



Brief Submitted to the Standing Committee on Health
Parliament of Canada Regarding M-47

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Personal Background

I am an accredited sexuality educator, speaker and author, based in Brisbane, Australia. In 2011, I specialised in Sexual Health (Master of Health Science) at Sydney University. Since then, I have been Managing Director of *Youth Wellbeing Project*, providing holistic relationships & sexuality education to enhance what public health experts refer to as children and young people's protective behaviours, quality of relationships and resilience to porn culture.

Through youth, parent and professional education, we provide strategies to counteract porn culture through a 'Critical Porn Analysis' approach (Generation Next, 2016). I also Chair the Australian organisation *Porn Harms Kids*, addressing the harms of children and young people accessing online pornography. I regularly provide consultancy to government, non-profit and professional organisations, and am well connected internationally.

In 2015, I was involved in a New Zealand documentary, *Is free pornography destroying our brains?*, alongside top international Neuroscientist, Dr Donald Hilton. This documentary highlights the impact pornography is having on children and young people, how addiction is affecting individuals, and why education in schools is so important.

As well as being a credentialed expert in the field, I regularly hear of incidents relating to pornography from educators and support workers (detailed on page 2). Exposure to extreme sexual content can sear into the psyche and has the potential to trigger a myriad of behavioural outcomes, including those that are 'red-light' and require immediate professional intervention. Problem Sexual Behaviours (PSBs) such as persistent self-touch, knowledge too detailed for age and chronic pornographic interest can arise; as well as Sexually Abusive Behaviours (SABs) with children engaging in sexual activities with other children. (Briggs, 2016)

I have grave concerns for kids who have easy, free and unlimited access to Internet pornography. I personally and professionally believe that psychological, relational and societal implications present a child-protection crisis.

Researched impacts of pornography on children

The harms of pornography on children and young people are well researched.

A meta-analysis is the "gold star" of research papers. Rather than relying on a single research paper to draw conclusions, a meta-analysis synthesises data from a range of studies and looks for common and consistent findings. The below meta-analysis studies identify significant areas that require action to prevent harms in children and young people's health, mental-health, wellbeing and behaviours.

A Meta-Analysis of Pornography Consumption and Actual Acts of Sexual Aggression in General Population Studies (Wright et al., 2016):

"the accumulated data leave little doubt that, on the average, individuals who consume pornography more frequently are more likely to hold attitudes conducive to sexual aggression and engage in actual acts of sexual aggression than individuals who do not consume pornography or who consume pornography less frequently."

Adolescents and Pornography: A Review of 20 Years of Research (Valkenburg, 2016):

"Pornography use was associated with more permissive sexual attitudes and tended to be linked with stronger gender-stereotypical sexual beliefs. It also seemed to be related to the occurrence of sexual intercourse, greater experience with casual sex behavior, and more sexual aggression, both in terms of perpetration and victimization."

Is sexual content in new media linked to sexual risk behaviour in young people? A systematic review and meta-analysis (Smith, et al., 2016):

“Cross-sectional studies show a strong association between self-reported exposure to sexual content in new media and sexual behaviours in young people.” i.e.: Sexual Explicit Website exposure was correlated with condomless sexual intercourse; and sexting was correlated with ever having had sexual intercourse, recent sexual activity, alcohol and other drug use before sexual intercourse, and multiple sexual partners.

In addition to meta-analysis studies, research consistently identifies links between mental health issues, problematic porn use and porn culture.

- Low self-esteem and depressive traits are linked to compulsive use of sexually explicit media (SEM). (Doornwaard, et al., 2016)
- Users of SEM report greater depressive symptoms, poorer quality of life, more mental- and physical-health diminished days, and lower health status than compared to nonusers. (Weaver III, et al., 2011)
- Associations have also been found between Internet porn use and loneliness. (Yoder, et al., 2005)
- Pornography use has been found to interfere with decision making. (Laier, et al., 2014)
- Pornography use has been linked to decreases in a person’s ability to delay gratification. (Negash, et al., 2016)
- Pornography use has been linked to diminished working-memory. (Laier, et al., 2013)
- With increased use over time, pornography use impacts academic performance. (Beyens, et al., 2014)

These studies also indicate any addiction-related behaviour can impact on the brains ability to focus on important life-skills tasks; more so with respect to sexual arousal and adolescent development.

Another meta-analysis (Ward, 2016), found that evidence consistently indicates that everyday exposure to [sexualised] content is directly associated with a range of consequences, including higher levels of body dissatisfaction, greater self-objectification, greater support of sexist beliefs, adversarial sexual beliefs, and tolerance of sexual violence toward women.

Other impacts (Owens, et al., 2012) of young people using pornography include:

- Decreased self-confidence
- Higher rates of conduct problems and delinquent behaviours
- Difficulties with social integration and bonding with caregivers
- Higher rates of anxiety
- Earlier onset of sexual experimentation; and
- Sexual preoccupation.

Anecdotal impacts of pornography on children

Amongst the research and statistics, it can be tempting to miss the gravitas of impact on children’s lives. My work as an educator provides a confronting link between research and what is happening in playgrounds and homes globally. In 2016, when I toured Australia and New Zealand to deliver professional development, staff and counsellors consistently reported a rise in sexually explicit behaviours amongst children and teens. A cross-section of responses when asked the question: “What behaviours are you seeing in schools now that you weren’t seeing 5 – 10 years ago?” include:

Misuse of technology:

- Sexting / sending nudes / Dick pics
- Pressure to send nudes
- Non-consensual uploading of nudes online / revenge porn
- “Confess” pages online for sexual shaming and spreading rumours
- Use of Tinder for gaining ‘ranking’ points amongst peers
- Parents advising staff of very young children being addicted to pornography
- Watching porn in the classroom

Reports of kids watching:

- Bestiality
- Anal / oral / group sex

Reports of kids engaging in:

- Daisy chain (oral group sex)
- Openly using ‘sex’ to gain popularity

- Pressure on peers to become sexually active and experienced younger and younger
- Increase in sexualised and abusive behaviour among all age groups:
- Under 10-year-olds acting out rape / group sex
- Threats of rape from boys as young as 12-years-old
- Increase in sexual violence in the 13 to 16-year age group
- Children grooming other children to perform sexual acts
- 14-year-olds not realising they are 'allowed' to say no to sexual activity
- Anal / oral / group sex
- Abuse, assault and rape (penetration) occurring at school and / or reported within schools after the weekend

Normalisation of:

- Sexual language in the playground
- Disrespect towards girls and female teachers

Schools literally can't keep up with this issue and whilst ever we wait around and debate, the collateral damage is our children. Moreover, there is a point when consistent anecdotes cohere into data.

What constitutes a Public Health Crisis?

Sourced from [Culture Reframed](#): *Solving the Public Health Crisis of the Digital Age*.

Culture Reframed drawing from over forty years of peer reviewed research, culled the following data on pornography:

- 1) It has multiple harmful effects.
 - Limited capacity for intimacy
 - More likely to use coercive tactics
 - Increased engagement in risky sexual behaviours
 - Increased likelihood of perpetuating sexual harassment and rape
 - Decreased empathy for rape victims
 - Increased anxiety/depression
 - Habitual/addictive use
- 2) It adversely affects all dimensions of health.
 - Social
 - Emotional
 - Intellectual
 - Spiritual
 - Physical
- 3) It is getting worse.
 - Mainstream content is sexist, racist, and increasingly cruel, brutal, and degrading.
- 4) It acts as a fast-spreading vehicle for other major public health problems:
 - sexual violence
 - depression/anxiety/low self-esteem
 - substance abuse
 - disease
- 5) It is how most youth learn about and experience sex.

Relevant Research to support these statements is available at Porn Harms Kids:

http://www.pornharmskids.org.au/journal_articles

Solutions

Public health focuses on safeguarding and improving the physical, mental, and social well-being of the community as a whole. Public Health is what we as a society do collectively to assure the conditions in which people can be healthy. (The Future of Public Health, Institute of Medicine, 1988)

Porn Harms Kids has adopted a public health lens to inform a 3-pronged approach of PREVENT – EQUIP – RESTORE. Prevent access; equip parents, schools, and community through education; and restore children and young people harmed by pornography through links to therapy and support services.

Given the extensive data available on the harms of pornography on children and young people – particularly related to the rise in mental health issues and preventable diseases such as Sexually Transmitted Infections, work must be focused on prevention.

PREVENTION includes reducing access through safeguarding homes with filters and device apps. However, this approach has significant limitations due to the broad range of families within community and an ad hoc response to pornography harms. The viability of implementing technology restrictions, modelled after measures adopted in the UK, are important to consider:

- Internet Service Provider (ISP) filters
- Age-verification processes to access pornographic websites
- Mobile device restrictions through use of SIM cards that restrict access to adult content unless and until the account holder completes an age verification procedure.

Often the argument against filtering is that kids will find a way around it. However, only a very small minority of 12-15 year olds say they have disabled filters or parental controls.

- Despite most children having information about staying safe online, a small number of 12-15s say they are engaged in potentially risky online activities: they are more likely than in 2015 to say they have deleted their history records (17% vs. 11%), amended the settings to use a web browser in privacy mode (10% vs. 6%) and disabled any filters or controls (3% vs. 1%). (OFCOM, 2016)
- This means that 97% of kids don't know how or have not bothered to disable filters.

EDUCATION is required in every sphere of community: parents, children, teens, government and non-government organisations, schools, spiritual meeting places and sporting groups.

Parents need education, tools and knowledge to gain confidence to assist children to navigate the online space. It can be overwhelming and time consuming to find and access the limited resources available to address this relatively new issue. Through links to educational resources individually targeted for parents of children; parents of teens; and educators and professionals, *Porn Harms Kids* encourages parents, schools, government and community organisations to have regular and consistent conversations that help kids develop an “internal filter” to reject pornography.

Porn Harms Kids identifies that the work of [Culture Reframed](#) in producing a [Parents](#) and [Health Professionals](#) Program is an essential part of the solution.

[Youth Wellbeing Project](#) is also producing a whole-school approach to counteract porn culture. Releasing in 2017, *IQ4porn* equips elementary, middle and high Schools to implement policies and learning materials for students, and directs staff & parents to further support.

[Porn Harms Kids](#) will be making available a policy framework for use by community organisations, early childhood centres and educational institutions, to provide an appropriate first response when dealing with a child who has been exposed to pornography. Educational resources such as these are currently not available.

RESTORATION is a key factor in public health for those children and young people faced with negative impacts of exposure and problematic use of pornography. An important key to ensuring health and wellbeing is to prevent these harms from occurring in the first place.

“Childhood experiences, both positive and negative, have a tremendous impact on future violence victimization and perpetration, and lifelong health and opportunity. As such, early experiences are an important public health issue.” (CDC, 2016)

Pornography is a social problem and hence cannot be simply addressed by focusing on an individual level. The paper: *Health education's role in framing pornography as a public health issue: local and national strategies with international implications* (2008), states:

Social issues from the public health perspective involve problems that affect individuals or groups beyond their capacity to correct. Social issues are detectable when responsibility is shifted from individuals being able to adequately make changes themselves, toward holding external social causes or influences accountable. It is clear that many aspects of pornography meet this definition of social issue, and warrant public health advocacy efforts.

A public health approach requires all levels (from the micro to the macro) of community and Government to be aware of the harms, and implement laws and policy changes that place children at the fore of protective measures.

At the *Porn Harms Kids* February 2016 Symposium, it was determined that there are key areas for further investigation and action. Findings include acknowledging that exposure of children and young people to pornography has reached critical levels; it is having widespread and measurable negative consequences on the physical, mental, and emotional well-being of children and young people; it constitutes a public health crisis, and as such is a concern for the community as a whole; and this crisis has not received adequate public attention, and needs to be publicised as widely as possible as a matter of urgency. The findings also stated that all avenues must be pursued to explore possible solutions to this crisis, including education, voluntary efforts by relevant industries, and regulation; and as part of its duty of care to children, the federal government must take the lead in addressing this crisis comprehensively.

The issue of children, individuals, families and communities being harmed by pornography is faced by every country that has online access. Pornography is non-discriminant, impacting every people group, nation and culture.

It requires researchers, child development experts, youth welfare authorities, the medical profession, social and public policy sectors and members of the community including schools and parents, to work toward a comprehensive solution, with the support of courageous governments and committed leaders.

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