Government
Equalities Office

The relationship between pornography use and harmful sexual behaviours

A primary research report prepared by The Behavioural Architects (Joanne Upton, Alya Hazell, Rachel Abbott and Kate Pilling) for the Government Equalities Office

February 2020

This research was commissioned under the previous government and before the covid-19 pandemic. As a result the content may not reflect current government policy, and the reports do not relate to forthcoming policy announcements. The views expressed in this report are the authors' and do not necessarily reflect those of the government.

Reader advisory: Please note this report contains content of a sensitive nature, including references to explicit content and descriptions of sexual violence.

Contents

Executive summary

The purpose of this report is to provide primary evidence to the Government Equalities Office (GEO) on the relationship between pornography use and harmful sexual behaviours towards women, from the perspective of those who work with individuals who have exhibited, or are at risk of exhibiting, this behaviour. As the sensitive nature of the topic makes it difficult to study experimentally, this report focuses on the voices of those working in the field in order to fully understand the issue. To this end, 20 interviews were conducted with Frontline Workers across social, justice, and medical sectors.

Summary of key findings:

- The majority of Frontline workers spontaneously mentioned pornography as an influential factor for harmful sexual behaviours towards women and girls. All acknowledged it as a factor when it was later introduced into the discussion.

- Frontline workers highlighted a range of factors that play a role in harmful sexual behaviours towards women and girls. The interrelation of these factors, including pornography, contributes to a conducive context facilitating these behaviours.

Scope:

Evidence was gathered by conducting 20 qualitative interviews with Frontline Workers via telephone, video conferencing, or face-to-face. Interviews were around 60-90 minutes long. The Frontline Workers represented a wide range of professions across social, justice, and medical sectors.

The focus of the report is centred on the experiences and opinions of these Frontline Workers, often reflecting many years in their current profession and/or in different roles within the field. It does not represent the first-hand perspective or views of high-risk individuals, nor those of the women who have been perpetrated against. It must be noted that, due to the fact that the clients with whom the Frontline Workers work have already displayed harmful sexual behaviours towards women and girls, the clients discussed are not typical of the general population.

Findings:

The principal message from Frontline Workers was that a wide range of factors can play an influential role in the development of harmful sexual behaviours in high risk individuals, and that it is difficult to judge the strength of the contribution of individual factors in isolation. However, a majority of Frontline Workers also emphasised that for many of their clients, use of pornography was an important contributing factor. Across 20 participants, 15 spontaneously brought up pornography as an influence. This was especially the case for participants working with younger audiences, although by no means exclusively. When prompted, all Frontline Workers described

that pornography was a potential contributing factor. Participants believed that increased ease of access to pornography, lots of which includes violence towards women, was problematic for many of their clients. Many discussed a range of potentially harmful narratives played out in pornography that may act as a template for behaviour among high risk individuals. A number of Frontline Workers described how their clients had become desensitised to the sexual content they consumed online which led to an escalation in the kind of content sought out - to videos showing more extreme subjugation of women.

Other influential factors highlighted by the Frontline Workers as contributing to harmful sexual attitudes and behaviours towards women and girls can be grouped into individual, community and society-level factors. For factors that contributed at an individual level (such as sexual preoccupation, social isolation, and adverse traumatic childhood experiences), pornography can provide an outlet to act out and self-soothe. For contributing factors at a community level (such as machismo and strict gender norms), pornography can fuel 'locker room' banter and prime social symbols of success. And for contributing factors at a cultural level (such as sexualised media and lack of education/dialogue on healthy sexual relationships), pornography can reinforce and normalise sexual and aggressive behaviour, and reflect and fuel problematic narratives.

Conclusion:

Overall, participants believed that prevention of harmful sexual behaviour towards women requires a range of efforts at a community level and in society at large. This was due to the wide range of factors that were identified as being influential in creating a conducive context for harmful sexual behaviours towards women and girls. However, it was clear that the potential influence of pornography, especially when playing a role in conjunction with other factors, was a source of considerable concern for Frontline Workers. It was evident from the interviews that there was a widespread belief in the need to address the role that pornography plays, as part of the approach to minimising harmful sexual behaviours towards women.

2. Introduction

2.1. Background and aims

Violence against women and girls (VAWG) continues to be a subject of serious concern for the UK Government. A recent report from the Women and Equalities Select Committee (WESC), on the sexual harassment of women and girls in public places, highlighted some worrying trends in public attitudes and behaviours, pointing to the potential harm caused by pornography. One of the recommendations of the WESC report was that the Government should take an evidence-based approach to addressing the harms of pornography.

The Government Equalities Office (GEO) commissioned both a literature review and primary research as part of this evidence-based approach. This report details the primary research only, although the themes were highly consistent between the two reports.

This research report aims to help the GEO develop an evidence-based perspective on the relationship between the use of pornography and harmful sexual behaviours, by reflecting the views of Frontline Workers in relevant fields. Specifically, it seeks to answer the following key questions:

- Do frontline staff see a connection between the consumption of pornography and negative/harmful behaviour towards women and girls?

- If so, are there any particular types of pornography that are linked to general and/or specific negative/harmful behaviours?

- To what extent is pornography consumption a common concern when working with high risk individuals?

- What other factors do Frontline Workers believe may be linked to negative/harmful behaviour towards women and girls?

The prevention of sexual harassment provided the impetus for this research, as such it focuses mainly on harmful *sexual* behaviours. It also explores harmful sexual attitudes (as well as behaviours), with the understanding that attitudes, while not necessarily prescriptive of behaviours, can play an influential and interrelated role.

It should be noted that harmful sexual behaviour exhibited by women or experienced by men was outside the scope of this research. As it was not the focus of the interviews, this was not an area of discussion that was explored with the Frontline Workers; however, a few did mention that these were also important areas of consideration when looking at the role of pornography on harmful sexual behaviour in society more broadly.

2.2. Methodology

Evidence was gathered by conducting 20 qualitative interviews with Frontline Workers via telephone, video conferencing, or face-to-face. Interviews were around 60-90 minutes long.

Each interview covered six key question areas outlined in a discussion guide (see below). Importantly, all mentions of 'pornography' were omitted from both the interview invitation and introduction to the research. The interviews were specifically structured to allow Frontline Workers to talk about all influences on harmful sexual behaviours and attitudes and see whether 'pornography' to emerged spontaneously as an influence, before specifically introducing it as a line of enquiry after 50 minutes by asking the question: "Without thinking too much, what are your first thoughts about pornography and harmful sexual attitudes and behaviours?" The discussion on pornography (if not mentioned spontaneously by the Frontline Worker earlier in the interview) was prompted by the interviewer asking the Frontline Worker to give their first thoughts on pornography and harmful sexual attitudes and behaviours. For more detail, the full discussion guide is included in the appendix.

Topic area	Time (max)
Introduction to the research, detailing that this is a project funded by the Government Equalities Office	10 mins
Broad description of the type(s) of clients they work with	10 mins
The harmful attitudes and behaviours they have witnessed in their work and the influences they think have contributed to those attitudes and behaviours (prompting for individual, community and societal factors after full spontaneous response)	20 mins
A specific journey (from childhood to offence) of an individual they've worked with, who reflects the broad cohort of their client base	10 mins
Exploring the role of pornography as an influence on harmful attitudes and behaviours - their initial thoughts, as well as specific questioning	15 mins
Closing thoughts: their reflection on what could be done to combat harmful sexual behaviours, and a summary in their own words of the impact of pornography on attitudes and behaviours towards women and girls	10 mins

It is worth noting that this was qualitative research and that a semi-structured approach to the interviews was used. The interviewer asked open questions and probed for additional information on relevant topics when brought up by the interviewee.

2.3. Frontline Workers sample

The 20 Frontline Workers, (also referred to as 'participants') represented a wide range of professions across social, justice, and medical sectors. All had professional experience working with individuals who have displayed harmful sexual behaviours towards women and girls. 14 of the Frontline Workers were female, 6 were male. To source participants with relevant experience for this work, we first consulted an external expert currently working in this field - Dr. Fiona Vera-Gray. She provided an initial list of key organisations and professionals working with individuals displaying harmful behaviours towards women and girls, which was further evaluated in terms of relevance to the key focuses of this work by the authors of this report. Additional participants were then sourced by researching organisations similar to those initially suggested by Dr. Vera-Gray, as well as following the recommendations of relevant contacts made by participants during their interviews.

The focus of the report is centred on the experiences and opinions of the Frontline Workers, often reflecting many years in their current profession and/or in different roles within the field. It does not represent the first-hand perspective or views of high-risk individuals, nor those of the women who have been perpetrated against. It must be noted that, due to the fact that the clients with whom the Frontline Workers work have already displayed harmful sexual behaviours towards women and girls, they are not typical of the general population.

The research does not seek to provide a first-hand account of the role of pornography in contributing to harmful sexual behaviours and therefore the sample does not include the perspectives of individuals who have exhibited such behaviours. Individuals themselves often do not have this level of insight into the contributing factors of their own behaviour. The perspective of professionals who work closely with these individuals, to understand and help guide their behaviour (some of whom are experts in human psychology), may instead provide a richer, more reliable understanding of the drivers of their behaviour.

An additional limitation to be noted is that this report does not seek to provide a first-hand account for women who have been the recipients of harmful sexual behaviours. While some Frontline Workers interviewed do work with both men exhibiting and women experiencing these behaviours, the focus of discussions was centred on clients who exhibit. As such, this report should not be seen to represent the views and experiences of these women.

The research participants worked with a wide range of individuals. Some participants' clients included both individuals who had displayed harmful sexual behaviours towards women and girls and those who had not. However, for the purpose of this research, participants were asked to only consider their clients who had displayed such behaviours when responding to interview questions. These clients represented a range of characteristics: aged 16 to over 60, across the socioeconomic spectrum, from different faith groups and cultures, and located in both urban and rural settings across the UK. Specific profile dimensions are worth pointing out:

- Participants worked with high risk individuals from both a preventative and rehabilitative capacity. However, the very fact that Frontline Workers are working with an individual indicates their attitudes and behaviours have been marked out as harmful (e.g. they have committed an act of violence), and as such professional experiences tended to be skewed towards rehabilitative.

- Although clients from a range of socioeconomic backgrounds were represented, Frontline Workers from within or alongside the justice system described that their caseloads consisted of a higher proportion of individuals from lower socioeconomic backgrounds.

- During the interviews, while a broad range of harmful attitudes and behaviours towards women were discussed, harmful *sexual* attitudes and behaviours were the primary focus of this report. It is essential to note that some harmful attitudes and behaviours are beyond the scope of this study (e.g. coercive / controlling behaviour or verbal / physical aggression that does not involve a sexual dimension).

2.4. Harmful sexual attitudes and behaviours observed by Frontline Workers

[Reader advisory: the following content includes descriptions of sexual violence]

Participants referenced a wide range of harmful sexual attitudes and behaviours, which were analysed by the authors of this report and grouped into seven broad categories. The examples illustrate a wide range of harmful sexual attitudes and behaviours prevalent in their field of work, but the intention was not to represent an exhaustive list of harmful behaviours.

Objectification of women: disdain for bodies that do not conform to certain stereotypes of beauty, 'rating' women's body parts, mentally 'undressing' women, sharing nude / explicit images of women, and seeing women principally as sex objects for meeting men's sexual wants and needs.

"[We hear things like] it doesn't matter if her face is 'tapped out' [she is ugly], as long as she has a big bum and boobs."[1]

Verbal misogyny: derogatory storytelling in peer groups, insulting name-calling, hateful language and discussions about women on social media and online forums.

Male sexual entitlement: deeply entrenched views that women should comply with men's wishes, and a disregard for female wants and needs, including in relation to sexual pleasure.

---

[1] Sexual Health Coordinator - Alternative Provision

"We tend to see beliefs like an entitlement to sex. A belief that you should be able to get what you want, when you want it."[2]

Unrealistic expectations for sex: The expectation for/pursuit of specific sexual acts (where the desire to take part in these acts is not reciprocated by their partner): physical aggression during sex (including choking, slapping, hair-pulling); anal sex; group sex.

Lack of awareness / concern for consent: Acts of sexual harassment, pursuing oral or anal sex without explicit consent for these acts, sharing indecent images of women without permission.

"They don't understand consent at all… the boys don't understand that they need to seek consent… they don't think it's that deep [serious] *if they make a girl give them a blowjob."[3]*

Verbal or physical coercion: rape, forcing women to perform sexual acts, or obtaining sex / sexual acts by gradual wearing down through repeated requests, manipulative language and/or unbalanced power dynamics.

"They [the clients] think it's so normal for someone to say no for ages and then give in to sex."[4]

It is worth noting that while this report may refer to the attitudes and behaviours as discrete groups, this is for the sake of ease in discussion and to highlight the wide range of harmful sexual attitudes and behaviours discussed. In reality, these attitudes and behaviours are highly interrelated, with varying levels of severity and co-occurrence.

---

[2] Rehabilitation Coordinator (B)

[3] Deputy Head - Alternative Provision

[4] Rape Prevention Training Manager

3. The relationship between pornography use and harmful sexual behaviours

Frontline Workers strongly emphasised that it is never a single factor that directly leads someone to think or act in a way that is harmful towards women. Many different factors play a positive or negative role, and these factors may bolster or dampen one another. The interaction of these factors, when taken together, contribute to a context which facilitates harmful attitudes and behaviours towards women and girls. In academia (not referenced directly by Frontline Workers) this is sometimes referred to as a 'conducive context'.[5]

For a majority of Frontline Workers, pornography was felt to be a key contributing factor in many of their clients' harmful sexual beliefs and behaviours. Across 20 participants, 15 spontaneously brought up pornography as an influence. This was especially the case for participants working with younger audiences, although by no means exclusively. When prompted, all Frontline Workers described that pornography was a potential contributing factor.

It is important to note that participants did not feel that pornography was relevant in *all* cases. Many Frontline Workers felt that for some of their clients, pornography was not a negative influence. These same Frontline Workers had other clients for whom pornography was a major contributor to harmful sexual behaviours. As such, the dynamics discussed in this report are by no means able nor intended to be generalised for all clients. While it is impossible to tease out the circumstances in which pornography does or does not contribute, it is clear that Frontline Workers generally consider pornography a potential influence on harmful sexual behaviour for high risk individuals.

In order to understand the relationship between use of pornography and harmful sexual behaviours, it is first important to understand the changing landscape of pornography consumption, as perceived by Frontline Workers, including the legal context in which this consumption takes place. The narratives conveyed by pornography and the processes at play for high risk individuals are discussed in turn.

3.1. The legal context

The legality of pornography in England and Wales is underpinned by the Obscene Publications Act (OPA) 1959 which criminalises the distribution of 'obscene' materials. Further regulation comes from the Extreme Pornography (EP) provisions and the Indecent and Prohibited Images of Children (IPIC) provisions in the Criminal Justice and Immigration Act 2008, as well as the Protection of Children Act 1978,

---

[5] Term first referenced in relation to gender studies by: Kelly, L., (2005) 'Fertile fields: Trafficking in persons in Central Asia', *International Organisation for Migration* p.94

and the Coroners and Justice Act 2009. Scotland and Northern Ireland are subject to their own legislation.

The OPA only covers material which is distributed in England and Wales, and so is not applicable to the majority of online pornography which, though accessed in the UK, is produced internationally. Both the EP and the IPIC provisions are possession offences, meaning that they apply to people in England and Wales who possess such material irrespective of where it has been produced and/or hosted. These are the primary pieces of legislation covering what pornography is and isn't legal to access online.[6]

Images of child sexual abuse (sometimes called 'child pornography') are illegal to possess, produce, and distribute worldwide. In England and Wales an 'indecent' image of a child is defined as an indecent photograph or pseudo-photograph[7] of a person under 18 years of age.

It is illegal to possess 'extreme pornography', which is legally defined as an image that is:

[Reader advisory: descriptions of sexual violence]

- Pornographic ("of such a nature that it must reasonably be assumed to have been produced solely or principally for the purpose of sexual arousal"), and

- Grossly offensive, disgusting or otherwise of an obscene character, and

- Portrays in an explicit and realistic way any of the following:

  - An act which threatens a person's life, or

  - An act which results, or is likely to result, in serious injury to a person's anus, breasts or genitals, or

  - An act which involves sexual interference with a human corpse (necrophilia), or

  - A person performing an act of intercourse or oral sex with an animal (whether dead or alive) (bestiality), or

  - An act which involves the non-consensual penetration of a person's vagina, anus or mouth by another with the other person's penis or part of the other person's body or anything else (rape or assault by penetration) and a

---

[6] For more detail on the current landscape of porn regulation in England and Wales, including gaps, see Vera-Gray, Fiona and Clare McGlynn. "Regulating Pornography: Developments in evidence, theory and law." In *Research Handbook on Gender, Sexuality and Law*, edited by Chris Ashford and Alexander Maine. Cheltenham: Edward Elgar, forthcoming 2019.

[7] This includes computer-generated images (CGI's), cartoons, manga images and drawings.

reasonable person looking at the image would think that the persons or animals were real.

Unlike child sexual abuse material, there is little proactive regulation of extreme pornography, meaning that users may be able to access unlawful material on legal porn sites. Current research at Durham University has found content on the landing pages of the top three porn sites in the UK that could be classified as extreme pornography, as well as content that is in clear contravention of the sites own terms and conditions.8 This means that users in England and Wales who do not know the law on pornography may be unaware they are accessing illegal material.

Frontline Workers do not always know the legal distinctions themselves and, regardless, rarely have sight of the specific content consumed by the clients they work with. As such, participants talked from their wider experience on the types of pornography clients have spoken about in the past, some of which may be illegal but not recognised as such.

3.2. The changing landscape of pornography consumption

Most Frontline Workers talked about how the nature of pornography consumption had dramatically changed since the advent of the internet, with the ubiquity of internet access, rise of mobile devices, and seemingly limitless amount of content available impacting viewers' interaction with pornography.

"I don't think you can think of anyone's attitudes to sex - in the past 15 years - and divorce it from the internet."[9]

In talking about the relationship between pornography and harmful sexual attitudes/behaviours towards women, many participants acknowledged the impact of the changing nature of pornography content. In particular many felt that there is much more violence in pornography these days, which is "not realistic"[10] and may be normalising potentially harmful behaviours.

"The majority of clients are watching content [featuring violence] *that is easily available, not on the 'dark web'."*[11]

When sexual violence is so proliferous and accessible, participants considered it to be harder for the individuals they work with to recognise it as potentially harmful.

---

[8] See https://www.dur.ac.uk/research/news/thoughtleadership/?itemno=36674 for more detail.

[9] Psychotherapist (sexual offenders) (A)

[10] Youth Worker (B)

[11] Governor HMP

"The more common something is, means that it must be alright, if it's there then everyone is doing it… there's nothing that tells you this is taboo. 30 years ago, it [violence] would have felt taboo".[12]

For many participants, pornography was understood as having an educative role for their clients' views on sex and relationships; providing a template for what sex and sexual relationships should look like. This was particularly prevalent for participants who work with younger clients.

"These young people are using porn as their teachers."[13]

"Porn comes up in probably eighty or ninety percent of my cases… what they've done is influenced by what they've seen. […] For them, the internet is fact."[14]

While this educative role itself was not positioned as necessarily harmful, participants expressed concerns about the prominent narratives in pornography and the impact that these have on the subsequent understanding of sex and relationships learnt by their clients who view such content.

Although the majority of participants understood the narratives in pornography to be playing an educative role to detrimental effect on their clients, it should be noted that this view was not unanimous. In favour of an alternative direction of causality, one Frontline Worker stated:

"At the end of the day the porn industry makes what people want to see... it's not that porn is inherently bad."[15]

3.3. Harmful sexual narratives in pornographic content

Frontline Workers described a range of narratives portrayed in easily accessible pornographic content, which they felt could contribute to harmful attitudes and behaviours. Six major narratives surfaced in the analysis of these discussions, which bear similarities to the harmful behaviours exhibited by clients of the participants. These narratives have been picked up by participants from their broader experience working with a range of high-risk individuals, rather than through direct conversations with their clients about the content of pornography they are viewing.

Consent isn't required

Many participants discussed the ways in which explicit consent before initiation of sex is rarely shown in pornography, with sexual acts taking place without the viewer witnessing evidence of both parties' consent to take part. They also highlighted

---

[12] Rehabilitation Coordinator (A)

[13] Youth worker (B)

[14] Probation Officer (Youth)

[15] Relationship therapist

concerns of the widespread depiction of sex under conditions that constitute rape. For example, ignoring repeated 'no's while continuing to persuade until obtaining a 'yes', and the popularity of 'Fake Taxi' pornography whereby the central narrative is sex occurring within a coercive context.

"[Pornography is young people's] main reference point for sex and there's no conversation about consent [...] Fake taxi videos are popular at the minute where a woman is seen getting into a cab and then she can't pay so she gets raped"[16]

Male pleasure is all that matters

When discussing common sexual narratives in pornography, some Frontline Workers highlighted how these are predominantly from a male perspective, with the standard script focused around male pleasure and ejaculation. The lack of visual affirmation of female sexual readiness is directly contrasted with the clear, visible indication of male arousal. This is coupled with a portrayal of women as constantly and instantly ready for sex, giving the impression that sex should always be possible and minimising considerations of female arousal, stimulation, and pleasure.

"[Clients think that] women are always ready for sex; they don't need stimulating."[17]

Several Frontline Workers discussed how the male-focused perspective in pornography impacts men's understanding and sensitivity to women's sexual pleasure; clients understand women to be passive participants in sex and demonstrate a lack of consideration into how different sexual acts and positions can affect women's experiences of sex.

[In reference to the prevalence of anal sex in pornography] "Not that there is anything wrong with that necessarily but [it creates] a lack of understanding of the safety boundaries around it and how painful it can be [for the woman]."[18]

"Sex is something that happens to her, by him."[19]

Women should look like pornstars

Mainstream depictions of the female body in pornography coalesce around a limited representation, with clear criteria to trigger male arousal e.g. large breasts, large behind, lack of pubic hair. Frontline Workers expressed concerns that the pornography their clients are viewing is creating a limited narrative as to what can be considered sexually attractive. In effect, a tick box of criteria for both male and

---

[16] Rape Prevention Training Manager

[17] Governor HMP

[18] Probation psychologist

[19] Governor HMP

19

female bodies that reflects the dominant representations of what has been viewed, rather than nuanced to personal preference. Frontline workers gave examples where this has led clients to have a lack of desire for female partners - who may not meet these strict criteria - and for them to feel that these females are not good enough.

"It [pornography] sets expectations about body image - women have to be hairless… men have to have a big penis"[20]

Sex is consequence-free

Pornography presents a truncated representation of sexual interactions, to the extent that it minimises all social and emotional connection, as well as excluding any potential repercussions from having sex. Sex is therefore represented as an overly simplistic exchange that does not capture the intricacies and complications of sexual relationships in the real world, where there is a need to understand and navigate another person's emotional needs.

"Managing a relationship with a woman in real life is so much more complicated than it is on film. You don't see everything else around the sex."[21]

Violence is commonplace during sex and women enjoy this violence

Across discussions with Frontline workers, it was clear that they are of the understanding that violent acts are common in pornography and are not limited to content that is explicitly created to cater to this genre.

"On PornHub, you don't have to look in the rough sex category to get rough sex, there are just standard videos of men having sex with women and grabbing them by the throat."[22]

Multiple Frontline Workers voiced high levels of concern at how common it is to see violence in porn and the way in which this teaches the viewer that to have sex in this way is to be expected. They were particularly concerned that the prevalence of violent sexual narratives has a normalising effect on this type of sex, which is furthered by the positive, or at least indifferent, responses of the women in pornography to the violent acts depicted, shaping narratives that violence is something desirable and pleasurable for women. This was summed up by one Frontline Worker:

"The prevalence of violence in pornography normalises it… adds to the expectation that women like violence."[23]

---

[20] Rape Prevention Training Manager

[21] Psychotherapist (Sexual Offenders) (A)

[22] Probation psychologist

[23] Governor HMP

Specific sexual acts are commonplace

Pornography depicts a wide range of sexual acts, with specific acts such as extra-vaginal ejaculation, anal sex, and group sex regularly shown in pornographic content. The prevalence of such acts represents them as commonplace in sexual encounters, which may not be an accurate reflection of reality.

It must be noted that it is not the sexual acts themselves that Frontline Workers considered a harmful behaviour towards women. Rather, they discussed that the harm comes from men's expectation that this is standard procedure in sex, to the extent that there is no perceived need to ask permission from their partner.

> *"Often the porn in itself instills beliefs about how sex should be and how people should be in sex. For example, just deciding that it is okay to ejaculate over a woman's face without agreeing that first".[24]*

3.3. Processes related to pornography content: Desensitisation and escalation

Analysis of the interviews with the Frontline Workers by the authors of this report revealed that, when discussing the role that pornography plays in their clients' lives, participants often referred to two distinct processes as shaping their clients' interaction with pornography and helping to facilitate resultant attitudes and behaviours. The first, summarised here as 'desensitisation and escalation', was about the content of pornography.

Several participants used a comparison of pornography use to drug addiction: as pornography use increases, viewers become increasingly desensitised to the content that they are viewing. Several noted the amount of time that some of their clients are spending watching pornography. Some gave accounts of men viewing pornographic content for "*hours and hours a day*",[25] to the extent that time spent watching pornography had a negative impact on taking part in other pro-social behaviours. Desensitisation accompanied this high level of consumption, with some participants feeling that the content viewed can increasingly become boring and mundane, no longer resulting in the same levels of arousal.

> *"What turned you on last year doesn't touch the sides now."[26]*

In order to continue to be stimulated by pornography, these participants described how their clients searched for increasingly extreme depictions of sex. While this may start off as "*a curiosity to see what is 'out there'*",[27] the resultant stimulation from more hardcore or illegal content (such as images of child abuse, sadomasochism,

---

[24] Probation Psychologist

[25] Counsellor

[26] Rehabilitation Coordinator (B)

[27] Psychotherapist (sexual offenders) (A)

21

bestiality) meant that they needed to continue to view this type of pornography to become aroused.

"A client just recently was spending 30 hours a week looking at pornography. If you do that for a period of time it becomes very, very boring and you are looking for anything that is more interesting. It just becomes so mundane, so you're looking for anything more taboo, that gives more of a buzz - more hardcore, more disgusting… those sorts of extremes."[28]

Across the range of Frontline Workers interviewed, it was evident that not all clients experience this process of detachment and escalation of pornography use, and the resulting behaviours to the same extent.

"[Pornography] definitely creates a fertile ground for sexual violence… but someone could watch porn all day, every day and never cause anyone harm."[29]

However, what was evident was that participants were highly concerned about their clients viewing increasingly extreme pornographic content and their inability to critically assess the narratives that this content provides, and the impact that this can have on the formation or reinforcement of harmful sexual attitudes and behaviours.

3.4. Processes related to pornography consumption: Detachment and compartmentalisation

The second process participants often referred to in discussing their clients use of pornography was focused on the viewer's behaviour. When describing the psychological state in which their clients view pornographic content, some participants detailed how their clients exhibited a sense of detachment between themselves, and what they are viewing and doing online. They noted that, while many of the men have their own set of moral codes in which they operate during their day-to-day lives, as well as some understanding of the laws around sexual violence and sexual content, the sense of detachment when online means that they *"don't acknowledge that these are real people, who could be harmed"*.[30] As such, the rules that apply in their daily, 'real' lives are not applicable online.

For example, watching pornographic content, which is based on the premise that the women have not consented (rape pornography), is justified as acceptable to view as *"they* [the women in pornography] *are over the age of consent and so they must have wanted to do all of this".[31]* This sense of detachment was understood as facilitating a compartmentalisation of attitudes and behaviours; the understanding that what one does or says in a certain aspect of their life - namely what they view

---

[28] Forensic Psychosexual Therapist

[29] Rape Prevention Training Manager

[30] Charity Director (child sexual abuse prevention)

[31] Counsellor

and how they behave online - neither reflects nor has an impact on other areas of their life.

> *"[They] see a difference between what they say [online] and what they [actually] believe and will do."[32]*

This compartmentalisation was understood by participants as making it difficult for their clients to analyse the narratives shown in pornography and the impact that these have on their behaviours, as well as to critically assess whether or not they fit with their understanding of the law or their own moral codes; content online is not 'real' and attitudes and behaviours associated with the online self are not understood to be reflective of their 'true' self. Several Frontline Workers explained that this can happen to such an extent that many men are shocked to learn that what they have been viewing online is in fact illegal, despite an awareness of what content constitutes illegal material.

> *"[They are] in a moral fight between the person they think they are and the person who acts the way they do."[33]*

However, despite the men's own compartmentalisation of their attitudes and behaviours, several Frontline Workers challenged the clear demarcation made by clients between online and offline worlds, giving examples of individuals that they had worked with for whom their online self *"leaks into real-life"[34]* – such that potentially harmful attitudes and behaviours manifest themselves in the offline world. As such, what was perceived by clients to be the compartmentalisation of their attitudes and behaviours is not necessarily the case. Furthermore, it was considered that this may have a detrimental effect in that it was seen to hinder individuals from holistically and critically assessing their attitudes and behaviours towards women.

---

[32] Director of Student Wellbeing (university)

[33] Psychotherapist (sexual offenders)

[34] Forensic Psychosexual Therapist

4. The interaction of pornography and other key factors influencing harmful sexual behaviours

As previously mentioned in this report, Frontline Workers were unanimous in their assertion that harmful sexual behaviours are never influenced by one single factor; rather it is a combination of factors which interact with one another to differing effect and create a conducive context facilitating the occurrence of harmful behaviours.

In order to better understand the role that pornography plays in influencing harmful sexual behaviours, the other main factors highlighted by participants as key to this wider context are explored in some detail, with a focus on the interaction of pornography with each of these factors. Since the purpose of this report was fundamentally to explore the influence of pornography, it does not seek to convey an exhaustive analysis of all the factors that might influence someone to think or act in a sexually harmful way.

The factors that surfaced in discussion with Frontline Workers fell into three spheres:

Individual factors: the physiological or psychological characteristics of an individual, and/or their unique personal experiences in life.

Community factors (online and offline): the influence played by an individual's immediate or extended family, the different peer groups they belong to (including friends, acquaintances and colleagues), their faith group, or the local (geographic) community.

Societal factors: the national or international norms or trends that can influence someone at an individual and at a community level. For example, the belief that men are typically the 'head of the household'.

4.1. Individual factors

Adverse childhood and adolescent experiences

Frontline Workers who deal with criminal sexual offences were quick to refer to 'adverse childhood experience' or trauma in early life. For perpetrators of contact offences especially, this appeared to be highly prevalent and a powerful influence on later behaviour. Adverse childhood experience was also a factor mentioned by Frontline Workers dealing with non-criminal, high-risk individuals, however it was less of a central factor.

Many Frontline Workers talked about how their clients have witnessed their fathers being highly abusive to their mothers. One pointed out that their clients often had fathers who: *"Treat their mothers like a dog, like a slave. And that's how they thought they should behave towards women".*[35] Some clients were described to expect a

---

[35] Rehabilitation Coordinator (A)

partner to take care of their needs, the way a mother might. This can translate into a neglect of the partner's needs and an inflation of one's own needs.

As well as witnessing violence, many of the more severe offenders discussed were the victims of physical, and often sexual, abuse as a child. A Frontline Worker providing rehabilitation for offenders claimed that:

"Probably about 80% of the people we see have been physically or verbally abused as a child."[36]

Experiencing childhood trauma - particularly witnessing damaging relationships between key figures in the child's life and experiencing abuse from those in positions of care - forms narratives of understanding of what to expect and how to be when in a relationship. When witnessing similarly domineering, controlling or abusive narratives of interaction in pornography, those who have experienced or witnessed such relationships in their own lives do not possess a counter narrative with which they are able to challenge the veracity, morality or legitimacy of what they see. One Frontline Worker explained that, when it comes to understanding sexual relationships or sexual interaction, her clients do not know anything outside of the harmful narratives they have learnt from their own experiences and those shown in pornography.[37]

Finally, some participants believed that childhood trauma may, in some cases, influence the use of pornography. This was the case with a client of a Psychotherapist in the sample, who used pornography as an outlet for stress when a bullying female boss brought back memories of teenage trauma.[38]

Social isolation

A fairly consistent risk factor for sexual aggression mentioned by Frontline Workers was social isolation. Some participants spoke about the ways in which individuals who struggle to form social bonds at an early age may find themselves isolated, which further exacerbates poor social interaction skills, and increases isolation.

"Social isolation or social awkwardness can have an impact if they are unable to form relationships with women, either because of low self-esteem or they were bullied at school or they don't think that anyone would like them. They don't have the outlet for a normal relationship so that may mean they force themselves on other people."[39]

Social isolation can also occur as a result of geographical isolation. One Frontline Worker referred to the case of an adolescent living in a rural setting with limited opportunity for social interaction. He had been a witness to and victim of abuse, was

---

[36] Rehabilitation Coordinator (B)

[37] Youth Worker (B)

[38] Psychotherapist (sexual offenders) (B)

[39] Rehabilitation Coordinator (B)

25

a regular (not intense) user of pornography and had become socially isolated during his adolescence. He ultimately exposed himself to some women in public.[40] The Frontline Worker believed that a unique mix of early life experiences, including social isolation, along with regular pornography use led to sexually aggressive behaviour.

Frontline Workers talked about how social isolation can exacerbate an individual's use of pornography and create a vicious circle of dependence. A few Frontline Workers had experience of clients who had become more and more obsessed with pornography as they became isolated from others.[41] They may have been bullied or ostracised socially at school and lacked people close to them who could sympathise or empathise; they felt powerless and out of control, rejected by others, and experienced feelings of low self-esteem. Participants felt that the use of pornography by these clients helped to quell these feelings but then added to their preoccupation with sex; subsequently increasing their masturbation rate and social isolation, leading to a vicious circle of dependency on pornography.

Further, some participants talked about how their clients' excessive use of pornography, which meant repeated exposure to demeaning and controlling images of women, exacerbated their harmful attitudes, as they lacked friends who could counter the narratives shown in pornography and challenge them on their point of view.

> *"They don't have people around them who can normalise [positive] attitudes and behaviours and knock things on the head."[42]*

Sexual preoccupation

Sexual preoccupation was frequently cited by the majority of Frontline Workers across different fields. This characteristic can lead individuals to pursue sex or sexual acts with aggression. Participants believed that while not all individuals who suffer from sexual preoccupation will ever go on to harm another person, if there are other factors in their lives that do not prevent them from acting on their desires (such as childhood trauma, social isolation), this can be a major contributor to sexual aggression.

Some psychotherapists in the sample referred to a heightened interest in sex during puberty that never falls away; rather it is a cognitive distortion and a cycle of behaviour, which is in part supported by their easy access to pornography. One Frontline Worker talked about clients masturbating 10-15 times a day.[43] Another talked about how pornography exacerbates this sexual preoccupation:

---

[40] Psychotherapist (sexual offenders) (A)

[41] E.g. Rehabilitation Coordinator (A), Prison Programme Lead (sexual offences)

[42] Prison Programme Lead (sexual offences)

[43] Rehabilitation Coordinator (A)

"When they [the clients] use the internet, it normalises [that sexual preoccupation] and disinhibits them".[44]

Participants believed that the sheer variety and scale of content available means that individuals can find themselves in a cycle of extensive pornography consumption, followed by greater sexual preoccupation, followed by exploration of new pornographic content, followed by new sexual preoccupations, and so on. This can lead to an addiction to pornography, such that individuals end up bingeing on pornography.

"They might hold it together during the week but on the weekend… it's pretty much 48 hours. They'll sleep for a bit but then, as soon as they wake up, they're online [watching pornography]".[45]

A few Frontline Workers pointed out that, while some people might be inherently more sexually preoccupied, it is not possible to be sure that this was not influenced by pornography use from an early age. One such Frontline Worker explained that clients reported their sex drives going down while they were in prison, probably because they didn't have access to pornography. When they left prison, they once again became preoccupied with sex.[46] While it was the stated belief of this participant that the lack of access to pornography resulted in decreased sex drive and frequency of masturbation, it must also be considered that time in prison would also mean minimal interaction with women.

Frontline Workers also reflected on the role stress can add to this problematic mix of sexual preoccupation, pornography, and masturbation; if a client already has an underlying sexual preoccupation, then stress exacerbates the need to act out:

"Stress is another big one for people. If you think of your average middle class, middle-aged guys, they're intelligent enough not to do drugs… they don't want to be an alcoholic… but what they think they can do to self-soothe and manage their dysphoric mood state is look at pornography. […] And they have normalised it [pornography] and are using it like a drug so they can't think about anything else because if you're masturbating in front of a screen then you can't think about work or your unhappy marriage."[47]

Finally, some participants believed that sexual preoccupation may also be exaggerated by social isolation, which, as discussed above, increases the opportunity for indulgence in online pornography, and the lack of reference points for one's own behaviour. Without friends or peers to share experiences with, these individuals get caught up in excessive masturbation and an addiction to pornography. This can then lead to lower self-esteem, rejection, and further

---

[44] Forensic Psychosexual Therapist

[45] Forensic Psychosexual Therapist

[46] Rehabilitation Coordinator and Rape Prevention Training Manager

[47] Forensic Psychosexual Therapist

27

isolation.[48] At its most extreme, this can lead to a total rejection of women and sex, as is the case with self-declared 'incels' ('involuntary celibates'),[49] who aggressively place the blame on women for their lack of sexual experience or experiences of sexual rejection.

Developmental / anxiety disorders or low cognitive processing

A minority of Frontline Workers also talked about the cognitive disadvantages experienced by some of their clients. In the case of clients with disorders such as autism or OCD, participants working with these individuals felt that they may obsessively collect pornographic images, and end up collecting indecent pictures of children.[50] A Frontline Worker working in child sexual abuse prevention, for example, stated that their organisation saw an "overrepresentation" of people with autism.[51]

Some Frontline Workers also pointed out that a number of their clients had intellectual disabilities, and that individuals such as these with low cognitive processing may be unable to critically assess the unhealthy relationships they see in their environment and online.[52] The risk of such cognitive disadvantages leading to harmful sexual attitudes and behaviours against women was understood to be heightened by pornography use. As a participant who worked with sexual offenders claimed, individuals with low cognitive processing may not be able to question the veracity of derogatory language or physical violence in pornography, and therefore assume this reflects normality[53].

4.2. Community factors

Machismo

Aggressive male peer culture was a factor in sexual offending that was universally mentioned by Frontline Workers. A number of different contexts were understood as places where this macho culture can arise (both online and offline), including school classrooms, workplaces, pubs, football matches, and online chatrooms and forums. In certain male-dominated settings, conversation can centre on men *"bragging about*

---

[48] Prison Programme Lead (sexual offences)

[49] Governor HMP

[50] Forensic Psychosexual Therapist, Prison Programme Lead (sexual offences)

[51] Charity Director (child sexual abuse prevention)

[52] Psychotherapist (sexual offenders), Psychotherapist (sexual offenders), Probation Psychologist

[53] Psychotherapist (sexual offenders)

their sexual prowess"[54] to the point where it becomes a "*race to the bottom*",[55] with men competing with each other to say the worst thing and receiving social validation when they do.

Frontline Workers cited how sexual acts become symbols of status and challenges to 'achieve'. 'Anal sex' was a frequently mentioned example, with one Frontline Worker recalling a man who had planned to intoxicate his girlfriend, with a view to having anal sex with her:

"It was really high-status behaviour for him, 'brown wings' - it even has a nickname… It was as if he hadn't achieved success at sex unless he'd done that. It was an important thing to do."[56]

As this example illustrates, participants felt that male 'locker room' competition and banter clearly led to harmful behaviours towards women. Frontline Workers in counselling / therapy described how their male clients had pressured their partners to have certain types of sex, which they inferred had come from watching such content in pornography and hearing their friends brag about their own experiences.[57]

Critically, in male-only environments, men are surrounded only by similar viewpoints (just with differing levels of intensity). Online forums made for the purpose of male banter can take this to the extreme:

"When online, when chatting with other men, all it requires is that one or more of the men to be misogynistic, sexist or objectifying of women. It's hard to be anything else; they're not going to be saying she looks like a lovely girl, I'd like to take her out for dinner. They're being abusive and it becomes normalised. They need to be more extreme, more hardcore, and more disgusting to continue the conversation. They want to have the 'peer group' interaction but they need to up the ante, one-upmanship of who can say the most disgusting thing."[58]

Irrespective of the intensity of the misogyny, male peer culture can be problematic because there are (usually) no counternarratives to the male sexual domination that is repeated in their various social environments.

Strict gender norms in the community

An individual's immediate community plays a major role in influencing their attitudes and behaviours towards women. Inevitably this means their sexual attitudes and behaviours are also influenced. Family traditions, religious customs, and local heritage were all mentioned by Frontline Workers as influential dynamics. Two

---

[54] Relationship Therapist, Counsellor

[55] Director of Student Wellbeing (university)

[56] Rehabilitation Coordinator (A)

[57] Relationship Therapist

[58] Forensic Psychosexual Therapist

Frontline Workers specifically mentioned that their clients behaved in a sexist way because "*this is how their fathers were*"[59], referring not just to their individual family but other relatives and generations.

A range of examples of strict gender norms in the community were cited:

- Islamic communities which "follow a very strict interpretation of how men and women should behave."[60]

- Older, white men from conservative backgrounds, with fathers who expected a hot meal on the table when they got in from work (and could turn to violence if it wasn't).[61]

- Young people from a Bangladeshi community, who claimed they were "going to have more than one wife because that's what their grandparents did."[62]

A number of Frontline Workers commented on the fact that entrenched gender norms, where women are required to behave in a deferential way to men, can give men the impression that women should succumb to male sexual desires.[63] This attitude is then reflected in other narratives, such as those in pornographic films.

4.3. Societal factors

Systemic gender inequality

Many of the Frontline Workers made the point of calling out gender inequality at a societal level as a major contributing factor to harmful sexual attitudes and behaviours.

> "*The most obvious thing is living in patriarchy. The inherent entitlement and being given power even from such a young age. We work in primary schools and already at age 4 or 5… the amount of space being given to little boys is bigger*"[64]

Frontline Workers believed that an "*endemic imbalance of power*"[65] can give men a sense of entitlement over women's bodies, especially if they are not exposed to, or seek out, narratives that challenge this. This intrinsic inequality comes from the production and reproduction of social norms about gender. While it is beyond the

---

[59] Rehabilitation Coordinator (B) and Social Worker

[60] Probation Psychologist

[61] Rehabilitation Coordinator (B)

[62] Probation Officer (youth)

[63] Probation Psychologist, Probation Officer (youth), Social Worker

[64] Rape Prevention Training Manager

[65] Social Worker

scope of this report to explore all drivers of patriarchy; religion, inheritance structures, popular culture (music, films, TV, magazines), and social media were all named as high-level societal phenomena that both reflect and create unequal expectations of men and women. Some of these are discussed in more detail later in this section and under 'Community factors'.

Pornography was certainly felt to contribute to this systemic inequality. As outlined in section 3.4, participants believed that pornographic videos tend to have a very male-centred storyline, where male domination of women is commonplace and male ejaculation marks the end of the sexual act. Frontline Workers dealing with young men felt that this content reinforced the male domination of women that some of their clients see played out in their families and their broader community.[66]

While systemic gender inequality was a fundamental factor called out by Frontline Workers, some acknowledged that this is of course a rather unhelpful focal point for the purposes of improvement, since it requires the weight of history to affect change.

"Fundamentally it's about addressing gender norms in society… but that's really playing the long game… there's more that can be done tactically to prevent sexual abuse."[67]

It is some of the more specific sources of inequality narratives that should be targeted for the purposes of tackling harmful sexual attitudes and behaviours. Furthermore, since many men live within a patriarchal society but do not display harmful sexual behaviours towards women and girls, general gender inequality in society should be considered as a crucial context to the more specific sources of inequality, but not alone as a causal factor for harmful sexual behaviours.

Sexualised media

Frontline Workers across different fields talked a great deal about the influence of wider public media, in all its various forms. Many referenced 'the media' in general terms, because of the pervasiveness of problematic narratives across almost all mediums; namely, internet, television, film, magazines, radio, and social media.

The rise of social media was attributed by many Frontline Workers (and especially those dealing with younger clients) as a major contributor to harmful sexual attitudes and behaviours. One Frontline Worker went so far as to call it "*the scourge of our young people*",[68] in part due to the way it normalises sexual and aggressive behaviour. The examples they provided included the spread of aggressive and

---

[66] E.g. Probation Officer (youth), Rape Prevention Training Manager - others?

[67] Manager - Child Sexual Abuse Prevention Charity

[68] Deputy Head - Alternative Provision

derogatory language like "*my gash*" in reference to a girlfriend, or "*gave her a beating*" in reference to having sex.[69]

Other Frontline Workers pointed to the fact that social media provides a platform for sharing explicit images.[70] Young people are readily sharing pornographic images and nude images of peers on platforms like WhatsApp (often group chats), as well as more public forums such as Twitter.[71] In some peer groups, this has led to more extreme behaviour, including the use of 'bait out' pages, where users share explicit images, videos or sexual gossip about others.

Furthermore, some participants believed that mainstream pornography is blurring into mainstream social media - with many stars of pornography films sharing nude or suggestive images on Instagram. And in further blurring of boundaries, Instagram stars earn their fame from posting highly sexualised images of themselves.[72]

Mainstream television programmes and films were also cited as important sources of narratives that contributed to systemic gender inequality and sexual expectations. Frontline Workers talked about how typical male characters in movies and TV series are proactive or aggressive, while female characters are more passive or coy.[73] One Frontline Worker felt that TV offered an important opportunity to shift sexual norms and behaviours:

"What we need is social change, not small miracles on individuals… [for example] on Eastenders if someone is shown looking horrified by a guy saying 'stick a double in there' [to get a woman drunk] - this is what will change the landscape."[74]

Frontline Workers explained that, for some of their clients, the tension between a conservative homelife on the one hand and highly sexualised media and pornography on the other can lead high-risk individuals to commit sexual offences.

Lack of education and dialogue on healthy sexual relationships

One of the most consistent suggestions to tackle harmful sexual attitudes and behaviours was greater discussion on what healthy sexual relationships look like. Frontline Workers had frequently found that their clients' families did not talk about sex and relationships. This was often - but not always - because they came from

---

[69] Deputy Head - Alternative Provision

[70] E.g. Social Worker, Youth Worker, Sexual Health Coordinator - Alternative Provision

[71] Youth Worker (A)

[72] Sexual Health Coordinator - Alternative Provision

[73] E.g. Rape Prevention Training Manager, Relationship Therapist, Psychotherapist (sexual offenders) (A) - others?

[74] Rehabilitation Coordinator (A)

conservative backgrounds. For example, one Frontline Worker was based in a very conservative community, where parents of sexual offenders would say:

"We've never talked to them about sex. In our culture we don't have that conversation."[75]

Conservative attitudes towards sex and relationships mean young people can lack outlets to express and understand new sexual feelings, while also providing no opportunity for challenges to (harmful) sexual narratives forming.[76]

More generally, the lack of education and awareness of consent was a major theme for Frontline Workers. This held across criminal and non-criminal contexts. Some believed their clients had no knowledge of it; their sense of entitlement to female bodies was so strong that they didn't feel they had to ask for sex (which was especially true of some married clients).[77] For others "*they think as long as she doesn't say no, that's consent*."[78] Frontline Workers strongly believed more could be done to teach men and boys about obtaining explicit consent.

Youth-focused Frontline Workers tended to be of the opinion that sex education in schools was too limited and/or didn't feel relatable for pupils.[79] In their professional experience, pornography seemed to them to be one of the main ways through which young people learn about what sex. This was of some concern, given the types of narratives that appear to be common in pornography, as discussed in section 3.4.

"It is surprising to me how little our [pupils] know about contraception. They know about banging… they have anal sex, they have sex a lot… but they have no concept of contraception or sexually transmitted diseases or what to do if you fall pregnant, because none of that is shown on social media or on what they see."[80]

"In porn the emotion is removed. And if you have limited knowledge, you think this is how it is… you don't have to consider someone else's feelings"[81]

As such, Frontline Workers generally felt that society should be doing more to help young people learn about sex and relationships in a safer, better monitored space, where potentially harmful narratives can be challenged appropriately.

---

[75] Probation Officer (youth)

[76] Sexual Health Coordinator - Alternative Provision

[77] Psychotherapist (sexual offenders)

[78] Youth Worker

[79] E.g. Rape Prevention Training Manager, Probation Officer (youth), Youth Worker - others?

[80] Deputy Head - Alternative Provision

[81] Probation Officer (youth)

"Unless it's pointed out to them, adolescents are oblivious to the gender stereotyping in porn, and accepting of the violence… we need to help teenagers critically assess what they watch online"[82]

This lack of education on sex and consent interacted with what was perceived as the educative role of pornography. Many Frontline Workers discussed how pornography fills the gap left by the lack of education around sex and relationships, taking on an educative role; a template for what sex and sexual relationships should look like.

While this educative role is of itself not necessarily harmful, the Frontline Workers expressed concerns about the prominent themes in pornography (see section 3.2) and the impact that these have on the subsequent understanding of sex and relationships being learned by their clients who view such content.

Participants conveyed that education about sex, consent, and relationships is not enough. These Frontline Workers also talked about the importance of education efforts on topics like gender equality, bystander intervention, and mental health awareness. Many spoke of the responsibility of media companies to tackle unhealthy gender norms perpetuated on screens. All of these efforts could provide counternarratives to the potentially harmful narratives that high risk individuals pick up from pornography, sexualised media, entrenched gender norms in the community, and even traumatic experiences from childhood.

---

[82] Manager - Child Sexual Abuse Prevention Charity

5. Conclusion

The aim of this research report was to provide the GEO with evidence of the perceived relationship between the use of pornography and harmful sexual behaviours by those who work directly with men and boys who have displayed - or are at risk of displaying - such behaviours.

Pornography was a current, common consideration for participants in their lines of work

Out of the 20 Frontline Workers interviewed, 15 mentioned pornography unprompted as a contributing factor, and all acknowledged it as a contributing factor when later prompted. The view that pornography played a role in their clients' harmful attitudes and/or behaviours was undisputed; what was harder for them to articulate was the strength of the contribution of pornography, given the complexities of the other contributing factors in their clients' lives.

All participants worked with clients who exhibited a range of harmful sexual attitudes and behaviours towards women and girls. These included objectification and verbal misogyny; a sense of entitlement to women; unrealistic expectations of sex; unhappy sexual relationships; not obtaining consent; and/or verbal/physical coercion. These harmful sexual attitudes and behaviours were rarely discrete; instead they were interrelated and had varying levels of severity and co-occurrence.

The changing landscape of pornography was widely acknowledged, and participants described seeing its contributing role change over time. They discussed how the current ease of access, affordability, and anonymity of pornography has meant that their clients can now watch pornographic content whenever they want, simply via their smartphones. Most believed that formerly 'hard to access' pornography is now widely available, and mainstream content has become more violent and extreme.

Analysis of the ways in which some participants described their clients' consumption of pornography illustrated two key processes, which then shape and facilitate harmful sexual attitudes and behaviours. The first was a process of desensitisation and escalation, whereby individuals need increasingly more hardcore and taboo content to feel stimulated and pornography consumption becomes addictive. The second was a process of detachment and compartmentalisation, where individuals mentally separate their online selves from their offline selves. This detachment means that they are unable to critically assess the harmful narratives in pornography as these are seen to have little to no relevance to their 'real' lives. Although not the case for all, several Frontline Workers stated that they have worked with clients where, although the clients believed that there was a clear demarcation between their online and offline selves, there had been spill-over from online behaviours to behaviours in their 'real', offline lives.

Participants reported that their clients' harmful behaviours towards women and girls reflected narratives common to pornography

Many Frontline Workers discussed how pornography plays an insidious, educative role for sex and relationships; a template of attitudes and behaviours in a society where the internet is prevalent in every aspect of our lives. Themes that dominate pornography are frequently reflected back in the harmful attitudes and behaviours exhibited by their clients. This includes the lack of consent, the focus on male pleasure only, the objectification of women, and the seeming commonplace occurrence of violence and specific sexual acts. This is seen as especially problematic for younger individuals, where pornography is their key source of learning about sex and sexual relationships.

There are a multitude of factors contributing to harmful sexual attitudes and behaviours

Frontline Workers cited many factors that contribute to harmful sexual attitudes and behaviours at an individual, community, and societal level. Some of these factors were reported to be far more influential than pornography, however, in many instances, pornography interacts with and exacerbates these factors. For factors that contributed at an individual level (such as sexual preoccupation, social isolation, and adverse traumatic childhood experiences), pornography can provide an outlet to act out and self-soothe. For contributing factors at a community level (such as machismo and strict gender norms), pornography can fuel 'locker room' banter and prime social symbols of success. Lastly, for contributing factors at a cultural level (such as gender inequality and sexualised media), pornography can reinforce and normalise sexually aggressive behaviour, and reflect and fuel problematic narratives that go unchallenged due to the lack of education/dialogue being provided on healthy sexual relationships. A major concern for Frontline workers in relation to unchallenged narratives was around the topic of consent, with many explaining that their clients either had no concept of consent and why it matters or had an incomplete understanding of what consent looks like in a range of different situations.

In summary, Frontline Workers were clear that, when working with their clients, they have certainly seen pornography play an important, influential role in the development of harmful sexual behaviours towards women and girls. The majority of participants interviewed spontaneously mentioned pornography as an influential factor, and all acknowledged its contributing role when later prompted. Another key finding of this report was that all participants strongly emphasised that there is no one single factor that can be isolated as the key influencer and contributor towards harmful sexual behaviours; rather it is a range of factors which, when taken together, contribute towards a conducive context for such behaviours. While participants were concerned about the negative influence of pornography overall, they were also concerned about its interaction with other influential factors and the impact that this has on creating a context in which harmful sexual behaviours towards women and girls can, and do, occur.

6. Appendix

6.1 Job titles of Frontline Workers

Frontline Worker job title (generic)	Number of Frontline Workers
Counsellor	1
Deputy Head - Alternative Provision	1
Director of Student Wellbeing (University)	1
Forensic Psychosexual Therapist	1
Governor HMP	1
Charity Director (child sexual abuse prevention)	1
Prison Programme Lead (sexual offences)	1
Probation Officer (youth)	1
Probation Psychologist	1
Programme Head (domestic violence intervention)	1
Psychotherapist (sexual offenders)	2
Rehabilitation Coordinator	2
Relationship Therapist	1
Sexual Health Coordinator - Alternative Provision	1
Social Worker	1
Rape Prevention Training Manager	1
Youth Worker	2

6.2 Discussion guide used for interviews with Frontline Workers

START

Topic area	Time (max)
Introductions	10 mins
A picture of the clients they work with	10 mins
Influences on harmful attitudes/behaviours towards women	20 mins
Behavioural journey of a typical client	10 mins
Exploring the role of pornography	15 mins
Final check against lit review themes	5 mins
Thoughts going forward	5 mins

NB. times specified are maximum times.

Introductions [10 mins]

Moderator to explain the following:

- My name is [X] from a research agency called The Behavioural Architects and we're currently working on a project funded by the Government Equalities Office, looking at some of the pathways to negative and harmful attitudes and behaviours towards women (NB. we'll explain more during our discussion)

- We're speaking to more than 20 Frontline Workers from a range of organisations and all our findings will be reported anonymously

- For the purposes of this study we're only interested in adults and young people over the age of 16, not children

- We ask that you respect confidentiality and do not disclose any individuals by name, and avoid referring to any details that might identify anyone

- Where we quote interviewees we'll use a generic, unidentifiable job title *(for example [xxxx])*

- We're audio recording the session for research purposes, so we can refer back during analysis - these are destroyed at the end of the project

- Do you have any questions before we begin?

- To start off, please tell me about your organisation:

  - Overall aim of the organisation and nature of the work

  - Main audience(s) you work with

  - Other organisations you partner with

- And now tell me a bit about yourself: your role, how long you've been doing it, how and why you got into it

Picture of the clients they work with [10 mins]

I'd like to get a picture of the range of clients you work with. Focussing on males aged 16 or older, tell me about some 'typical' people you work with. *Probe: age, location, family background etc.*

- In what capacity do you work with them?

  - How often are you seeing them?

  - What help are you providing them?

  - How long have you been working with them?

- What are they like as people?

- *[If relevant]* Describe some of your clients' views on life: what are their hopes? What are their concerns?

Influences on harmful sexual attitudes/behaviours towards women [20 mins]

For our project, we are particularly focused on harmful *sexual* attitudes and behaviours towards women. By this we mean a broad spectrum; everything from sexist attitudes to acts of coercion and aggression - be that verbal or physical.

- What are some harmful sexual attitudes your clients have expressed?

- And what harmful sexual behaviours have they expressed?

Moderator to write down each factor discussed on to an individual post-it note. For Skype interviews, moderator to also write a list in a Google doc to show via screen share later on.

- **What factors (this could be anything at all) do you think have contributed to these attitudes and behaviours?** *(Key question to spend time on. Refer to specific attitudes and behaviours discussed.)*

  - *Listen for pornography - note, but park longer discussion until later*

- *Probe all factors that come up: what it means exactly, what harmful attitudes or behaviours they are impacting, and how they might be doing so*

Use each of the following as probes, continuing to note down key factors.

- How do **personal circumstances** contribute? E.g. age, income, religion, age, sexual orientation, religious beliefs, mental health

- How have the **people around them** contributed? E.g. family background, individual friends, broader groups of friends/acquaintances etc.

  - What about the **other people or places** they spend time with? E.g. work / colleagues, school / teachers / peers, place of worship / religious community etc.

- How has **media** contributed?

  - **Social media**? E.g. Facebook, YouTube, Twitter, Instagram etc.

  - **Other media**? E.g. TV, music, news etc.

- How do broader **societal/cultural trends** contribute? E.g. mobile access, other technology, political changes, economic factors, other cultural changes

Behavioural journey of a typical client [10 mins]

I'd now like to do a little exercise with you. Could you think of a specific client that 'typifies' the broader audience you work with and some of the examples we've been talking about. Keep them in mind. We understand that you don't have sight of everything that goes on in your clients' lives, but we want you to note down what you know to be true and what you'd expect from your experience.

We'd like you to map the specific factors that you feel have contributed to that client acting out an act of sexual aggression (attitude/behaviour). Starting from birth through to the act of aggression itself.

Moderator to do as follows. For Skype interviews, participants simply talk moderator through each factor and where it should be placed and moderator to draw the behavioural journey.

- Pick a 'specific' client, and a specific act of sexual aggression they have committed - write this down on the far right hand side of an A3 piece of paper

- Write down all the key factors that are likely to have contributed

  - Moderator to probe earlier factors (personal, social, media and cultural)

  - Which factors do you see as having greater influence?

Exploring the role of pornography [15 mins]

Now that we have mapped out a range of influencing factors on harmful attitudes and behaviours, we'd like to focus on the role of pornography. By pornography, we are specifically referring to any media (including: internet, books, videos, magazines etc.) intended to sexually arouse consumers through the depiction of nudity or explicit sexual behaviour. We're primarily interested in legal pornography - so not things like child pornography - but we're interested to hear your perspective on the influence of different types of porn.

- Without thinking too much, what are your first thoughts about pornography and harmful sexual attitudes and behaviours?

    - Is pornography something that comes up in your discussions with your clients or when discussing cases with your colleagues?

- How would you describe the role of pornography in your clients' lives?

    - What/when/where/how are they watching? Who with etc.

    - How has this changed over time? What has been the impact?

    - Both throughout a client's life if a long-term client

    - And broadly over time e.g. when started in role vs. now

- **Probe the role of pornography.** How has it influenced their attitudes and behaviours towards women? (Key question to spend time on)

- How does it interact with some of the other factors you spoke about (drawing explicitly on specific topics mentioned, drawing on personal, social, media and cultural).

Coming back to the 'individual behavioural journey' you mapped out, I now want you to think about where pornography fits into their behavioural journey:

- What are the key touchpoints where pornography can impact? What age?

- Where does it fit among the other factors you have outlined? Do any of them link together? How influential would you consider porn's relative importance vs. other factors?

Final check against literature review themes [5 mins]

As part of this project, we have recently completed a literature review, looking at academic research into the relationship between pornography and harmful sexual attitudes and behaviours towards women and girls. There are some key themes coming out of the review and we'd be interested to know whether these echo the experiences you have had in your work. *Only ask about themes that haven't already come up.*

Probe where relevant: when have they seen it come up (how often), for which kinds of clients, any nuances to the pornography used, how concerned are they about the impact of pornography on these specific harmful attitudes and behaviours.

- From your experience, have you seen any connections between pornography and attitudes and behaviours relating to the **objectification of women**?

- ...or **men's sexual expectations of women**?

- ...or **acceptance of sexual aggression towards women**? (Attitudinal)

- ...or **perpetration sexual aggression towards women**? (Behavioural)

Thoughts going forward [5 mins]

To finish off, do you have any reflections on what could be done moving forward to combat negative and harmful attitudes towards women and girls? Thinking about policy makers, those that support communities, healthcare professions etc.?

If you had to sum up the impact of porn on attitudes and behaviours towards women and girls, what would you say?

END

6.3 Thematic analysis methodology

Thematic analysis is an iterative process of surfacing themes from a collection of qualitative data. For this study, a combination of deductive and inductive exploration was used: the preceding literature review provided some overarching themes to explore in the interviews, but an unprompted approach to the Frontline Worker interviews allowed additional or nuanced themes to surface.

Four experienced qualitative researchers conducted the 20 interviews for this report, following a set discussion guide provided in section 6.3. All interviews were audio recorded. A standardised notes template in Google Docs was used, which moderators completed after their interviews, adding verbatim quotes by referring to audio recordings.

After all the interviews were complete, each moderator familiarised themselves with the total set of fieldwork notes. During a series of 2-3 hour analysis sessions, findings relevant to each research objective were discussed as a group. As consistent findings emerged, these were logged with accompanying notes. These consistent findings (or 'codes') were collated across multiple analysis sessions, and then organised into broader themes, which are represented in this report.