

USU Research Yields Dramatic Results in Treatment for Pornography Addiction | CEHS

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A new, first of its kind study has produced dramatic results in treating pornography addiction.

The randomized clinical trial, based on acceptance and commitment therapy, resulted in a 92 percent reduction of pornography viewing following 12 treatment sessions. At post-treatment, 54 percent of participants had ceased viewing completely.

“The thing that surprised me was the variability in people and their struggles,” said Dr. Michael Twohig, an associate professor in Psychology at Utah State University and an author on the paper published in the journal *Behavior Therapy*. “Each case was different.”

Twohig and Dr. Jesse Crosby completed the study at Utah State University; Crosby is now at Harvard Medical School.

Their research suggests effective treatment options could encourage the person receiving the treatment direct their mental energy to changing their behavior, rather than grappling with unwanted thoughts.

“Evidence suggests ... problematic behaviors are often worsened by a rigid and controlling reaction to the urges to act out on the behavior,” the authors wrote. “The core

components of the ACT treatment approach were focused on changing the way that individuals react to the urges to view, so that the energy is directed at managing the behavior, as opposed to managing the urges.”

The authors acknowledge that their work opens up more questions in a field that is still new. “For compulsive sexual behaviors in general, as well as problematic internet pornography use specifically, no randomized controlled investigations of psychosocial treatments exist,” they wrote. Much of the previous research on pornography addiction is focused on characterizing and diagnosing the behavior, which is not included in the *Diagnostic and Statistical Manual of Mental Disorders*.

Nevertheless, the authors argue that problematic pornography use can harm how people function, and clinicians are seeking guidance on how to treat it.

The authors acknowledge that while the treatment produced dramatic results, there was no evidence that it led to increased quality of life. “It is possible that improvements in quality of life do not take place until reductions in pornography viewing have been present for some time.”

According to Crosby and Twohig, pornography use was not inherently problematic, but it became so when it led to damaged relationships, loss of productivity, job loss or impaired performance at work or school, expenses, distress, and other forms of psychopathology. “Additionally,” they wrote, “problematic pornography use has been identified as a major contributing factor to marital separation and divorce.”

The clinical trial involved 28 men, all but one of whom were members of the Church of Jesus Christ of Latter-day Saints. On average, they were 29 years old and had struggled with pornography use for 13.6 years. Treatment consisted of 12 sessions, which were first given to a treatment group that included roughly half of the participants, while the other half were on the waitlist.

After 12 sessions, the treatment group reported a 93 percent reduction in viewing, versus a 21 percent reduction for those on the waitlist—who later completed the same treatment. A 92 percent reduction was reported overall. After three months, 35 percent of participants reported complete cessation, and 74 percent showed at least a 70 percent reduction in viewing.

For future research, Twohig and Crosby recommended further study with participants from different races, regions and beliefs, as well as women—who in other studies have

also reported pornography addiction, but at rates lower than those of men.

While the participants were mostly LDS, Twohig said the findings could impact people outside of religious communities. "Any person can have this struggle."

Also, the authors wrote, "given that many of our participants were married or had significant others, it might be prudent to involve those individuals in the treatment process."

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