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Hello, and thank you for this opportunity to speak before you today. I want to apologize that there will simply not be enough time to present all the information that could help you to understand the urgency of this legislation at this time, and so, what I will be speaking about will only scratch the surface.

I am a Certified Sex Addiction Therapist. I have worked as a mental health provider with the sex offender population since 2000 and the sex addiction population since 2008. I have completed well over one hundred sex offender mental health assessments and I have never clinically interviewed anyone convicted of a sexual offense that had no history of exposure to pornography. The same is true for persons who struggle with sex addiction. Regardless of whether or not pornography is the preferred outlet used to act out by either sex offenders (which would be illegal pornography, including child pornography), or sex addicted persons, nearly all persons reported significant struggles with pornography use. Often, it is only the use of treatment-related polygraphing that breaks the denial of compulsive use and brings accountability for sometimes decades-long histories of compulsive pornography use. This is not a question of simply stopping use of pornography for these persons. In both populations, the type of pornography each individual reports consistently seeking will reflect their history of trauma; abuse, neglect, abandonment and attachment issues. These individuals require specific, targeted treatment to resolve the trauma-related issues, so that their dependence on pornography does not continue and does not maintain the addictive cycle and the need to relapse. They also require structured recovery programming to re-train their brains and nervous systems to decrease sensitivity to pornography and other forms of acting out, educate them about what addiction is and how it is impacting their lives and awaken their spirituality to hope so that they can heal.

In 2018, the World Health Organization added sexual compulsive behavior to its list of sexual health problems that are now identified worldwide. 
http://www.who.int/reproductivehealth/topics/sexual_health/issues/en/

Sexual compulsivity drives the behavioral component of both sexual offending and sexual addiction, in the sense that compulsive energy is experienced in the body and the nervous system as an intense, driving energy.

Pornography use spikes the nervous system with chemical blasts that disrupt normal self-awareness, self-motivation and self-care. Compulsive pornography use results in objectification, which is super-sizing the ability to notice in order to stay distracted. First the user of pornography objectifies him or herself, as the body becomes a vehicle to create chemical experiences by exploiting what the body is capable of and cannibalizing sexual arousal. Looking into a lighted screen creates a trance state in the brain that
allows the users to remain disconnected enough from themselves to use themselves to achieve feeling states that are experienced as being “safer” than the feeling states that were created by their trauma-related experiences. Emotions and energies that were created by trauma-related experiences do not leave the body unless they are intentionally expelled. Arousal can be made to be very intense by the use of pornography and therefore blocks out other feelings such as shame and guilt; hence, the process is experienced as being greater than these feelings and within that process individuals feel “safe” from those feelings. In cases of people sincerely seeking help, one reason they know something is wrong with what they are doing is that individuals in this situation subjectively know the difference between “normal” sexual energy, even strong, intense, normal sexual energy, and compulsive sexual energy. They can tell you about the difference and the difference in the impact the two energies have on them. And what their interests are during the two different energies.

Then users can move to objectify not just those in the frame of the pornography they view, but those in the environment that either remind the user of their own history of vulnerability or, anyone who can be used to exaggerate the potential for sexual arousal within the compulsive user’s body. But, no one ever objectifies anyone without objectifying themselves first. And, no one objectifies randomly – objectification is a ritual that is part of acting out, and moving through the addiction or offending cycle. In the case of compulsive pornography users, exploitation of the nervous system and brain chemicals, and using vulnerable or unaware others is unconsciously used to distract the user from traumatic memories stored in the brain and body. A person suffering from unresolved trauma will seek forms of distraction and release from the on-going tension in their nervous systems and because of emotional responses to their current environments that remind them of the original trauma in some way. Because pornography is so readily available, individuals learn earlier and earlier to remain disconnected from themselves and escape their pain by the use of pornographic outlets. Their world has proven itself unsafe because of their histories with trauma. Degrading and overloading their human dimensions to stay distracted from what they have had to survive does nothing to restore calm, connection, acceptance and peace. The best they can hope for is to be able to use outlets to find some relief, which is short-lived and costs them, and undeserving others, dearly.

This is likely at least partly the case that recently involved a high-profile local media personality. Another feature of pornography use that can likely be related to that case is its influence on changing sexual preferences. And a sexual preference can mean that someone learns to arouse to something for a non-sexual reason, such as creating intensity in the nervous system to manage stress that is related to original trauma. It can also serve as a “theme” that reflects childhood trauma in some way. Research from 2012 stated: “At present, our culture both underestimates the power of erotic cues and misinterprets their significance. (To clarify, sexual cues are people or things in the environment that create a physical sexual response in a person) That is, sexual cues are presumed harmless because sexual tastes are thought to be hardwired whatever one
views. Two circular assumptions follow from this faulty premise: First, we assume that what one climaxes to reveals one’s unalterable nature; and second, we assume that if one begins climaxing to something incongruous one is merely discovering one’s “true” nature. Such flawed reasoning arose in part due to medical politics which gave rise to a staunch refusal to investigate the plastic effects of sexual behaviors on the brain’s delicate reward circuitry. Actual experience, however, suggests that intense stimulation can alter sexual tastes in some brains. Indeed, some of today’s Internet porn users are undergoing unnerving changes in their brains and arousal patterns...

And, it is very likely that this has something to do with why what happened to the high profile person recently, happened.

https://www.yourbrainonporn.com/?s=WIRING+SEXUAL+TASTES+TO+HAIRLESS+GENITALS%E2%80%A6OOPS%21

Statistics on Pornography use:

According to statistics gathered by Pornhub.com, that claims to be the largest pornography site on the Internet:

Between 2014-2018, pornography use on that site went from

*18.35 Billion visits to the site (2.15 m per hour, 35k per minute) to

*30.3 billion searches, or 962 searches per second.

*The United States was the #1 country visiting Pornhub.

Ask yourself - If people are spending this much time seeking pornography, what aren’t they doing?

The website Webroot, an Internet security site, contains the following information:

“The societal costs of pornography are staggering. The financial cost to business productivity in the U.S. alone is estimated at $16.9 Billion annually; but the human toll, particularly among our youth and in our families, is far greater. According to Patrick F. Fagan, Ph.D, psychologist and former Deputy Assistant Health and Human Services Secretary, “two recent reports, one by the American Psychological Association on hyper-sexualized girls, and the other by the National Campaign to Prevent Teen Pregnancy on the pornographic content of phone texting among teenagers, make clear that the digital revolution is being used by younger and younger children to dismantle the barriers that channel sexuality into family life.”


So, people aren’t paying as much attention at work, and certainly aren’t working to their full potential during work hours. I included some links here for anyone who
would like to review news stories that address this issue. One of the links reported "Nearly half of Pornhub viewers visit the site between 9am-6pm".


https://www.ft.com/content/ead0956e-de96-11e7-a0d4-0944c5f49e46

According to the site Enough is Enough:

- “Pornography has changed. Extreme content is the new norm. Soft porn has disappeared. In 2010 the journal Violence Against Women reported physical aggression in 88.2% of leading pornography scenes and verbal aggression in 48.7% with 94.4% of the aggression directed towards women and girls. A February 2018 headline in Esquire Magazine read, “Incest is the Fastest Growing Trend in Porn.”
- The Minnesota Human Trafficking Task Force recently found 46 published research studies demonstrating that exposure to pornography puts individuals at increased risk for committing sexual offenses.
- Researchers at the University of Massachusetts at Boston performed a Google trend analysis showing searches for “teen porn” more than tripled between 2005-2013, and teen porn searches reached an estimated 500,000 daily in March 2013 or over one-third of total daily porn searches. You read that right, 500,000 searches daily for teen pornography. Americans are becoming more and more attracted to pornography depicting sex with underage persons and this growing exposure to increasingly deviant porn is driving more criminals toward victimizing more teenagers.” [https://www.enough.org/stats_porn_industry](https://www.enough.org/stats_porn_industry)

Pornographic materials often depict broken family relationships and damaged individuals perpetrating harmful sexual behaviors on vulnerable others. Such depictions can influence juvenile viewers to attempt similar behaviors on children, siblings, or peers within their community or family as their brains are changed by pornographic use. Some individuals become obsessed with victimizing certain others and will develop stalking behaviors using technology and social media to persistently attempt to gain access to the individual.

So, people aren’t living in reality about themselves, boundaries, relationships or their futures under the influence of compulsive pornography use.

University of Oklahoma research published in 2017 indicated that divorce probability “roughly doubled” for certain age groups based on the use of pornography.

“We find that the probability of divorce roughly doubles for married Americans who begin pornography use between survey waves (the time periods when the research information is gathered)…and that this relationship holds for both women and men”.


So people aren’t building into their primary relationships. It is certainly not out of the question to ask if parenting, and extended family relationships are also being similarly neglected. Those kinds of questions are part of a sex addiction assessment.

Research from 2016 concluded that sexual dysfunction in much younger men was related to compulsive pornography use. “Traditional factors that once explained men’s sexual difficulties appear insufficient to account for the sharp rise in erectile dysfunction, delayed ejaculation, decreased sexual satisfaction, and diminished libido during partnered sex in men under 40… evidence that Internet pornography’s unique properties (limitless novelty, potential for easy escalation to more extreme material, video format, etc.) may be potent enough to condition sexual arousal to aspects of Internet pornography use that do not readily transition to real-life partners, such that sex with desired partners may not register as meeting expectations and arousal declines. Clinical reports suggest that terminating Internet pornography use is sometimes sufficient to reverse negative effects, underscoring the need for extensive investigation using methodologies that have subjects remove the variable of Internet pornography use”.

So, people aren’t finding a personal connection during sexual intimacy.

And, finally, people are changing their neurobiological responses during compulsive sexual behavior including pornography use.

From the excellent website Yourbrainonporn.com: “To date every neurological study (included on this site) offers support for the porn addiction model… All support the premise that internet porn use can cause addiction-related brain changes…” Also: “It is clear that the current definition and understanding of addiction has changed based with the infusion of knowledge regarding how the brain learns and desires. Whereas sexual addiction was formerly defined based solely on behavioral criteria, it is now seen also through the lens of neuromodulation”. This, again, is a feature of cannibalizing sexuality – manipulating biology and neurobiology to avoid the history that lives there – what has happened to a person that the person cannot tolerate remembering and can only continue surviving.

The treatment of sex and pornography addiction, as well as the future of sex offender treatment, will be based on the reality that unhealthy and criminal sexual behaviors in at least mentally competent individuals arises from trauma-information that is held in the nervous system. The way in which individuals compulsively seek distraction and relief from this information, or compulsively re-enact it, indicate that their brains and nervous systems have been hijacked in service of survival. We owe them the chance to
heal themselves. Treating pornography as a public health crisis can help them understand that escaping and distracting is not living and they deserve to live their lives safely in their bodies and their communities.
