

Mental- and Physical-Health Indicators and Sexually Explicit Media Use Behavior by Adults

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DOI: 10.1111/j.1743-6109.2010.02030.x

ABSTRACT

Introduction. Converging evidence from culturally diverse contexts indicates that sexually explicit media use behavior (SEMB; i.e., pornography consumption) is associated with risky sexual health perceptions and behaviors, many that involve high risks of HIV/STD transmission.

Aim. Essentially unexplored, and the focus here, are potential relationships between SEMB and nonsexual mental- and physical-health indicators.

Main Outcome Measures. Variability in six continuously measured health indicators (depressive symptoms, mental- and physical-health diminished days, health status, quality of life, and body mass index) was examined across two levels (users, nonusers) of SEMB.

Methods. A sample of 559 Seattle–Tacoma Internet-using adults was surveyed in 2006. Multivariate general linear models parameterized in a SEMB by respondent gender (2×2) factorial design were computed incorporating adjustments for several demographics.

Results. SEMB was reported by 36.7% ($n = 205$) of the sample. Most SEMB users (78%) were men. After adjusting for demographics, SEMB users, compared to nonusers, reported greater depressive symptoms, poorer quality of life, more mental- and physical-health diminished days, and lower health status.

Conclusions. The findings show that mental- and physical-health indicators vary significantly across SEMB, suggesting the value of incorporating these factors in future research and programmatic endeavors. In particular, the findings suggest that evidence-based sexual health promotion strategies simultaneously addressing individuals' SEMB and their mental health needs might be a useful approach to improve mental health and address preventable sexual health outcomes associated with SEMB. **Weaver JB, III, Weaver SS, Mays D, Hopkins GL, Kannenberg W, and McBride D. Mental- and physical-health indicators and sexually explicit media use behavior by adults. J Sex Med 2011;8:764–772.**

Key Words. Health-Risk Factors; Mental Health; Pornography; Sexually Explicit Materials; X-Rated; Sexual Attitudes

Introduction

Public health professionals have long recognized the potential adverse consequences resulting from using sexually explicit media content for entertainment purposes (i.e., reading and/or watching pornography) as substantial public health concerns [1–4]. Almost four decades ago, for instance, Calderone [5] speculated that media portrayals of sexually explicit behaviors

yielded undesirable consequences for “various members of the community” and stressed the need for public health to address the issue “in behavioral and value terms.” Almost 25 years ago, Koop [3], reporting on his Surgeon General’s Workshop on Pornography and Public Health, concluded that sexually explicit media use stimulates “attitudes and behavior that . . . impair the mental, emotional, and physical health of children and adults and may thus contribute significantly to the

morbidity burden in our society.” More recently, such concerns were reaffirmed by Perrin and his colleagues [6], who concluded that “Pornography is . . . a problem with ramifications for the public’s health.”

Although published [7,8] prevalence estimates of sexually explicit media use vary widely (20–65%), the behavior appears widespread among American adults. Evidence from 14 recent surveys in the General Social Survey Series [9], for instance, reveals an average overall sexually explicit media use behavior (SEMB) prevalence estimate of 24.7% (standard deviation [SD] = 2.1%, range = 7.7%), with men (mean [M] = 32.9%, SD = 3.1%, range = 12.5%) more likely (odds ratio [OR] 2.31, 95% confidence interval [CI] 2.16–2.47) to report SEMB than women (M = 17.3%, SD = 2.5%, range = 8.9%).¹ In other words, millions of Americans, particularly males, use sexually explicit media.

The health and social consequences of SEMB are evident within an extensive and diverse research literature. Initial studies of adults, for instance, demonstrated that exposure to pornography is capable of altering perceptions and dispositions toward sexuality and relationships formed on its basis [10,11]. Several experimental studies showed that repeated exposure to common, nonviolent pornography significantly shifted sexual norms toward “greater acceptance of pre- and extramarital sex and greater tolerance of nonexclusive sexual access to intimate partners,” [12,13] diminished the “societal significance assigned to the institution of marriage” and perceptions of its “future viability” [13], and changed “values to the effect that men ought to dominate women – and not only in the sexual realm” [13]. These shifts emerged for both male and female research participants, although at times to differing degrees. Controlled investigations have also revealed that exposure to pornography can elevate sexual callousness towards women [14,15], trivialize rape as a criminal offense [16], and facilitate aggressive attitudes and behaviors [17–20]. Corresponding associations between SEMB and risky sexual health attitudes and perceptions are evident in studies of adolescents and emerging adults [8,21–31].

¹The 14 General Social Survey administrations were conducted between 1986 and 2006 with nationally representative samples of U.S. adults who were asked if they had seen “an X-rated movie in the last year.” Data analysis was conducted by the authors using GSS Nesstar analytics (<http://www.norc.ox.ac.uk/GSS+Website/Data+Analysis/>).

More importantly, several recent studies—many spurred by concerns that adolescents and emerging adults might model health impacting sexual behaviors observed in pornography [32–34]—suggest a more direct link between SEMB and many sexual behaviors. Specifically, it has long been recognized that pornography portrays sexual behaviors that are inconsistent with “safe sex” recommendations [35], typically presenting sexual acts that involve high risks of HIV/STD transmission [36,37] and other preventable health outcomes including unintended pregnancy, physical trauma, and violence [38]. In heterosexual pornography, for example, anal intercourse—a highly predictive risk factor for sexually transmitted infections [39–42]—is commonly portrayed while risk-reducing behaviors such as condom use are uncommon [43]. Within this light, converging evidence from around the world suggests a correspondence between SEMB and sexual risk perceptions and behaviors among adolescents and emerging adults including earlier onset of oral sex and sexual intercourse [22,44,45]; greater likelihood of having multiple sexual partners, having sex more frequently, and engaging in anal sex [23,45–50]; more negative attitudes toward condoms and less frequent condom use [45,47,50,51]; and sexual harassment and violence [52–55].

Although the existing research illustrates strong linkages between SEMB and sexual perceptions and behaviors, it fails to illuminate the possibility of associations between SEMB and mental- and physical-health indicators. Yet, earlier studies suggest that there may be associations between SEMB, risky sexual behaviors, and physical- and mental-health indicators. Prior research, for instance, shows that several markers of poor mental health, including depression, are associated with risky sexual behaviors [56–62]. Further, there is some clinical [63,64] and population-based [65,66] evidence indicating possible linkages between depression and SEMB; however, clear evidence that depression is associated with SEMB is lacking. From a public health perspective, scrutiny of these associations is crucial to inform the development and implementation of sexual health intervention programs targeting behaviors associated with high risks of HIV/STD transmission and other preventable sexual health outcomes.

Against this backdrop, we explored whether selected mental- and physical-health indicators are associated with SEMBs in an Internet-using adult sample. Consistent with the expectations of others [3,6], we hypothesized that adults reporting SEMB

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