

Pornography Use: Information & Self-Assessment

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Understanding problematic use — and what you can do about it
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Part 1: Understanding Pornography Use

Pornography use is common and for most people does not create significant problems. Research estimates that roughly 70% of men and 30% of women report some regular exposure to pornography. The question is not whether you use it — it is whether your use is causing distress, loss of control, or disruption to your relationships and daily life.

What makes pornography use problematic?

Clinicians generally look at three core criteria when assessing whether pornography use has become problematic. These map onto the same framework used for other compulsive behaviours:

Loss of control

You use more than you intend to, find it difficult to stop, or have tried to cut back repeatedly without success.

Continued use despite consequences

Your use is causing problems — in your relationship, at work, or in your sense of self — and you continue anyway.

Salience and preoccupation

Pornography dominates your thinking. You find yourself craving it, planning around it, or using it to regulate emotions like stress, boredom, or loneliness.

How pornography use can affect intimacy

Heavy or compulsive pornography use is associated with several patterns that can erode sexual satisfaction and relational closeness:

Arousal adaptation

Repeated exposure to highly stimulating content can raise the threshold for arousal, making real-life intimacy feel comparatively less exciting. This is sometimes called 'pornography-induced arousal adaptation' and can contribute to erectile difficulties with a partner.

Unrealistic expectations

Pornography consistently misrepresents bodies, desire, consent, and sexual response. Over time, repeated exposure can shape expectations in ways that create dissatisfaction or pressure in real relationships.

Emotional withdrawal

For some, pornography becomes a substitute for emotional and physical intimacy rather than a complement to it. Partners often report feeling replaced, inadequate, or disconnected.

Values conflict

Many people who develop problematic use do so in conflict with their own values around sex, relationships, or faith. That conflict — not the use itself — is often the primary source of distress.

What treatment looks like

Problematic pornography use is well-supported by psychological treatment. The most evidence-based approaches include:

Cognitive Behavioural Therapy (CBT)

Identifies and restructures the thought patterns and emotional triggers that drive compulsive use.

Acceptance and Commitment Therapy (ACT)

Helps you clarify your values and build psychological flexibility, reducing the grip of urges without relying on suppression.

Couples therapy

When use has affected a relationship, couples-based work can help rebuild trust, improve communication, and address the relational dynamics that may be maintaining the problem.

Note: The ICD-11 (2022) formally recognizes Compulsive Sexual Behaviour Disorder as a clinical diagnosis. Whether or not your experience meets that threshold, distress and loss of control are valid reasons to seek support.

Part 2: Self-Assessment Survey

Answer each statement honestly. Mark **True** if it mostly fits your experience, **Maybe** if it applies to you sometimes or you're unsure, and **False** if it does not apply. Your answers are for your own reflection — no one will see them but you.

Control & Compulsivity

	True	Maybe	False
1. I use pornography more than I intend to and find it hard to stop.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. I have tried to cut back on my use without success.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. I can't stop thinking about pornography — it occupies my mind regularly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Looking at pornography no longer feels like a free choice.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. I use pornography to manage difficult emotions like stress, loneliness, or boredom.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. I need content that is more graphic or extreme than before to feel the same effect.

True Maybe False

Impact on Your Life

7. My pornography use has caused problems in my personal relationships.

True Maybe False

8. I have viewed pornography at work, in public, or in other inappropriate settings.

True Maybe False

9. I have reduced time with friends, family, or hobbies because of my use.

True Maybe False

10. I feel that my use is in conflict with my personal values or beliefs.

True Maybe False

11. I continue using pornography even though I know it is causing harm.

True Maybe False

12. I feel shame, guilt, or distress after using pornography.

True Maybe False

Impact on Intimacy & Sexual Function

13. Real-life sex is less satisfying than it used to be.

True Maybe False

14. I find it harder to become aroused with a partner than I do with pornography.

True Maybe False

15. I have delayed or avoided sex with a partner in favour of pornography.

True Maybe False

	True	Maybe	False
16. I compare my partner to what I see in pornography.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. I feel emotionally disconnected from my partner during sex.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. I am unable to orgasm without pornography.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Understanding Your Results

5 or more TRUE	5 or more MAYBE	Fewer than 5 TRUE or MAYBE
Your use is likely causing significant difficulty. Professional support is recommended.	Patterns worth paying attention to. Your use may be developing into a problem.	Your use may not be problematic, but any single TRUE answer may still be worth reflecting on.

Any single True answer related to relationship harm, loss of control, or continued use despite consequences is meaningful on its own and worth exploring with a professional.

Support is available.

Tami-lee Duncan offers individual and couples therapy for pornography use, sexual compulsivity, and the relational impact these patterns can have. Evidence-based treatment works.

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