



**PORNOGRAPHY ADDICTION: ITS PATTERN AND IMPLICATION
AMONG PSYCHIATRIC POPULATION**

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ABSTRACT

Pornography has seen an increase in use among users with psychological problems. The current study attempt to explore the pornography among subjects with psychiatric disorder. 75 subjects from inpatient & outpatient setting of psychiatric setting were assessed using background data sheet and pornography addiction screening test. It indicates the presence of trend to develop high risk to addiction in 6.67% and pornography addiction in 4% of the male users with psychiatric problems. Age has a negative correlation with pornography and positive correlation for average time spent on internet with pornography. Pornography (vulnerable, emerging and addiction) are seen more in the people with duration of illness less than 5 year. It has implication for exploring the pornography addiction on large sample size as well as evolve intervention for the same.

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INTRODUCTION

There has been an increase use of internet for sexual purposes due to its anonymity and enhanced of accessibility of pornography. Due to these factors, more individuals are exploring online sites that allow them to engage in sexual exploration in the form of chatting, watching porn etc (Cooper et al., 2001). It generally started with using offline material which end up in watching various form of pornography. (APA 2013; Stein, 2009). 20% to 33% of internet users engage in some form of online sexual activity through internet. (Egan, 2000). It has negatively affected an individual's everyday life (Brand et al., 2011). The excessive use of internet may manifest in the form of compulsive, repeated viewing of pornographic material until it causes serious negative consequences to one's physical, mental, social &/ or financial well being. Pornography users have higher levels of depressive symptoms, a poorer quality of life and more mental and physical health. (Weaver, Mays, Hopkins, Kannenberg, McBride, 2011). Mental health disorders that have been associated with pornography usage include depression (Schneider, 2000; Ybarra & Mitchell, 2005), global severity of psychological symptoms (Brand, Laier, Pawlikowski, Schächtle, Schöler & Altstötter-Gleich, 2011), and anxiety (Levin, Lillis, & Hayes, 2012; Morrison, Harriman, Morrison, Bearden, & Ellis, 2004) Depression and stress are risk factors for compulsory use (Cooper, Scherer & Gordon, 1999).

Significant number of people with online sexual issues neither seek treatment nor had prior history of psychological help/therapy. (Cooper, Griffin-Shelley, Delmonico and Mathy, 2001). Other study documented the lack of clarity whether or not seeking psychological help is an antecedent or a consequences of pornography. (Cooper, Griffin-Shelley, Delmonico, and Mathy, 2001). The present exploratory study is going to explore the pornography addiction among users with psychological problems.

MATERIAL AND METHODS

Aim

To explore the pornography among subjects with psychiatric disorder

Study Design

Survey method was used to recruit 75 subjects (male/female) from the inpatient and outpatient psychiatric setting of National Institute of Mental Health & Neurosciences, Bengaluru, Karnataka with inclusion criteria of age range of 16 years and above, using internet for the minimum duration of one year and ability to read and write English. Subjects with active psychopathology, illiterate and unwillingness to participate were excluded from the study. The present study has Institute Ethic committee approval.

Tools

Background data sheet developed by the investigator to record socio-demographic details which covers age, sex, socio economic status, education, occupation religion, marital status and type of family, details of the psychiatric illness (as per file diagnosis as per ICD10 or DSM criteria) like duration of illness, nature and course of illness, treatment taken,

Pornography Addiction Screening Tool (PAST) is a 20 items questionnaire based on 5-point Likert scale to assess addiction to pornography and online sexual behaviour. (Blaky *et al*)

Procedure

75 Subjects were taken from the in-patient/outpatient psychiatric setting of NIMHANS Bengaluru, Karnataka for assessment using pornography addiction test and background data sheet. Prior consent was obtained from the concerned treating team as well as from the user. The process and objectives of the study were explained to the patients and informed consent was sought. Confidentiality of the information was assured.

Statistical Analysis

Descriptive statistics such as mean, standard deviation percentage and frequencies were used to analyze the demographic data as well as the details of psychiatric condition. Pearson’s chi square test was computed to examine the significance of the relation among the variables. All the figures have been rounded off to two decimal places and for the level of significance probability level of 0.05 and 0.01 are used.

RESULTS

The mean age of the sample is 26.67 with the standard deviation of 6.5. The age distribution was 16 years to 40 years. The gender distribution was 45 males and 30 females. 32 different diagnoses in different frequencies were taken, as per ICD 10 criteria.

Table I Frequency and percentage of the pornography addiction. (N= 75)

Types of addiction		Frequency	Percentage
Pornography addiction	Proneness to addiction	6	8%
	High risk to addiction	5	6.67%
	Addicted to pornography	3	4%
	Total	14	18.67%

Table II show significant gender difference in relation to pornography and it shows more in male

		N	Gender		Total	Pearson Chi-Square value	P value
			male	female			
Pornography addiction screening test (PAST)	Normal	PAST	32	29	61	8.487	.037*
		Sex	71.1%	96.7%	81.3%		
		N	7	0	7		
	vulnerable for future addiction	PAST	3	0	3		
		Sex	15.6%	.0%	9.3%		
		N	3	1	4		
	Emerging pornography addiction	PAST	75.0%	25.0%	100.0%		
		Sex	6.7%	3.3%	5.3%		
		N	3	0	3		
	Addicted to pornography	PAST	100.0%	.0%	100.0%		
		Sex	6.7%	.0%	4.0%		
		N	45	30	75		
Total	PAST	60.0%	40.0%	100.0%			
	Sex	100.0%	100.0%	100.0%			

Percentage of illness is from 1.3% to 10.7% across various category. The PAST has negative correlation with age (-.234 at.001 level with PAST and positive correlation with average time spent on internet.(.553 at.001 level)

Table I indicate the 6.67% had high risk to addiction and 4% had pornography addiction

DISCUSSIONS & CONCLUSIONS

The study shows the trend to develop high risk to addiction in 6.67% and pornography addiction in 4% of the male users with psychiatric problems.(Table I & II). Age has a negative correlation with pornography (-.234 at .001 level and positive correlation for average time spent on internet with pornography(.553 at.001 level). Pornography(vulnerable, emerging and addiction) are seen more in the people with duration of illness less than 5 year(Table III).Pornography use is not associated with delay in initiation of sleep.(Table IV) The literature review has mixed findings for the same.Global severity of psychological symptoms has also been related to self reported problems in individuals’ daily lives as linked to pornography usage (Brand, Laier, Pawlikowski, Schächtle, Schöler, & Altstötter-Gleich, 2011).In a sample of college males who viewed pornography online, levels of anxiety were higher in individuals who both viewed pornography and demonstrated experiential avoidance levels (Levin, Lillis, & Hayes, 2012).

Table III shows pornography (vulnerable, emerging and addiction) are more in the people with duration of illness less than 5 year,

Table IV shows the delay in initiation of sleep is more in the normal group in comparison to pornography user.

Corley and Hook (2012) reported finding no significant correlation between viewing pornography and not viewing pornography in scores of depression with the Depression Anxiety Stress Scale-21.Since there is dearth of information in this context, future study can focus on investigating the relationships /comparison between nonaddictive pornography usage and casual pornography usage and its relationship with users mental health, sleep, duration of illness, premonitory personality and personality disorder. The present study shows the trend toward presence of addiction to pornography among user with psychiatric problems. It has implication for screening among treatment seekers in mental health setting as well as promote the healthy use of technology.

Table III Relationship between the duration of psychiatric illness and pornography addiction

			Duration of psychiatric illness					Total	Pearson Chi-Square value	
			<1 year	1<2 years	2<5 years	5<10 years	10 years<			
Pornography addiction screening test (PAST)	Normal	N	52	0	1	3	5	61	28.912	0.004**
		PAST	85.2%	.0%	1.6%	4.9%	8.2%	100.0%		
		Duration	86.7%	.0%	33.3%	60.0%	100.0%	81.3%		
	vulnerable for future addiction	Count	3	1	1	2	0	7		
		PAST	42.9%	14.3%	14.3%	28.6%	.0%	100.0%		
		Duration	5.0%	50.0%	33.3%	40.0%	.0%	9.3%		
	Emerging pornography addiction	N	2	1	1	0	0	4		
		PAST	50.0%	25.0%	25.0%	.0%	.0%	100.0%		
		Duration	3.3%	50.0%	33.3%	.0%	.0%	5.3%		
	Addicted to pornography	N	3	0	0	0	0	3		
		PAST	100.0%	.0%	.0%	.0%	.0%	100.0%		
		Duration	5.0%	.0%	.0%	.0%	.0%	4.0%		
Total	N	60	2	3	5	5	75			
	PAST	80.0%	2.7%	4.0%	6.7%	6.7%	100.0%			
	Duration	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%			

*P<0.05,**P<0.01

Table IV Relationship between the initiation of the sleep and pornography addiction

			Sleep		Total	Pearson Chi-Square value	P value
			affected	not affected			
Pornography addiction screening test (PAST)	Normal	N	13	48	61	10.271	0.016*
		PAST	21.3%	78.7%	100.0%		
		Sleep	65.0%	87.3%	81.3%		
	vulnerable for future addiction	N	2	5	7		
		PAST	28.6%	71.4%	100.0%		
		Sleep	10.0%	9.1%	9.3%		
	Emerging pornography addiction	N	2	2	4		
		PAST	50.0%	50.0%	100.0%		
		Sleep	10.0%	3.6%	5.3%		
	Addicted to pornography	N	3	0	3		
		PAST	100.0%	.0%	100.0%		
		Sleep	15.0%	.0%	4.0%		
Total	N	20	55	75			
	PAST	26.7%	73.3%	100.0%			
	Sleep	100.0%	100.0%	100.0%			

*P<0.05,**P<0.01

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