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Newby, K & Philpott, A

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The eroticisation of condom use: Could porn be used to have a positive impact on public health?

Katie Newby

Faculty of Health and Life Sciences, Coventry University, UK

k.newby@coventry.ac.uk

Anne Philpott

The Pleasure Project

info@thepleasureproject.org

@thepleasureproj

Sex has been used to sell a vast array of products but paradoxically, rarely used to sell condoms. Their promotion has typically been left to the sex education and public health worlds where messages tend to focus on reducing risk and danger (Vance 1984; Foucault 1978; Rubin 1984; Knerr and Philpott 2012); ‘use condoms or you risk getting a sexually transmitted infection’. Increasing condom use for the prevention of sexually transmitted infections (STIs) and unwanted pregnancy is an important public health target. Globally, unsafe sex is one of the leading causes of death amongst young women (Mokdad et al. 2016). Thus, effective interventions are urgently needed. In this forum article, we present evidence from the field of cognitive and social psychology that encouraging individuals to make positive associations with condoms (that they can be sexy, pleasurable, etc.) could be an effective strategy for increasing their use. In particular, we argue that porn¹ itself could be the vehicle to do that.

¹ Throughout the article the term porn is used broadly to refer to any material that is created with the intention of sexually arousing the viewer.

Something that marketers have known for a long time is the power of brand association. Brands invest heavily in advertising to create durable impressions of their products amongst the public as, for example, luxurious, fun, sexy, or superior in some way. The marketing industry creates these associations by pairing their product with items that are perceived, at least by most, as positive along these dimensions. The intention is that next time we are faced with their product at the point of purchase, we are drawn to it more than their competitors' products because they are associated with things that we value. We may not know why we feel positive about these products or even remember the adverts but nonetheless, we are swayed by unconscious associations we have made with them (for example, see Kim et al. 1998; Shimp et al. 1991; Gibson 2008). How is this relevant? Well, what associations do you make with condoms? Here we are not talking about what you think of them based on a weighing up of the pros and cons (so called 'rational' processes based on explicit beliefs), but a more general feeling you have about them as described above (based on implicit beliefs).

The problem with the messages around risk and danger used to promote condoms is that they target the formation of explicit beliefs. The expectation is that when the time comes, individuals will weigh the pros and cons of condom use and choose to use them. Aside from arguments that for some people the non-use of condoms is a rational outcome of this decision-making process (e.g. because it increases intimacy or is necessary for economic survival), there is also the argument that sex can often be driven by more powerful implicit beliefs. We believe that encouraging individuals to make implicit associations between condoms and pleasure could be an effective health promotion strategy. Sexual pleasure is a highly significant, if not primary, motivating factor for sexual behaviour (WAS 2008) yet evidence suggests that we associate condoms with reduced pleasure (Randolf et al. 2007). In

order to explain why we think focussing on implicit beliefs about condoms is so important for their promotion, we must turn to the fields of cognitive and social psychology.

In cognitive and social psychology, there are a number of models which suggest that human decision making (such as condom use) is determined by the action of two processes: automatic and controlled (see Friese et al. 2008). Automatic processes are assumed to be fast, effortless, instinctive and unintentional. Controlled processes on the other hand are assumed to be based on high-order reasoning and to be more effortful, rational and intentional. It is proposed that controlled processes, which enable us to strive for goals such as losing weight, quitting smoking, and using condoms, can suppress the influence of automatic processes which produce cravings and urges that act against these goals. Of importance, several models propose that the relative weight of each process is shifted depending on the behaviour concerned and the context within which it is operating. It is predicted that under circumstances where a person has limited opportunity for controlled processing, automatic processes will prevail. The sexual context of condom use fulfils many of the criteria that would predict behaviour being strongly influenced by automatic processing. Studies have shown, for example, that arousal dampens controlled processing, enabling the automatic system to have greater influence (Ellis et al. 2016; Ariely and Loewenstein 2006). Similarly, factors such as being drunk, high, feeling rushed to make a decision, and low self-efficacy for condom use, can suppress the controlled system. Thus, condom use is primarily determined by implicit beliefs generated by the automatic system, which typically prioritises individuals' most basic wants and needs, including pleasure.

At the point of sex then, if our controlled processing is suppressed, it is these more general feelings about condoms that will determine our actions. For this reason, it is vitally important that implicit beliefs about condoms are positive. What we propose is that public health would benefit from using creative approaches to build positive associations with

condoms, especially between condoms and pleasure, given the prioritisation of pleasure within sexual encounters. In psychology, a technique for achieving this is known as ‘Evaluative Conditioning’ (for reviews, see De Houwer et al. 2001; Hofmann et al. 2010). The theory is that intervention content that builds positive associations (pleasure, enjoyment) with a stimulus (condoms), will then in the future lead to an experience of these feelings when the stimulus is recalled or experienced. If individuals have positive implicit beliefs about condoms, then at the time they are needed, the automatic system will be more in line with the goal-directed intentions of the controlled system. Or in other words, if we have associated condoms with positive immediate outcomes such as pleasure, then we are more likely to use them when our less ‘controlled’ or automatic decision-making processes take over. Under these circumstances, less or no effort is required to suppress urges to forego condoms because they are already perceived as intrinsically sexy, pleasurable and so on.

This leads to the question of how to go about implementing associative learning techniques. We propose that this could be achieved through erotic or pornographic literature, pictures or film. To be effective, the material would need to be arousing and for condoms to be associated with that arousal. Evidence that this type of strategy is likely to be effective is provided by a meta-analysis of sexual risk-reduction interventions integrating a safer-sex eroticization component (Scott-Sheldon and Johnson 2005). In the twenty-one experimental studies – which were either randomized control trials or had a quasi-experimental design with an adequate control group – three methods for eroticizing safer sex were used: a visual erotic component, such as a video, poster or brochure; an activity, such as creating erotic ways to use condoms, have safer sex or writing a sexual fantasy; and reading erotic short stories. Participants in eroticized safer-sex interventions showed significant risk reduction behaviour compared to control groups, and the study concluded that eroticizing safer sex leads to more

risk-preventive attitudes, which in turn facilitates less risky sexual behaviour and an increase in condom use.

As evident by this special issue, pornography is an important topic in public health. Our companion forum articles have discussed the conceptualisation of pornography as a public health issue and we support the call for more research to better understand its potential impact. Erotic material, including film, developed for public health purposes can be responsible and ethical, demonstrating condom use within relationships where sex is consensual, respectful, and mutually pleasurable and enjoyable. The Pleasure Project and a few others have worked on producing such material, working with porn film makers to create more 'responsible' and diverse erotica (www.thepleasureproject.org/pleasuremap). The Pleasure Project, for example, has been consulted by porn producers on a number of projects ranging from creating single safer sex scenes to entire safer sex pornographic films. Often this is with the intention of encouraging safer sex attitudes and practices from a feminist, queer or health perspective.

The intention of this piece is to present theory and evidence in favour of eroticising condoms and to stimulate debate. We are keen to assess professional and public appetite for such an approach. This type of strategy has been almost entirely overlooked to date despite evidence that it may work well. This is not to say that efforts to appeal to rational thought and to increase condom-use confidence and skills should be overlooked, but instead that behaviour change interventions should additionally attempt to align the goals of both the controlled and automatic systems such that deliberate conscious goals are less likely to be sabotaged. We challenge the public health world to think beyond the use of limited messages of fear and disease to promote condom use, and to additionally embrace sexualised and erotic messages that could work well to further enhance use.

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