

## Article 10

### Teenagers and Pornography Addiction: Treating the Silent Epidemic

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Adolescent curiosity about sexuality is a normal and healthy aspect of human development. For many generations of American youth, sexual exploration included such actions as sneaking peaks at pictures of naked indigenous peoples in *National Geographic* or perusing the underwear ads in the Sears catalog.

Today, however, the scene is very different. The Internet and cable television have ushered in an age of unprecedented access to hardcore pornographic images, and teenagers are jumping in head first for the ride. Once young people had to work to find pornography (often from the trash or a friend's father), but today children with rudimentary computer skills can find thousands of x-rated images with a couple of clicks of their computer mouse, and many youth are subsequently being inundated with sexual stimuli before they have the developmental capacity to integrate the material into their healthy sexual identity formation (Benedek & Brown, 1999).

Much of the issue with teenagers reflects the broader social reality that pornography has gone mainstream. What once evoked images of sordid shops where dirty old men in trench coats gathered is now routinely consumed by individuals of all races and socioeconomic strata in the privacy of their own homes, and the big players in the pornography distribution market are no longer mob-controlled fringe entities but Fortune 500 companies like AOL Time-Warner, AT&T, and General Motors, who have all distributed mass quantities of pornographic material through their cable and satellite subsidiaries over the years. At the same time, programming aimed at teenagers, such as MTV, routinely show young people engaged in sexually charged situations and casually discussing once-taboo topics such as masturbation and "hooking up." What's more, the Internet and cable television promise the curious teenager the added benefits of anonymity, secrecy, and a sense of safety (Schneider & Weiss, 2001). For a teenager who is unsure of his or, yes, her sexual identity, pornography can be like a trip to the ultimate candy shop, where they can revel in the new euphoric feelings while anonymously connecting with others who share their sexual tastes.

Indeed, the amount of pornography available to young and old alike has roared into everyday life so overwhelmingly that it has challenged the ability of social science to create models of treatment and outcomes to keep up with the pace of change (Fisher & Barak, 2001). What is certain, however, is that for many young people, pornography is not a casual interest, but an addictive force that is leading to a quiet epidemic of young people who cannot control their online or television habits. And because of their accessibility, the Internet and cable porn channels have become the super fix for a new breed of addicts who literally sacrifice health and happiness to indulge in the magic images they quietly worship.

#### Effects of Pornography on Teenagers

The exact effects of pornography on young people is a hotly debated topic, as few empirical studies exist which definitively examine the issue. Reasons for this dearth in clinical research include the reluctance of many teens to talk about their sexual habits and the monumental ethical dilemmas of setting up research studies involving youth and exposure to pornography. Nevertheless, numerous studies have pointed to the potential for serious harm.

Benedek and Brown (1999) noted several negative effects of pornography on young people. These included modeling and imitation of inappropriate behaviors; unhealthy interference with normal sexual development; emotional side effects (including nightmares, and residual feelings of shame, guilt, anxiety and confusion); stimulation of premature sexual activity; and the development of misleading and potentially harmful attitudes toward sex. Other risks have been suggested ranging from aggressive patterns of acting out sexually, the depersonalization of woman (and now men and children), and an increased risk of poor social bonds as adults (Stack, Wasserman, & Kern, 2004) to the very real possibility of developing a pornography addiction, a relatively new but pervasive phenomenon which has been confirmed by research (Griffiths, 2001).

Pornography can create a powerful biochemical “rush” in the user. When a teenager is subjected to an arousing image, the adrenal gland secretes epinephrine into the bloodstream, where it proceeds to the brain and locks the image in. Once this has occurred, the simple thought of the image can trigger a feeling of arousal. I have encountered many adult clients who can still vividly recall the first pornographic image to which they were exposed as a child or teenager. Other body chemicals, such as serotonin, adrenaline, endorphins, and dopamine also are at play creating a euphoric state in the user. Teens who experience this biochemical thrill will, not surprisingly, want to experience it again. From this standpoint, it is sometimes helpful for practitioners to see pornography not as just a social issue, but as a drug because the addictive mechanism is clearly part of the danger when teenagers habitually use pornography.

### **Multicultural, Gender, Religious, and Socioeconomic Considerations**

Some critical cultural, religious, and socioeconomic factors with pornography and youth warrant mention. Some cultures have much broader parameters surrounding what is considered appropriate with sexuality, while cultural norms within other groups make the topic almost unmentionable. Therefore, practitioners must attempt to educate themselves about cultural mores. Also, it must be added that while the majority of youth who develop problems with pornography are males, a growing number of teenage girls are discovering their own dependence upon pornography (and in some cases online chat rooms), or are turning to it as a model for their own sexual development and activities. According to Carnes, Delmonico, and Griffin (2001), of the population that has developed severe problems with sex on the Internet, 40% are female.

Similarly, approaches to spirituality and religion can have a profound impact on a teenager’s sexual development, and not always in the way that a parent intends. For example, some youth who come from rigid and legalistic religious backgrounds that wrap sexuality in shame and guilt, try to forcefully repress their desires, which causes them to unconsciously bond with the same profane elements they are trying to ignore. When they act on these repressed desires, the resulting shame and self-loathing just perpetuates the cycle.

Also, while teenagers who grow up in homes with multiple computers and a high degree of computer literacy have more opportunities to engage in online behavior, some of the young people who are most vulnerable to pornography are those who come from

low socioeconomic and more challenged backgrounds. According to Benedek and Brown (1999), teenagers who grow up in single-parent homes (especially when the television is used as a babysitter) are particularly at risk, as are youth with emotional and mental challenges, and teenagers who have been prior victims of physical or sexual abuse.

### **Therapeutic Considerations**

While treatment plans vary strongly by circumstance, there are some important considerations to remember for professionals who are working with teenagers on this sensitive issue.

#### *Reduce Shame*

Needless to say, for many youth who are struggling with pornography, shame is a major factor. When you first meet the client, it is not unusual for him or her to avoid eye contact, and be hesitant to answer questions. The practitioner should attempt to minimize shame by being supportive and nonjudgmental about the struggle.

#### *Normalize the Issue*

Many teenagers who are developing compulsive pornography problems do so in agonized isolation, often believing that they are perverts and alone in their actions. It can be helpful for the professional to educate them on the prevalence of the issue while still clearly communicating the dangers so they don’t trade their isolation for an “oh well, since everyone is doing it...” idea, for that is common too.

#### *Respect Cultural Norms*

As previously mentioned, culture can strongly influence the manner and degree to which a teenager is willing to discuss his or her sexuality. A girl who comes from a Southeast Asian immigrant family may approach the topic very differently than a male from Central America. It is crucial that the counselor be sensitive to these differences, and recognize that sexual patterns and gender expectations can be some of the strongest cultural norms within a given group, and they cannot be treated lightly or exclusively from a purely Western European orientation. Similarly, in many cases, because of the sensitivity of the subject matter, a female client might be more comfortable with a female counselor and vice-versa.

With all clients, it is helpful to gain an understanding of their sexual parameters, and to help them define their boundaries if they are unsure where to draw them. A helpful tool for this is the circle plan (Carnes, Delmonico, & Griffin, 2001) in which three

concentric circles are drawn representing healthy sexual behaviors (outer circle), boundary or uncertain behaviors (middle circle), and bottom-line or off-limits behavior (center circle) and helping the teenagers define where they stand. Aiding the clients in the creation of these boundaries in a safe environment will help equip them to not have to make snap decisions about where to draw the line in sexually charged, real-life situations.

#### *Be Aware of Your Own Value Set*

One of the fundamental mistakes practitioners make when dealing with youth and pornography is to willingly or inadvertently reveal, or even attempt to impose, their own religious or moral values. Professionals must never make assumptions about values of their clients (or their families), nor try to impose personal religious or moral viewpoints, even if they feel it is in the best interest of the client. Also, it is very important to closely monitor any self-disclosure about your own sexual experiences.

#### *Never Underestimate the Power of the Addiction*

With pornography, professionals sometimes fail to understand the power of the compulsion youth are facing, and it is not uncommon for school, religious, or private-sector professionals to advocate a simple treatment plan that is based upon willpower or moral character. Since pornography can be an addiction, these “just say no” types of approaches are likely to only create more frustration and self-defeating ideation in teenagers who do not have the willpower to stop. For such young people who can no longer control their actions, the intervention and treatment modality must recognize the problem as a full addiction, and treat it with the same consideration given to alcohol or chemical substances.

### **Safeguards**

Because we live in such a sexually charged culture, there is no way to totally isolate teens from exposure to inappropriate or harmful sexual content. Several of my clients had parents who sent them to private religious schools in an attempt to insulate them from issues like pornography, and they became addicted nonetheless, some from images smuggled into the school on cell phones. Indeed, since the goal of totally shielding teenagers from sexuality is unrealistic (and probably unhealthy), counselors can play a key role in helping teenagers make good decisions and set boundaries as they grow into the sex roles of healthy adult men and women.

Counseling professionals can also help educate parents on the range of software products available to

help young people. Because teens are often more computer savvy than their parents, and can find ways around filtering software, parents may wish to investigate monitoring software programs like SpectorSoft, which actually takes screen shots of sites accessed, so a parent will be seeing what his or her son or daughter is really viewing, and not just the URL addresses. Other basic recommendations include putting computers only in common areas (not bedrooms) and blocking access to adult television programming and cellular phone downloads (Greenfield, 1999; Tapscott, 1998; Thornburgh & Lin, 2004).

### **Recommendations**

Clearly, further research is needed in this area, and while it may be unethical to deliberately expose teenagers to pornography to study its effects, it might be feasible to conduct more longitudinal studies of the outcomes of youth who were known to be exposed to pornography or compile more extensive qualitative case-study research. Finally, given the breadth of this social issue, it is crucial that mental health professionals take a key role in advocating for the safety and welfare of young people. As new information develops, practitioners who work with youth must champion sensible public policy and open discussion of the problem.

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