed consent	Warning that therapy may result in emotional discomfort Commitment to complete all eight sessions
	Limits to confidentiality	Suicide, homicide, and abuse of children or disabled adults The viewing of child pornography will be reported
	Values	Increasing quality of life Support client goals of either no viewing or reduced and controlled amounts of viewing
	Acceptance	Identify the distinction between viewing and urges to view
2	Acceptance	Short-term vs. long-term effectiveness of attempts to control urges Identify the negative impact of attempts to control urges
3	Acceptance	Highlight paradoxical nature of attempts to control urges using the <i>Man in the Hole</i> metaphor Reinforce the futility of attempts to control urges Identify attempts to control urges as part of the problem using the <i>Polygraph</i> , <i>Chocolate Cake</i> , and <i>What are the Numbers?</i> exercises Discussion of the social contexts that support regulation of private events using the <i>Rule of Private Events</i> exercise
4	Acceptance	Introduce acceptance as an alternative to control using the <i>Two Scales</i> metaphor Review acceptance by demonstrating that the willingness to experience urges is a chosen behavior and alternative to control using the <i>Two Scales</i> metaphor
	Values	Identify the decrease in effort required to willingly experience urges
	Committed action	Brief discussion of client values to give purpose and meaning to acceptance Discuss what could be gained by letting go of the control agenda Behavioral commitments to gradually reduce viewing
5–8	Defusion	Behavioral commitments to engage in value-based activities instead of attempting to control urges Teach the limits of language and its role in suffering using the <i>Your Mind is Not Your Friend</i> intervention
	Self as context	Undermine cognitive fusion using the <i>Passengers on the Bus</i> metaphor Identify the self as the context where inner experiences occur using the <i>Chessboard</i> metaphor
	Contact with present moment	Explain that the client does not choose what inner experiences occur, but that they can choose what to do with them Help the client be present with their inner experiences using the <i>Awareness of Inner Experiences</i> exercise
	Acceptance	Identify the importance of being present while not being heavily attached to inner experiences
	Committed action	Identifying opportunities for acceptance from out of session practice Encourage acceptance of any problematic inner experiences Behavioral commitments to continue to reduce viewing
9–10	Values	Behavioral commitments to engage in value-based activities instead of attempting to control urges Define the concept of values
	Committed action	Clarify the client's values and assess the consistency of the higher behavior with these values using the <i>Values Assessment Homework</i> Behavioral commitments to continue reduced viewing
11	Review	Increased behavioral commitments to engage in valued living based on recent values work Discussion of relapse management using the ACT skills
12	Termination	Review any processes that still need attention Summarize the treatment using the <i>Joe the Bum</i> metaphor Apply ACT processes to relapse management Apply ACT processes to termination Suggest <i>Get Out of Your Mind and Into Your Life</i> workbook for continued progress

Note. Italicized exercises are from Hayes et al. (1999).

38

TREATMENT

- ***Studies evaluating psychological treatments for PPU and CSBD have been conducted in **adults**. Even so, there are still significant limitations presented by the literature.
- Regarding adolescents, therapies involving important family members have been proposed as potentially useful treatment for PPU.
- "Hands-off" is an example of an intervention evaluated → Web-based, 6-week program based on principles of CBT, mindfulness, and motivational interviewing that has shown promising results in a two-arm RCT (**adults**).

39

Hands-off: Study protocol of a two-armed randomized controlled trial of a web-based self-help tool to reduce problematic pornography use

BEÁTA BÖTHE^{1,2*} ©, CHRISTIAN BAUMGARTNER³,
MICHAEL P. SCHAUB³, ZSOLT DEMETROVICS¹ and
GÁBOR OROSZ^{4,5}

¹ Institute of Psychology, ELTE Eötvös Loránd University, Budapest, Hungary

² Département de Psychologie, Université de Montréal, Montréal, Canada

³ Swiss Research Institute for Public Health and Addiction ISGF, Associated to the University of Zurich, Zurich, Switzerland

⁴ Department of Psychology, Stanford University, Stanford, CA, USA

⁵ Université d'Artois, Unité de Recherche Pluridisciplinaire Sport Santé Société, Sberpas, Lille, France

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ABSTRACT

Background and Aims: The past-year prevalence of problematic pornography use (PPU) was 1–6% in adult populations. As a result of treatment obstacles and barriers, such as unaffordable treatments, only a minority of problematic pornography users may seek treatment. Having a free, online, self-help program may overcome treatment barriers and may help those individuals who cannot receive traditional or offline treatment for PPU. Although the effectiveness of such online programs reducing substance use and problematic gambling have been reported, no prior study has examined the efficacy of an online self-help intervention aiming to reduce PPU. **Methods:** This two-armed randomized controlled trial (RCT) will examine the effectiveness of an online self-help program (Hands-off) to reduce PPU, while also considering psychopathological comorbidities. The six-week intervention condition includes six core modules developed to reduce PPU based on motivational interviewing, cognitive behavioral therapy, mindfulness, and wise social-psychological intervention techniques. The target sample size is 242 participants. Self-report questionnaires will be administered at baseline, right after the end of the intervention, at one-month, and three-month follow-ups after the end of the intervention. The primary outcome will be the level of PPU. Secondary outcomes will include pornography use frequency, pornography craving, pornography use-avoidance self-efficacy, sex mindset, sexual satisfaction, negative and positive emotions, and life satisfaction. Data will be analyzed on an intention-to-treat basis using linear mixed models. **Results:** Results will be reported at conferences and published in a scientific peer-reviewed journal. The participants will be sent a lay-person-friendly summary of the results via e-mail.

Table 2. Modules in the intervention condition

Modules	Content
<i>Module 1:</i> Introduction and the possibility of change	<ul style="list-style-type: none"> • General overview • Introduction to fictional companions • Reflections on personal pornography use (e.g., advantages and disadvantages, reasons for change, reviewing useful resources for a change)
<i>Module 2:</i> Why do I watch porn, and how can I change it? Identifying internal and external risk situations	<ul style="list-style-type: none"> • Identification of the internal and external risk situations that can lead to pornography use • Learning how to deal with these risk situations
<i>Module 3:</i> How to feel better without porn?	<ul style="list-style-type: none"> • Learning how to change personal pornography using habits • Learning how to integrate joyful activities into everyday life
<i>Module 4:</i> What can I do about my cravings?	<ul style="list-style-type: none"> • Identification of personal triggers for cravings • Learning strategies to reduce craving
<i>Module 5:</i> Behaviors, Emotions, and Thoughts (BET): I BET you can do it	<ul style="list-style-type: none"> • Getting to know automatic negative thoughts and the most frequent common thinking errors • Learning about the relations between one's thoughts, emotions, and pornography use • Learning strategies to challenge automatic negative thoughts and develop balanced thoughts
<i>Module 6:</i> How to preserve your success?	<ul style="list-style-type: none"> • Reviewing the main contents of the previous modules • Identification of one's toughest moments in the program and how he/she overcame them • Planning strategies to prevent relapses to previous pornography use habits
<i>Booster module:</i> Success in the long run	<ul style="list-style-type: none"> • Reviewing one's past month and the strategies he/she used to reduce his/her pornography use and to improve his/her mood • Making plans for the future to preserve success in the long run

40

Future Directions in Preventing and Treating PPU in Adolescents

Despite the existing programs on pornography education for adolescents, much work remains to be done, taking into account the following aspects. First,

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Problematic Pornography Use in Adolescents: Fro

there appears consensus that content of pornography education should be age-appropriate and delivered in a safe, inclusive, and supportive environment [65]. It is recommended to integrate elements of sex and relationship education by discussing topics related to physical safety and health intimacy, under a perspective that is sensitive to gender and different sexual orientations. Other core topics of pornography education include the unrealistic representation of sex in pornography compared to real life, body-image considerations in pornography, and sexual, often gender-based or race-based violence [25–27, 66].

41

What do you think?



42

Thank you for joining today!

Ashley-Galsky@ouhsc.edu